

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines EMILY's List

ADDRESS (number and street) 1120 Connecticut Avenue NW Ste 1100 Washington DC 20036 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00193433 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, Convention, General, Special, Runoff (d) 30-Day Post-Election Report for the: General, Runoff, Special

5. Covering Period 10 01 2005 through 10 31 2005

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

Type or Print Name of Treasurer Caroline C Fines

Signature of Treasurer Electronically Filed by Caroline C Fines Date 02 24 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name
EMILY's List

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	5

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>	Y	Y	Y	Y	2	0	0	5		402153.46
Y	Y	Y	Y							
2	0	0	5							
(b) Cash on Hand at Beginning of Reporting Period	786271.25									
(c) Total Receipts (from Line 19)	1110592.18	12380011.32								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1896863.43	12782164.78								
7. Total Disbursements (from Line 31)	1025491.18	11910792.53								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	871372.25	871372.25								
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)	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**

Write or Type Committee Name
EMILY's List

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	5

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	433935.33	5664121.13
(i) Itemized (use Schedule A)	215483.84	4456717.14
(ii) Unitemized	649419.17	10120838.27
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	11500.00	53105.80
(c) Other Political Committees (such as PACs)	660919.17	10173944.07
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
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)	89100.47	329974.14
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	6681.38	36165.31
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	353891.16	1839927.80
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	353891.16	1839927.80
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	1110592.18	12380011.32
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	756701.02	10540083.52

DETAILED SUMMARY PAGE

of Disbursements

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	353945.08	2401737.86
(ii) Non-Federal Share.....	353946.53	2397448.49
(b) Other Federal Operating Expenditures.....	291785.63	6811368.06
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	999677.24	11610554.41
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	8212.94	203736.05
24. Independent Expenditure (use Schedule E)	0.00	-4934.75
25. Coordinated Expenditures Made by Party Committees (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	12200.56	28234.56
(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))	12200.56	28234.56
29. Other Disbursements.....	5400.44	73202.26
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	1025491.18	11910792.53
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	671544.65	9513344.04

DETAILED SUMMARY PAGE
of Disbursements

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)	660919.17	10173944.07
34. Total Contribution Refunds (from Line 28(d))	12200.56	28234.56
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	648718.61	10145709.51
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	645730.71	9213105.92
37. Offsets to Operating Expenditures (from Line 15, page 3)	89100.47	329974.14
38. Net Operating Expenditures (subtract Line 37 from Line 36)	556630.24	8883131.78

METHOD OF ALLOCATION FOR:

- SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)
EMILY's List

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

- _____ Presidential-Only Election Year (28% Federal)
- _____ Presidential and Senate Election Year (36% Federal)
- _____ Senate-Only Election Year (21% Federal)
- _____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees

Flat Minimum Federal Percentage

If the committee will allocate using the flat minimum percentage of 50% federal funds, check

or

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %

Nonfederal..... %

This ratio applies to (check all that apply):

Administrative Generic Voter Drive Public Communications Referencing Party Only

SCHEDULE H2 (FEC Form 3X) ALLOCATION RATIOS

PAGE 7 / 1975

NAME OF COMMITTEE (In Full)

EMILY's List

RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.

Methods of allocation :

- I. FUNDRAISING activities are allocated using the 'funds received method' where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.
For PACs Only : Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

ACTIVITY OR EVENT IDENTIFIER

Fundraising/PSP 2005

ACTIVITY IS:

 Fundraising Direct Candidate Support

CHECK IF THE RATIO IS:

 New Revised Same as Previously Reported

FEDERAL %

50.00 %

NONFEDERAL %

50.00 %Transaction ID:
H2-EL-859

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 EMILY's List

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Merrill Lynch-NF#4	M M / D D / Y Y Y Y 10 / 07 / 2005	180299.44

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative		163462.06	Transaction ID: H3-EL-853
ii) Generic Voter Drive			Transaction ID:
iii) Exempt Activities			Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)			
a) PSP05	16837.38		Transaction ID: H3-EL-854
b)			Transaction ID:
c) Total Amount Transferred for Direct Fundraising		16837.38	
v) Direct Candidate Support (List of Activity or Event Identifier)			
a)			Transaction ID:
b)			Transaction ID:
c) Total Amount Transferred For Direct Candidate Support			
vi) Public Communications Referring Only to Party (Made by PAC)			Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 EMILY's List

NAME OF ACCOUNT Merrill Lynch-NF#1	DATE OF RECEIPT <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	1		2	0	0	5	TOTAL AMOUNT TRANSFERRED <table border="1"> <tr> <td>30000.00</td> </tr> </table>	30000.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		2	1		2	0	0	5														
30000.00																							

