

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.

ShePAC

ADDRESS (number and street) ▼

PO Box 7439

Check if different than previously reported. (ACC)

Arlington

VA

22207

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

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

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

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

Election on in the State of

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

Election on in the State of

5. Covering Period 04 / 01 / 2012 through 06 / 30 / 2012

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

Type or Print Name of Treasurer Tim Crawford

Signature of Treasurer

Tim Crawford

[Electronically Filed]

Date

07 / 11 / 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3X

Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

ShePAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="21174.61"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="35255.00"/>	<input type="text" value="66909.12"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="56429.61"/>	<input type="text" value="66909.12"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="18277.84"/>	<input type="text" value="28757.29"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="38151.77"/>	<input type="text" value="38151.83"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

ShePAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2150.00	3150.00
(ii) Unitemized	675.00	4540.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2825.00	7690.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	2825.00	7690.00
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.).....	32430.00	59219.12
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))..... ▶	35255.00	66909.12
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	35255.00	66909.12

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	17377.84	27857.29
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	17377.84	27857.29
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	900.00	900.00
(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)).....	900.00	900.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	18277.84	28757.29
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	18277.84	28757.29

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	2825.00	7690.00
34. Total Contribution Refunds (from Line 28(d))	900.00	900.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1925.00	6790.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	17377.84	27857.29
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	17377.84	27857.29

: 97 `A-G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XN
Transaction ID :

ShePac did no advocacy in the period. All vendors over \$200 reported.

Form/Schedule:
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 22
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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)
ShePAC

Full Name (Last, First, Middle Initial) A. Tim Crawford		Date of Receipt 04 / 02 / 2012 Transaction ID : AA674E11415E44C9DA9A
Mailing Address 6165 Mori St.		Amount of Each Receipt this Period 900.00
City Mc Lean	State VA	Zip Code 22101-3148
FEC ID number of contributing federal political committee. C	Name of Employer self employed	Occupation consultant
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

Full Name (Last, First, Middle Initial) B. Karen Nussle		Date of Receipt 04 / 04 / 2012 Transaction ID : A9928267A3F94437BAE6
Mailing Address 8643 Mt. Vernon Hwy		Amount of Each Receipt this Period 250.00
City Alexandria	State VA	Zip Code 22309-2030
FEC ID number of contributing federal political committee. C	Name of Employer Self (Ripple Communications)	Occupation consultant
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Jayne Plank PhD.		Date of Receipt 06 / 26 / 2012 Transaction ID : A9478177B30D84C34BCC
Mailing Address PO Box 327		Amount of Each Receipt this Period 1000.00
City Kensington	State MD	Zip Code 20895-0327
FEC ID number of contributing federal political committee. C	Name of Employer N/A	Occupation n/a
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	2150.00
TOTAL This Period (last page this line number only).....▶	2150.00

**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 8 OF 22
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ShePAC

Full Name (Last, First, Middle Initial) A. Carol Kelly		Date of Receipt MM / DD / YYYY 06 / 14 / 2012 Transaction ID : AAC96FB8651D04EC0863
Mailing Address 3901 Highwood Court NW		Amount of Each Receipt this Period 1000.00 non contribution account
City Washington	State DC	Zip Code 20007-2132
FEC ID number of contributing federal political committee. C		
Name of Employer Natl Assn of Chain Drug Stores	Occupation government affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Amanda West		Date of Receipt MM / DD / YYYY 06 / 22 / 2012 Transaction ID : AB56728B7336C461BBEC
Mailing Address 1021 N. Garfield Street		Amount of Each Receipt this Period 250.00 non contribution account
City Arlington	State VA	Zip Code 22201-2548
FEC ID number of contributing federal political committee. C		
Name of Employer McGuireWoods	Occupation Lawyer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Christy Stutzman		Date of Receipt MM / DD / YYYY 06 / 25 / 2012 Transaction ID : A7581D81DD86A49CE845
Mailing Address 250 W 600 N		Amount of Each Receipt this Period 250.00 non contribution account
City Howe	State IN	Zip Code 46746-9476
FEC ID number of contributing federal political committee. C		
Name of Employer Ava Laurenne Bride	Occupation Retailer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 22
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ShePAC

Full Name (Last, First, Middle Initial)
A. Constance Ryan

Mailing Address 3830 South 176 Circle

City Omaha State NE Zip Code 68130-2225

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

Name of Employer Streck, Inc. Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2012