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	<table border="1"><tr><td>30000.00</td></tr></table>	30000.00	Transaction ID: H3-EL-855
30000.00			
ii) Generic Voter Drive	<table border="1"><tr><td> </td></tr></table>		Transaction ID:
iii) Exempt Activities	<table border="1"><tr><td> </td></tr></table>		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)			
a) _____ <table border="1"><tr><td> </td></tr></table>			Transaction ID:
b) _____ <table border="1"><tr><td> </td></tr></table>			Transaction ID:
c) Total Amount Transferred for Direct Fundraising	<table border="1"><tr><td> </td></tr></table>		
v) Direct Candidate Support (List of Activity or Event Identifier)			
a) _____ <table border="1"><tr><td> </td></tr></table>			Transaction ID:
b) _____ <table border="1"><tr><td> </td></tr></table>			Transaction ID:
c) Total Amount Transferred For Direct Candidate Support	<table border="1"><tr><td> </td></tr></table>		
vi) Public Communications Referring Only to Party (Made by PAC)	<table border="1"><tr><td> </td></tr></table>		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	<table border="1"><tr><td> </td></tr></table>	
TOTAL This Period (Generic Voter Drive)	<table border="1"><tr><td> </td></tr></table>	
TOTAL This Period (Exempt Activities)	<table border="1"><tr><td> </td></tr></table>	
TOTAL This Period (Direct Fundraising)	<table border="1"><tr><td> </td></tr></table>	
TOTAL This Period (Direct Candidate Support)	<table border="1"><tr><td> </td></tr></table>	
TOTAL This Period (Public Communications Referring Only to Party)	<table border="1"><tr><td> </td></tr></table>	
TOTAL This Period (Total Amount Transferred)	<table border="1"><tr><td> </td></tr></table>	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 EMILY's List

NAME OF ACCOUNT Bank of America-NF- #3	DATE OF RECEIPT M M / D D / Y Y Y Y 10 / 21 / 2005	TOTAL AMOUNT TRANSFERRED 63591.72
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BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	59046.70	Transaction ID: H3-EL-856
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) PSP05	4545.02	Transaction ID: H3-EL-858
b)		Transaction ID:
c) Total Amount Transferred for Direct Fundraising	4545.02	
v) Direct Candidate Support (List of Activity or Event Identifier)		
a)		Transaction ID:
b)		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 EMILY's List

NAME OF ACCOUNT Merrill Lynch-NF#4	DATE OF RECEIPT M M / D D / Y Y Y Y 10 / 21 / 2005	TOTAL AMOUNT TRANSFERRED 80000.00
---------------------------------------	--	--------------------------------------

BREAKDOWN OF TRANSFER RECEIVED		80000.00
i) Total Administrative		Transaction ID: H3-EL-857
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		
		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED	
TOTAL This Period (Administrative)	332508.76
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	21382.40
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred)	353891.16

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Cor-O-Van			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Dept. #0778			Allocated Activity or Event Year-To-Date 3928299.94		
City	State	Zip Code	Category/ Type		
Los Angeles	CA	90084-0778			
Purpose of Disbursement: Moving Expenses			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="5"/>		
Activity or Event Identifier: AVD05			Transaction ID: H4-78913		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
484.69		484.70		969.39

B. Full Name (Last, First, Middle Initial) Gilbert & Wolfand			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Suite 320 2201 Wisconsin Ave., NW			Allocated Activity or Event Year-To-Date 3932439.94		
City	State	Zip Code	Category/ Type		
Washington,	DC	20007			
Purpose of Disbursement: Accounting			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="5"/>		
Activity or Event Identifier: AVD05			Transaction ID: H4-78914		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2070.00		2070.00		4140.00

C. Full Name (Last, First, Middle Initial) Mary L Hodge			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 908 Harrison Circle			Allocated Activity or Event Year-To-Date 3932539.94		
City	State	Zip Code	Category/ Type		
Alexandria	VA	22304			
Purpose of Disbursement: Travel/ Accommodations			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="5"/>		
Activity or Event Identifier: AVD05			Transaction ID: H4-78915		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
50.00		50.00		100.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2604.69		2604.70		5209.39

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ikon Office Solutions			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 827468			Allocated Activity or Event Year-To-Date 3935073.50		
City Philadelphia	State PA	Zip Code 19182-7468	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="5"/>		
Purpose of Disbursement: Copier Equipment Rental			Transaction ID: H4-78916		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1266.78		1266.78		2533.56

B. Full Name (Last, First, Middle Initial) Metro Computer Supplies			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1200 18th Street, NW Suite LL101			Allocated Activity or Event Year-To-Date 3935502.01		
City Washington	State DC	Zip Code 20036	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="5"/>		
Purpose of Disbursement: Office Supplies Expenses			Transaction ID: H4-78918		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
214.25		214.26		428.51

C. Full Name (Last, First, Middle Initial) Office Depot			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 633211			Allocated Activity or Event Year-To-Date 3935659.20		
City Cincinnati	State OH	Zip Code 45263-3211	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="5"/>		
Purpose of Disbursement: Office Supplies Expenses			Transaction ID: H4-78920		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
78.59		78.60		157.19

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1559.62		1559.64		3119.26

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Perkins Coie

Mailing Address
1201 Third Avenue 40th Floor

City State Zip Code
Seattle WA 98101-3099

Purpose of Disbursement:
Legal Services

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3949514.00

Date 10 / 06 / 2005

Transaction ID: H4-78921

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6927.40		6927.40		13854.80

B. Full Name (Last, First, Middle Initial)
Perkins Coie

Mailing Address
1201 Third Avenue 40th Floor

City State Zip Code
Seattle WA 98101-3099

Purpose of Disbursement:
Legal Services

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3950098.54

Date 10 / 06 / 2005

Transaction ID: H4-78922

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
292.27		292.27		584.54

C. Full Name (Last, First, Middle Initial)
Perkins Coie

Mailing Address
1201 Third Avenue 40th Floor

City State Zip Code
Seattle WA 98101-3099

Purpose of Disbursement:
Legal Services

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3956944.70

Date 10 / 06 / 2005

Transaction ID: H4-78923

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3423.08		3423.08		6846.16

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10642.75		10642.75		21285.50