Transaction ID : **A7D6C0ECA1C074CFEBD**

Amount of Each Receipt this Period
 2500.00

non contribution account

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

Mailing Address 733 15th St. NW

City Washington State DC Zip Code 20005-2112

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

Name of Employer Keller & Heckman LLP Occupation law

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2012

Transaction ID : **A5C21F293338649DD9E1**

Amount of Each Receipt this Period
 250.00

non contribution account

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

Mailing Address 401 6th st SE

City Washington State DC Zip Code 20003-2704

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

Name of Employer New Magellan Occupation Business Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2012

Transaction ID : **A6D86E1CD61C1444C9D1**

Amount of Each Receipt this Period
 250.00

non contribution account

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 22
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ShePAC

Full Name (Last, First, Middle Initial) A. National Rifle Association		Date of Receipt MM / DD / YYYY 06 / 28 / 2012 Transaction ID : A30D8EE25C4A14392919
Mailing Address 11250 Waples Mill Rd.		Amount of Each Receipt this Period 10000.00 non contribution account
City Fairfax	State VA	Zip Code 22030-6003
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 10000.00	
Name of Employer N/A	Occupation n/a	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Kathy Wright		Date of Receipt MM / DD / YYYY 06 / 24 / 2012 Transaction ID : A486BAB065ECB42E19BE
Mailing Address 1734 N. George Mason Dr.		Amount of Each Receipt this Period 250.00 non contribution account
City Arlington	State VA	Zip Code 22205-3621
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 250.00	
Name of Employer Baylor University	Occupation Higher Education	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Rina Shah		Date of Receipt MM / DD / YYYY 06 / 25 / 2012 Transaction ID : AD218063A579B441D92F
Mailing Address 1025 First Street		Amount of Each Receipt this Period 1000.00 non contribution account
City Washington	State DC	Zip Code 20003-5318
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 1000.00	
Name of Employer Rilax Strategies, LLC	Occupation consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....	11250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 22
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ShePAC

A. ANN WUTKE
Full Name (Last, First, Middle Initial)

Mailing Address 6666 ODANA RD

City Madison	State WI	Zip Code 53719-1012
-----------------	-------------	------------------------

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

Name of Employer Self-Employed	Occupation finance
-----------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	01	/	2012

Transaction ID : A9F404B107B2B4AB78B8

Amount of Each Receipt this Period

250.00

non contribution account

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

Mailing Address 411 Arlington Ave.

City Elmhurst	State IL	Zip Code 60126-3914
------------------	-------------	------------------------

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

Name of Employer Marquette University	Occupation student
--	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	21	/	2012

Transaction ID : A1AAE232B713246EC89D

Amount of Each Receipt this Period

250.00

non contribution account

c. kathy widerborg
Full Name (Last, First, Middle Initial)

Mailing Address 1907 redbud ln

City Bloomington	State IL	Zip Code 61704-2773
---------------------	-------------	------------------------

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

Name of Employer self	Occupation surgeon
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	25	/	2012

Transaction ID : AB55FECD1F4BD403FBCA

Amount of Each Receipt this Period

500.00

non contribution account

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 22
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ShePAC

Full Name (Last, First, Middle Initial)
A. Charlotte Sims

Mailing Address 8200 Kinbershell Place

City State Zip Code
Henrico VA 23229-8436

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

Name of Employer Occupation
Yesterday's Change Office Assistant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
06 / 25 / 2012

Transaction ID : AA90DAFD42829462E833

Amount of Each Receipt this Period
2500.00

non contribution account

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

Mailing Address 7501 Democracy Blvd #437

City State Zip Code
Bethesda MD 20817-1278

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

Name of Employer Occupation
Livingston Group Director of Administration

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
06 / 18 / 2012

Transaction ID : AF875EC6CD9134DB98C3

Amount of Each Receipt this Period
250.00

non contribution account

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

Mailing Address 1705 Calhoun St.