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Prime Office Products

Mailing Address
PO Box 8629

City State Zip Code
Elkridge MD 21075

Purpose of Disbursement:
Office Supplies Expenses

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
3957350.48

Date MM / DD / YYYY
10 / 06 / 2005

Transaction ID: H4-78924

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
202.89		202.89		405.78

B. Full Name (Last, First, Middle Initial)
Edna Romero

Mailing Address
7111 Halleck Street

City State Zip Code
District Heights MD 20747

Purpose of Disbursement:
Petty Cash

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
3957450.48

Date MM / DD / YYYY
10 / 06 / 2005

Transaction ID: H4-78934

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
50.00		50.00		100.00

C. Full Name (Last, First, Middle Initial)
AT&T

Mailing Address
Payment Center

City State Zip Code
Sacramento CA 95887-0001

Purpose of Disbursement:
Telephone

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
3958097.49

Date MM / DD / YYYY
10 / 06 / 2005

Transaction ID: H4-78935

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
323.50		323.51		647.01

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
576.39		576.40		1152.79

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Sheads & Associates, Ltd.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Prince William Square 303 Post Office Rd. Bldg A			Allocated Activity or Event Year-To-Date 3960873.58		
City Waldorf	State MD	Zip Code 20602	Date <input type="text" value="10"/> / <input type="text" value="06"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Contribution Processing			Transaction ID: H4-78936		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1388.04		1388.05		2776.09

B. Full Name (Last, First, Middle Initial) Thomas House Coffee Service			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2309 Kansas Ave.			Allocated Activity or Event Year-To-Date 3960983.78		
City Silver Spring	State MD	Zip Code 20910	Date <input type="text" value="10"/> / <input type="text" value="06"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Office Supplies Expenses			Transaction ID: H4-78937		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
55.10		55.10		110.20

C. Full Name (Last, First, Middle Initial) Thomas House Coffee Service			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2309 Kansas Ave.			Allocated Activity or Event Year-To-Date 3961166.24		
City Silver Spring	State MD	Zip Code 20910	Date <input type="text" value="10"/> / <input type="text" value="06"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Office Supplies Expenses			Transaction ID: H4-78938		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
91.23		91.23		182.46

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1534.37		1534.38		3068.75

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Margaret Van Cleave

Mailing Address
438 New Jersey Ave SE

City State Zip Code
Washington DC 20003

Purpose of Disbursement:
Office Supplies Reimbursement

Activity or Event Identifier:
AVD05

See Attached Memo Entry

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
3961264.24

Date MM / DD / YYYY
10 / 06 / 2005

Transaction ID: H4-78940

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
49.00		49.00		98.00

B. Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address
PO Box 790406

City State Zip Code
St. Louis MO 63179-0406

Purpose of Disbursement:
Telephone

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
3961379.46

Date MM / DD / YYYY
10 / 06 / 2005

Transaction ID: H4-78941

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
57.61		57.61		115.22

C. Full Name (Last, First, Middle Initial)
Working Assets

Mailing Address
P.O. Box 2041

City State Zip Code
Mechanicsburg PA 17055

Purpose of Disbursement:
Telephone

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
3961422.82

Date MM / DD / YYYY
10 / 06 / 2005

Transaction ID: H4-78942

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.68		21.68		43.36

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
128.29		128.29		256.58

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Patricia Williams			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3 Wyndham Drive			Allocated Activity or Event Year-To-Date 3961622.82		
City Portola Valley	State CA	Zip Code 94028	Date MM / DD / YYYY 10 / 06 / 2005		
Purpose of Disbursement: Local Transportation			Transaction ID: H4-78943		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
100.00		100.00		200.00

B. Full Name (Last, First, Middle Initial) John Hancock c/o City Bank Delaware			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1615 Brett Road Lock Box 7122			Allocated Activity or Event Year-To-Date 3997745.40		
City New Castle	State DE	Zip Code 19720	Date MM / DD / YYYY 10 / 07 / 2005		
Purpose of Disbursement: Employment Pension/ 401(k)			Transaction ID: H4-79111		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18061.29		18061.29		36122.58

C. Full Name (Last, First, Middle Initial) American Express Travel Related Services Co Inc			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 3997760.40		
City Ft Lauderdale	State FL	Zip Code 33336-0001	Date MM / DD / YYYY 10 / 13 / 2005		
Purpose of Disbursement: Publication & Dues			Transaction ID: H4-78956		
Activity or Event Identifier: AVD05 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.50		7.50		15.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18168.79		18168.79		36337.58

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
American Express
Mailing Address
PO Box 360001
City Ft Lauderdale **State** FL **Zip Code** 33336-0001
Purpose of Disbursement:
Meeting/Conference
Activity or Event Identifier:
AVD05
See Attached Memo Entry

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
3997911.70
Date 10 / 13 / 2005
Transaction ID: H4-78957

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.65		75.65		151.30

B. Full Name (Last, First, Middle Initial)
American Express
Mailing Address
PO Box 360001
City Ft Lauderdale **State** FL **Zip Code** 33336-0001
Purpose of Disbursement:
Travel/ Accommodations
Activity or Event Identifier:
AVD05
See Attached Memo Entry

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
3998052.88
Date 10 / 13 / 2005
Transaction ID: H4-78958

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
70.59		70.59		141.18

C. Full Name (Last, First, Middle Initial)
American Express
Mailing Address
PO Box 360001
City Ft Lauderdale **State** FL **Zip Code** 36666-0001
Purpose of Disbursement:
Travel/Accommodation /Meals
Activity or Event Identifier:
AVD05
See Attached Memo Entry

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
3998144.56
Date 10 / 13 / 2005
Transaction ID: H4-78961

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
45.84		45.84		91.68

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
192.08		192.08		384.16

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 3998148.02																						
City Ft Lauderdale	State FL	Zip Code 36666-0001	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>1</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	3	/	2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y																
1	0	/	1	3	/	2	0	0	5																
Purpose of Disbursement: Office Supplies Expenses			Category/ Type																						
Activity or Event Identifier: AVD05 See Attached Memo Entry			Transaction ID: H4-78962																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.73		1.73		3.46

B. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 3998222.02																						
City Ft Lauderdale	State FL	Zip Code 36666-0001	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>1</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	3	/	2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y																
1	0	/	1	3	/	2	0	0	5																
Purpose of Disbursement: Postage			Category/ Type																						
Activity or Event Identifier: AVD05 See Attached Memo Entry			Transaction ID: H4-78963																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.00		37.00		74.00

C. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 3998233.01																						
City Ft Lauderdale	State FL	Zip Code 36666-0001	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>1</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	3	/	2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y																
1	0	/	1	3	/	2	0	0	5																
Purpose of Disbursement: Travel/Accommodation /Meals			Category/ Type																						
Activity or Event Identifier: AVD05 See Attached Memo Entry			Transaction ID: H4-78964																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.49		5.50		10.99

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
44.22		44.23		88.45

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 3998263.86		
City Ft Lauderdale	State FL	Zip Code 36666-0001	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Travel/Accommodation /Meals			Transaction ID: H4-78965		
Activity or Event Identifier: AVD05 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.42		15.43		30.85

B. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 3998388.18		
City Ft Lauderdale	State FL	Zip Code 36666-0001	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Travel/Accommodation /Meals			Transaction ID: H4-78966		
Activity or Event Identifier: AVD05 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
62.16		62.16		124.32

C. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 3998404.22		
City Ft Lauderdale	State FL	Zip Code 36666-0001	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Parking Fees			Transaction ID: H4-78967		
Activity or Event Identifier: AVD05 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.02		8.02		16.04

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
85.60		85.61		171.21

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
[Empty]	[Empty]	[Empty]

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
Suite 0001

City Chicago	State IL	Zip Code 60679-0001	Category/ Type
Purpose of Disbursement: Travel/Accommodation /Meals			

Activity or Event Identifier:
PSP05
See Attached Memo Entry

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
191868.09

Date / /
Transaction ID: H4-78968

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.69		1.69		3.38

B. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
Suite 0001

City Chicago	State IL	Zip Code 60679-0001	Category/ Type
Purpose of Disbursement: Office Supplies Expenses			

Activity or Event Identifier:
PSP05
See Attached Memo Entry

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
192136.53

Date / /
Transaction ID: H4-78969

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
134.22		134.22		268.44

C. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
PO Box 360001

City Ft Lauderdale	State FL	Zip Code 33336-0001	Category/ Type
Purpose of Disbursement: Office Supplies Expenses			

Activity or Event Identifier:
AVD05
See Attached Memo Entry

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
3998488.61

Date / /
Transaction ID: H4-78971

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.19		42.20		84.39

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
178.10		178.11		356.21

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 3999522.47		
City	State	Zip Code	Category/Type		
Ft Lauderdale	FL	33336-0001			
Purpose of Disbursement: Travel/Accommodation /Meals					
Activity or Event Identifier: AVD05 See Attached Memo Entry			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/> Transaction ID: H4-78972		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
516.93		516.93		1033.86

B. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 4000420.36		
City	State	Zip Code	Category/Type		
Ft Lauderdale	FL	33336-0001			
Purpose of Disbursement: Travel/Accommodation /Meals					
Activity or Event Identifier: AVD05 See Attached Memo Entry			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/> Transaction ID: H4-78973		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
448.94		448.95		897.89

C. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 4001001.25		
City	State	Zip Code	Category/Type		
Ft Lauderdale	FL	33336-0001			
Purpose of Disbursement: Travel/ Accommodations					
Activity or Event Identifier: AVD05 See Attached Memo Entry			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/> Transaction ID: H4-78974		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
290.44		290.45		580.89

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1256.31		1256.33		2512.64

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 4001076.25		
City Ft Lauderdale	State FL	Zip Code 33336-0001	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Travel/ Accommodations			Transaction ID: H4-78975		
Activity or Event Identifier: AVD05 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.50		37.50		75.00

B. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 2853			Allocated Activity or Event Year-To-Date 192157.41		
City New York	State NY	Zip Code 10116-2853	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Travel/Accommodation /Meals			Transaction ID: H4-78976		
Activity or Event Identifier: PSP05 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.44		10.44		20.88

C. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 2853			Allocated Activity or Event Year-To-Date 192231.03		
City New York	State NY	Zip Code 10116-2853	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Office Supplies Expenses			Transaction ID: H4-78977		
Activity or Event Identifier: PSP05 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
36.81		36.81		73.62