City State Zip Code
New Orleans LA 70118-6103

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

Name of Employer Occupation
N/A n/a

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
06 / 28 / 2012

Transaction ID : A2AC3B9FD168849D4A9C

Amount of Each Receipt this Period
2500.00

non contribution account

SUBTOTAL of Receipts This Page (optional).....	5250.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 22
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ShePAC

A. Barbara Rishel
Full Name (Last, First, Middle Initial)

Mailing Address 3230 East Watts Rd.
Box 1555

City North Platte State NE Zip Code 69101

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

Name of Employer self employed Occupation farmer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
05 / 23 / 2012
Transaction ID : A7639AB9423EB4E139F9

Amount of Each Receipt this Period
250.00
non-contribution account

B. C. Peter McClymont
Full Name (Last, First, Middle Initial)

Mailing Address 7611 Addison Court

City Lincoln State NE Zip Code 68516-6738

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

Name of Employer self Occupation farmer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
05 / 23 / 2012
Transaction ID : AEB140736507540B2BE7

Amount of Each Receipt this Period
1000.00
non contribution account

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

Mailing Address 3011 Griffon Street East

City Danville State CA Zip Code 94506-5033

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

Name of Employer Altamont Strategies Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
06 / 19 / 2012
Transaction ID : A08726D68DDAA4027939

Amount of Each Receipt this Period
250.00
non contribution account

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 22
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ShePAC

A. Jendayi Frazer
Full Name (Last, First, Middle Initial)
Mailing Address 2601 Gadsby Place
City Alexandria State VA Zip Code 22311-4928
FEC ID number of contributing federal political committee. **C**
Name of Employer Carnegie Mellon University Occupation Academic
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 15 / 2012
Transaction ID : A07E4C778FD6B4082A98
Amount of Each Receipt this Period 2500.00
non contribution account

B. Bethany Field
Full Name (Last, First, Middle Initial)
Mailing Address 2730 S. Veitch Street
City Arlington State VA Zip Code 22206-3057
FEC ID number of contributing federal political committee. **C**
Name of Employer American Trucking Associations Occupation Director, Political Affairs
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 25 / 2012
Transaction ID : AFB42C9123004C59809
Amount of Each Receipt this Period 250.00
non contribution account

C. Cathy Gillespie
Full Name (Last, First, Middle Initial)
Mailing Address 9382 Mt. Vernon Circle
City Alexandria State VA Zip Code 22309-3219
FEC ID number of contributing federal political committee. **C**
Name of Employer Ed Gillespie Strategies Occupation associate
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 19 / 2012
Transaction ID : AD81F43E92030419A86E
Amount of Each Receipt this Period 2500.00
non contribution account

SUBTOTAL of Receipts This Page (optional).....	5250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 22
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ShePAC

Full Name (Last, First, Middle Initial) A. Robert Evnen		Date of Receipt MM / DD / YYYY 05 / 23 / 2012
Mailing Address 301 S. 13th St. Suite 500		Transaction ID : A43D49DCEA7FA45C9A13
City Lincoln	State NE Zip Code 68508-2578	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Woods and Aiken	Occupation Attorney	non contribution account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B.		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) C.		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	29750.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
ShePAC

Full Name (Last, First, Middle Initial)

A. Upstream Communications

Mailing Address 1609 Shoal Creek
#203

City Austin State TX Zip Code 78101

Purpose of Disbursement internet ads and fundraising, non-contribution account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 01 / 2012

Transaction ID : B3E7699F725DD45A1931

Amount of Each Disbursement this Period

5472.64

Full Name (Last, First, Middle Initial)

B. Upstream Communications

Mailing Address 1609 Shoal Creek
#203

City Austin State TX Zip Code 78101

Purpose of Disbursement Internet ads and fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 01 / 2012

Transaction ID : BD2DB45819A1044AC90D

Amount of Each Disbursement this Period

1480.93

Full Name (Last, First, Middle Initial)

C. Deluxe Business Sys.

Mailing Address 3680 Victoria St. N

City Shoreview State MN Zip Code 55126

Purpose of Disbursement checks

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 02 / 2012

Transaction ID : B49881803006745E5ACF

Amount of Each Disbursement this Period

107.10

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

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

7060.67

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
ShePAC

Full Name (Last, First, Middle Initial)

A. Upstream Communications

Mailing Address 1609 Shoal Creek
#203

City Austin State TX Zip Code 78101

Purpose of Disbursement
Website and Internet fundraising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : BAE38B5D5220E420A843

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Upstream Communications

Mailing Address 1609 Shoal Creek
#203

City Austin State TX Zip Code 78101

Purpose of Disbursement
website and internet fundraising non contribution account

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : B39EADC4252B140D79E5

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Aristotle

Mailing Address 205 Pennsylvania Ave., SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
compliance, non-contribution account