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
84.75		84.75		169.50

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
PO Box 360001

City State Zip Code
Ft Lauderdale FL 33336

Purpose of Disbursement:
Catering/Facilities Travel

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4008494.66

Activity or Event Identifier:
AVD05

Date / /

Transaction ID: H4-78978

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3709.20

3709.21

7418.41

B. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
PO Box 360001

City State Zip Code
Ft Lauderdale FL 33336

Purpose of Disbursement:
Employee Recruitment Travel

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4008811.01

Activity or Event Identifier:
AVD05

Date / /

Transaction ID: H4-78979

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

158.17

158.18

316.35

C. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
PO Box 360001

City State Zip Code
Ft Lauderdale FL 33336

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4011156.50

Activity or Event Identifier:
AVD05

Date / /

Transaction ID: H4-78980

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1172.74

1172.75

2345.49

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5040.11

5040.14

10080.25

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
PO Box 360001

City Ft Lauderdale	State FL	Zip Code 33336	Category/ Type
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Purpose of Disbursement:
Travel/ Accommodations

Activity or Event Identifier:
AVD05
See Attached Memo Entry

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4011269.20

Date / /
Transaction ID: H4-78981

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
56.35		56.35		112.70

B. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
PO Box 360001

City Ft Lauderdale	State FL	Zip Code 33336	Category/ Type
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Purpose of Disbursement:
Travel/ Accommodations

Activity or Event Identifier:
AVD05
See Attached Memo Entry

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4013746.98

Date / /
Transaction ID: H4-78982

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1238.89		1238.89		2477.78

C. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
PO Box 360001

City Ft Lauderdale	State FL	Zip Code 33336	Category/ Type
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Purpose of Disbursement:
Travel/ Accommodations

Activity or Event Identifier:
AVD05
See Attached Memo Entry

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4016918.29

Date / /
Transaction ID: H4-78983

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1585.65		1585.66		3171.31

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2880.89		2880.90		5761.79

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
American Express
Mailing Address
PO Box 360001
City Ft Lauderdale **State** FL **Zip Code** 33336
Purpose of Disbursement:
Travel/ Accommodations
Activity or Event Identifier:
AVD05
See Attached Memo Entry

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
4017106.69
Date 10 / 13 / 2005
Transaction ID: H4-78984

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
94.20		94.20		188.40

B. Full Name (Last, First, Middle Initial)
American Express
Mailing Address
PO Box 360001
City Ft Lauderdale **State** FL **Zip Code** 33336
Purpose of Disbursement:
Travel/Accommodation /Meals/Office
Activity or Event Identifier:
AVD05
See Attached Memo Entry

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
4017316.66
Date 10 / 13 / 2005
Transaction ID: H4-78985

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
104.98		104.99		209.97

C. Full Name (Last, First, Middle Initial)
American Express
Mailing Address
PO Box 360001
City Ft Lauderdale **State** FL **Zip Code** 33336
Purpose of Disbursement:
Telephone
Activity or Event Identifier:
AVD05
See Attached Memo Entry

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
4026163.33
Date 10 / 13 / 2005
Transaction ID: H4-78986

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4423.33		4423.34		8846.67

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4622.51		4622.53		9245.04

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
PO Box 360001

City Ft Lauderdale	State FL	Zip Code 33336	Category/ Type
Purpose of Disbursement: Internet Services			

Activity or Event Identifier:
AVD05
See Attached Memo Entry

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4026202.33

Date / /
Transaction ID: H4-78987

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.50		19.50		39.00

B. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
PO Box 360001

City Ft Lauderdale	State FL	Zip Code 33336	Category/ Type
Purpose of Disbursement: Travel/ Accommodations			

Activity or Event Identifier:
AVD05
See Attached Memo Entry

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4026559.13

Date / /
Transaction ID: H4-78988

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
178.40		178.40		356.80

C. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
PO Box 360001

City Ft Lauderdale	State FL	Zip Code 33336	Category/ Type
Purpose of Disbursement: Travel/ Accommodations			

Activity or Event Identifier:
PSP05
See Attached Memo Entry

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
192350.23

Date / /
Transaction ID: H4-78989

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
59.60		59.60		119.20

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
257.50		257.50		515.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 4026885.97		
City	State	Zip Code	Category/ Type		
Ft Lauderdale	FL	33336-0001			
Purpose of Disbursement: Travel/Accommodation /Meals			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/>		
Activity or Event Identifier: AVD05 See Attached Memo Entry			Transaction ID: H4-79001		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
163.42		163.42		326.84

B. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 192563.36		
City	State	Zip Code	Category/ Type		
Ft Lauderdale	FL	33336-0001			
Purpose of Disbursement: Travel/Accommodation /Meals			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/>		
Activity or Event Identifier: PSP05 See Attached Memo Entry			Transaction ID: H4-79004		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
106.56		106.57		213.13

C. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 192600.36		
City	State	Zip Code	Category/ Type		
Ft Lauderdale	FL	33336-0001			
Purpose of Disbursement: Postage			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/>		
Activity or Event Identifier: PSP05 See Attached Memo Entry			Transaction ID: H4-79005		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.50		18.50		37.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
288.48		288.49		576.97

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 192783.79		
City Ft Lauderdale	State FL	Zip Code 33336-0001	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Travel/ Accommodations			Transaction ID: H4-79006		
Activity or Event Identifier: PSP05 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
91.71		91.72		183.43

B. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 4026960.97		
City Ft Lauderdale	State FL	Zip Code 33336-0001	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Publication & Dues			Transaction ID: H4-79007		
Activity or Event Identifier: AVD05 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.50		37.50		75.00

C. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 1270			Allocated Activity or Event Year-To-Date 4027080.47		
City Newark	State NJ	Zip Code 07101-1270	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Internet Services			Transaction ID: H4-79010		
Activity or Event Identifier: AVD05 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
59.75		59.75		119.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
188.96		188.97		377.93