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : B0043A30304F9432A9EA

Amount of Each Disbursement this Period

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
ShePAC

Full Name (Last, First, Middle Initial)
A. Northstar Strategies

Mailing Address 36B Fountainebleau

City New Orleans State LA Zip Code 70125

Purpose of Disbursement
Air fare, Lodging, Rental Car, Printing, Meals, non-contribution account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 05 / 2012

Transaction ID : **B2851E9412D6A434585C**

Amount of Each Disbursement this Period: 3003.81

Category/Type

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

Mailing Address 333 108th Ave., NE

City Bellevue State WA Zip Code 98004

Purpose of Disbursement
Air fare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 05 / 15 / 2012

Transaction ID : **B628758D24F1F4E18854**

Amount of Each Disbursement this Period: 416.60

Category/Type

[MEMO ITEM]
Air fare

Full Name (Last, First, Middle Initial)
C. Enterprise Rental Cars

Mailing Address 600 Corporate Park Dr.

City St. Louis State MO Zip Code 63105

Purpose of Disbursement
Rental Car

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 05 / 15 / 2012

Transaction ID : **BF54B4BFE95D64B388A4**

Amount of Each Disbursement this Period: 210.99

Category/Type

[MEMO ITEM]
Rental Car

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3003.81

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
ShePAC

Full Name (Last, First, Middle Initial)

A. Holiday Inn Express

Mailing Address 400 E. Butler Pkwy.

City Gainsville State GA Zip Code 30501

Purpose of Disbursement
Lodging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2012

Transaction ID : BC11B115ECA04017A29

Amount of Each Disbursement this Period

646.50

[MEMO ITEM]
Lodging

Full Name (Last, First, Middle Initial)

B. Enterprise Rental Cars

Mailing Address 600 Corporate Park Dr.

City St. Louis State MO Zip Code 63105

Purpose of Disbursement
rental car

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 24 / 2012

Transaction ID : BE0FFEEBC29914387A37

Amount of Each Disbursement this Period

63.18

[MEMO ITEM]
rental car

Full Name (Last, First, Middle Initial)

C. Embassy Suites

Mailing Address 1040 P Street

City Lincoln State NE Zip Code 68508

Purpose of Disbursement
Lodging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 24 / 2012

Transaction ID : BBDB71BF396294EE3BC4

Amount of Each Disbursement this Period

250.81

[MEMO ITEM]
Lodging

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
ShePAC

Full Name (Last, First, Middle Initial)

A. Expedia.com

Mailing Address 333 108th Ave., NE

City Bellevue State WA Zip Code 98004

Purpose of Disbursement
air fare

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 24 / 2012

Transaction ID : B280535385345456BBDF

Amount of Each Disbursement this Period

1016.20

[MEMO ITEM]
air fare

Full Name (Last, First, Middle Initial)

B. Tim Crawford

Mailing Address 6165 Mori St.

City McLean State VA Zip Code 22101-3148

Purpose of Disbursement
Printing-non contribution account

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 24 / 2012

Transaction ID : B6C7903B5883042B9BF0

Amount of Each Disbursement this Period

893.00

Full Name (Last, First, Middle Initial)

C. Kwik Kopy

Mailing Address 1356 Old Chain Bridge Rd.

City McLean State VA Zip Code 22101

Purpose of Disbursement
printing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 13 / 2012

Transaction ID : BA28BFCA8675943FE815

Amount of Each Disbursement this Period

893.00

[MEMO ITEM]
printing

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

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

893.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
ShePAC

Full Name (Last, First, Middle Initial)

A. Northstar Strategies

Mailing Address 36B Fountainebleau

City State Zip Code
New Orleans LA 70125

Purpose of Disbursement
fundraising fee, printing and postage, non contribution account

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	23	/	2012

Transaction ID : B6464C1BDB9C2452F9A9

Amount of Each Disbursement this Period

999.97

Full Name (Last, First, Middle Initial)

B. VistaPrint

Mailing Address 95 Hayden Ave.

City State Zip Code
Lexington MA 02424

Purpose of Disbursement
printing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	13	/	2012

Transaction ID : BDE1DD2BC407B4BF69ED

Amount of Each Disbursement this Period

235.58

[MEMO ITEM]
printing

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

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

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

999.97

17110.74

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
ShePAC

Full Name (Last, First, Middle Initial)

A. Tim Crawford

Mailing Address 6165 Mori St.

City Mc Lean State VA Zip Code 22101-3148

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y
04 / 06 / 2012

Transaction ID : B4F0B0938F3BF4EFCA1A

Amount of Each Disbursement this Period

900.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

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

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

900.00

900.00