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 1270			Allocated Activity or Event Year-To-Date 4027095.42		
City	State	Zip Code	Category/ Type		
Newark	NJ	07101-1270			
Purpose of Disbursement: Internet Services			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/>		
Activity or Event Identifier: AVD05 See Attached Memo Entry			Transaction ID: H4-79013		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.47		7.48		14.95

B. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 1270			Allocated Activity or Event Year-To-Date 4027401.71		
City	State	Zip Code	Category/ Type		
Newark	NJ	07101-1270			
Purpose of Disbursement: Travel/Accommodation /Meals			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/>		
Activity or Event Identifier: AVD05 See Attached Memo Entry			Transaction ID: H4-79014		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
153.14		153.15		306.29

C. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 1270			Allocated Activity or Event Year-To-Date 4027597.14		
City	State	Zip Code	Category/ Type		
Newark	NJ	07101-1270			
Purpose of Disbursement: Office Supplies Expenses			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/>		
Activity or Event Identifier: AVD05 See Attached Memo Entry			Transaction ID: H4-79015		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
97.71		97.72		195.43

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
258.32		258.35		516.67

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
P.O. Box 1270

City State Zip Code
Newark NJ 07101-1270

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Activity or Event Identifier:
AVD05

See Attached Memo Entry

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4029450.00

Date MM / DD / YYYY
10 / 13 / 2005

Transaction ID: H4-79016

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
926.43		926.43		1852.86

B. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
P.O. Box 1270

City State Zip Code
Newark NJ 07101-1270

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Activity or Event Identifier:
AVD05

See Attached Memo Entry

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4029515.86

Date MM / DD / YYYY
10 / 13 / 2005

Transaction ID: H4-79017

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.93		32.93		65.86

C. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
P.O. Box 1270

City State Zip Code
Newark NJ 07101-1270

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Activity or Event Identifier:
AVD05

See Attached Memo Entry

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4029853.16

Date MM / DD / YYYY
10 / 13 / 2005

Transaction ID: H4-79018

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
168.65		168.65		337.30

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1128.01		1128.01		2256.02

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 4029908.16		
City	State	Zip Code	Category/ Type		
Ft. Lauderdale	FL	33336			
Purpose of Disbursement: Travel/ Accommodations			Date M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Transaction ID: H4-79024		
Activity or Event Identifier: AVD05 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.50		27.50		55.00

B. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 4030183.40		
City	State	Zip Code	Category/ Type		
Ft Lauderdale	FL	33336-0001			
Purpose of Disbursement: Telephone			Date M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Transaction ID: H4-79026		
Activity or Event Identifier: AVD05 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
137.62		137.62		275.24

C. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Suite 0001			Allocated Activity or Event Year-To-Date 4030258.40		
City	State	Zip Code	Category/ Type		
Chicago	IL	60679-0001			
Purpose of Disbursement: Publication & Dues			Date M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Transaction ID: H4-79028		
Activity or Event Identifier: AVD05 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.50		37.50		75.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
202.62		202.62		405.24

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 4030268.39		
City Ft Lauderdale	State FL	Zip Code 33336-0001	Category/ Type		
Purpose of Disbursement: Travel/ Accommodations					
Activity or Event Identifier: AVD05 See Attached Memo Entry			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/> Transaction ID: H4-79033		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.99		5.00		9.99

B. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 4030437.89		
City Ft Lauderdale	State FL	Zip Code 33336-0001	Category/ Type		
Purpose of Disbursement: Parking Fees					
Activity or Event Identifier: AVD05 See Attached Memo Entry			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/> Transaction ID: H4-79034		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
84.75		84.75		169.50

C. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 4030635.94		
City Ft Lauderdale	State FL	Zip Code 33336-0001	Category/ Type		
Purpose of Disbursement: Telephone					
Activity or Event Identifier: AVD05 See Attached Memo Entry			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/> Transaction ID: H4-79035		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
99.02		99.03		198.05

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
188.76		188.78		377.54

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 4031195.17		
City	State	Zip Code	Category/Type		
Ft Lauderdale	FL	33336-0001			
Purpose of Disbursement: Travel/Accommodation /Meals/Office					
Activity or Event Identifier: AVD05 See Attached Memo Entry			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="5"/> Transaction ID: H4-79036		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
279.61		279.62		559.23

B. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 4031568.21		
City	State	Zip Code	Category/Type		
Ft Lauderdale	FL	33336-0001			
Purpose of Disbursement: Travel/Accommodation /Meals					
Activity or Event Identifier: AVD05 See Attached Memo Entry			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="5"/> Transaction ID: H4-79037		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
186.52		186.52		373.04

C. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 4031592.53		
City	State	Zip Code	Category/Type		
Ft Lauderdale	FL	33336-0001			
Purpose of Disbursement: Computer Supplies/Hardware					
Activity or Event Identifier: AVD05 See Attached Memo Entry			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="5"/> Transaction ID: H4-79042		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.16		12.16		24.32

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
478.29		478.30		956.59

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
American Express
Mailing Address
PO Box 360001
City Ft Lauderdale **State** FL **Zip Code** 33336-0001
Purpose of Disbursement:
Office Supplies Expenses
Activity or Event Identifier:
AVD05
See Attached Memo Entry

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
4031645.42
Date 10 / 13 / 2005
Transaction ID: H4-79043

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.44		26.45		52.89

B. Full Name (Last, First, Middle Initial)
American Express
Mailing Address
PO Box 360001
City Ft Lauderdale **State** FL **Zip Code** 33336-0001
Purpose of Disbursement:
Printing
Activity or Event Identifier:
AVD05
See Attached Memo Entry

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
4031809.47
Date 10 / 13 / 2005
Transaction ID: H4-79044

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
82.02		82.03		164.05

C. Full Name (Last, First, Middle Initial)
American Express
Mailing Address
PO Box 360001
City Ft Lauderdale **State** FL **Zip Code** 33336-0001
Purpose of Disbursement:
Travel/ Accommodations
Activity or Event Identifier:
AVD05
See Attached Memo Entry

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
4031814.47
Date 10 / 13 / 2005
Transaction ID: H4-79045

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.50		2.50		5.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
110.96		110.98		221.94

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
PO Box 360001

City State Zip Code
Ft Lauderdale FL 33336-0001

Purpose of Disbursement:
Travel/Accommodation /Meals

Activity or Event Identifier:
AVD05

See Attached Memo Entry

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4032110.49

Date / /
Transaction ID: H4-79046

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
148.01		148.01		296.02

B. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
PO Box 360001

City State Zip Code
Ft Lauderdale FL 33336-0001

Purpose of Disbursement:
Travel/Accommodation /Meals

Activity or Event Identifier:
PSP05

See Attached Memo Entry

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
192849.13

Date / /
Transaction ID: H4-79047

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.67		32.67		65.34

C. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
PO Box 360001

City State Zip Code
Ft Lauderdale FL 33336-0001

Purpose of Disbursement:
Office Supplies Expenses

Activity or Event Identifier:
PSP05

See Attached Memo Entry

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
192925.97

Date / /
Transaction ID: H4-79049

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
38.42		38.42		76.84

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
219.10		219.10		438.20

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 192973.67		
City Ft Lauderdale	State FL	Zip Code 33336-0001	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Printing			Transaction ID: H4-79050		
Activity or Event Identifier: PSP05 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.85		23.85		47.70

B. Full Name (Last, First, Middle Initial) Campaign Team, Inc. c/o Anna Lidman			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 37 Brookview Terrace			Allocated Activity or Event Year-To-Date 193115.79		
City Portland	State ME	Zip Code 04102	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Deliveries			Transaction ID: H4-79054		
Activity or Event Identifier: PSP05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
71.06		71.06		142.12

C. Full Name (Last, First, Middle Initial) Campaign Team, Inc. c/o Anna Lidman			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 37 Brookview Terrace			Allocated Activity or Event Year-To-Date 193672.63		
City Portland	State ME	Zip Code 04102	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Equipment Rental			Transaction ID: H4-79055		
Activity or Event Identifier: PSP05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
278.42		278.42		556.84

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
373.33		373.33		746.66

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Campaign Team, Inc. c/o Anna Lidman

Mailing Address
37 Brookview Terrace

City	State	Zip Code	Category/ Type
Portland	ME	04102	

Purpose of Disbursement:
Local Transportation

Activity or Event Identifier:
PSP05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
194006.56

Date / /
Transaction ID: H4-79056

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
166.96		166.97		333.93

B. Full Name (Last, First, Middle Initial)
Campaign Team, Inc. c/o Anna Lidman

Mailing Address
37 Brookview Terrace

City	State	Zip Code	Category/ Type
Portland	ME	04102	

Purpose of Disbursement:
Office Supplies Expenses

Activity or Event Identifier:
PSP05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
194091.14

Date / /
Transaction ID: H4-79057

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.29		42.29		84.58

C. Full Name (Last, First, Middle Initial)
Campaign Team, Inc. c/o Anna Lidman

Mailing Address
37 Brookview Terrace

City	State	Zip Code	Category/ Type
Portland	ME	04102	

Purpose of Disbursement:
Travel/ Accommodations

Activity or Event Identifier:
PSP05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
195553.58

Date / /
Transaction ID: H4-79058

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
731.22		731.22		1462.44

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
940.47		940.48		1880.95

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Cogent Communications, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 791087			Allocated Activity or Event Year-To-Date 4033129.51		
City	State	Zip Code	Category/ Type		
Baltimore	MD	21279-1087			
Purpose of Disbursement: Internet Services			Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2005"/>		
Activity or Event Identifier: AVD05			Transaction ID: H4-79060		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="509.51"/>		<input type="text" value="509.51"/>		<input type="text" value="1019.02"/>

B. Full Name (Last, First, Middle Initial) Kathleen Coyne-McCoy			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 267 Gleaner Chapel Road			Allocated Activity or Event Year-To-Date 4033240.90		
City	State	Zip Code	Category/ Type		
North Scituate	RI	02857			
Purpose of Disbursement: Travel/ Accommodations			Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2005"/>		
Activity or Event Identifier: AVD05			Transaction ID: H4-79061		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="55.69"/>		<input type="text" value="55.70"/>		<input type="text" value="111.39"/>

C. Full Name (Last, First, Middle Initial) DC Government Office of Tax and Revenue			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 96384			Allocated Activity or Event Year-To-Date 4033359.58		
City	State	Zip Code	Category/ Type		
Washington	DC	20090			
Purpose of Disbursement: Taxes - Sales & Use			Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2005"/>		
Activity or Event Identifier: AVD05			Transaction ID: H4-79062		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="59.34"/>		<input type="text" value="59.34"/>		<input type="text" value="118.68"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="624.54"/>		<input type="text" value="624.55"/>		<input type="text" value="1249.09"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Deer ParkSpring Water Processing Center

Mailing Address
P.O. Box 52271

City	State	Zip Code
Phoenix	AR	85072-2271

Purpose of Disbursement:
Office Supplies Expenses

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4033649.66

Date / /

Transaction ID: H4-79063

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
145.04		145.04		290.08

B. Full Name (Last, First, Middle Initial)
Cynthia Easton

Mailing Address
22800 SW 156th Avenue

City	State	Zip Code
Miami	FL	33170

Purpose of Disbursement:
Consulting Fundraising

Activity or Event Identifier:
PSP05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
196461.08

Date / /

Transaction ID: H4-79064

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
453.75		453.75		907.50

C. Full Name (Last, First, Middle Initial)
Federal Express

Mailing Address
P. O. Box 371461

City	State	Zip Code
Pittsburg	PA	15250-7461

Purpose of Disbursement:
Deliveries

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4033678.85

Date / /

Transaction ID: H4-79065

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.59		14.60		29.19

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
613.38		613.39		1226.77

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Initial Tropical Plant			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 95409			Allocated Activity or Event Year-To-Date 4033859.15		
City	State	Zip Code	Category/ Type		
Palatine	IL	60095			
Purpose of Disbursement: Office Supplies Expenses			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/>		
Activity or Event Identifier: AVD05			Transaction ID: H4-79067		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
90.15		90.15		180.30

B. Full Name (Last, First, Middle Initial) Rochelle Sachs Levin			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 22800 SW 157th Avenue			Allocated Activity or Event Year-To-Date 197031.08		
City	State	Zip Code	Category/ Type		
Miami	FL	33170			
Purpose of Disbursement: Local Transportation			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/>		
Activity or Event Identifier: PSP05			Transaction ID: H4-79068		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
285.00		285.00		570.00

C. Full Name (Last, First, Middle Initial) Rochelle Sachs Levin			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 22800 SW 157th Avenue			Allocated Activity or Event Year-To-Date 197383.27		
City	State	Zip Code	Category/ Type		
Miami	FL	33170			
Purpose of Disbursement: Telephone			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/>		
Activity or Event Identifier: PSP05 See Attached Memo Entry			Transaction ID: H4-79069		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
176.09		176.10		352.19

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
551.24		551.25		1102.49

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Lexis Nexis			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P. O. Box 7247-7090			Allocated Activity or Event Year-To-Date 198715.72		
City Philadelphia	State PA	Zip Code 19170	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Computer Services			Transaction ID: H4-79070		
Activity or Event Identifier: PSP05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
666.22		666.23		1332.45

B. Full Name (Last, First, Middle Initial) MCI			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P. O. Box 85053			Allocated Activity or Event Year-To-Date 198994.32		
City Louisville	State KY	Zip Code 40285	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Telephone			Transaction ID: H4-79071		
Activity or Event Identifier: PSP05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
139.30		139.30		278.60

C. Full Name (Last, First, Middle Initial) Sherry Merfish			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2720 Pittsburg			Allocated Activity or Event Year-To-Date 199044.04		
City Houston	State TX	Zip Code 77005	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Local Transportation			Transaction ID: H4-79072		
Activity or Event Identifier: PSP05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.86		24.86		49.72

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
830.38		830.39		1660.77

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Sherry Merfish			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2720 Pittsburg			Allocated Activity or Event Year-To-Date 199086.09		
City Houston	State TX	Zip Code 77005	Date MM / DD / YYYY 10 / 13 / 2005		
Purpose of Disbursement: Postage			Transaction ID: H4-79073		
Activity or Event Identifier: PSP05 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.02		21.03		42.05

B. Full Name (Last, First, Middle Initial) Sherry Merfish			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2720 Pittsburg			Allocated Activity or Event Year-To-Date 199251.97		
City Houston	State TX	Zip Code 77005	Date MM / DD / YYYY 10 / 13 / 2005		
Purpose of Disbursement: Telephone			Transaction ID: H4-79074		
Activity or Event Identifier: PSP05 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
82.94		82.94		165.88

C. Full Name (Last, First, Middle Initial) Sherry Merfish			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2720 Pittsburg			Allocated Activity or Event Year-To-Date 199300.57		
City Houston	State TX	Zip Code 77005	Date MM / DD / YYYY 10 / 13 / 2005		
Purpose of Disbursement: Local Transportation			Transaction ID: H4-79076		
Activity or Event Identifier: PSP05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.30		24.30		48.60

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
128.26		128.27		256.53

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Sherry Merfish

Mailing Address
2720 Pittsburg

City	State	Zip Code
Houston	TX	77005

Purpose of Disbursement:
Office Supplies Reimbursement

Activity or Event Identifier:
PSP05

See Attached Memo Entry

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
199402.69

Date / /

Transaction ID: H4-79077

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
51.06		51.06		102.12

B. Full Name (Last, First, Middle Initial)
Sherry Merfish

Mailing Address
2720 Pittsburg

City	State	Zip Code
Houston	TX	77005

Purpose of Disbursement:
Telephone

Activity or Event Identifier:
PSP05

See Attached Memo Entry

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
199598.22

Date / /

Transaction ID: H4-79078

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
97.76		97.77		195.53

C. Full Name (Last, First, Middle Initial)
Sherry Merfish

Mailing Address
2720 Pittsburg

City	State	Zip Code
Houston	TX	77005

Purpose of Disbursement:
Travel/Accommodation /Meals

Activity or Event Identifier:
PSP05

See Attached Memo Entry

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
200901.10

Date / /

Transaction ID: H4-79079

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
651.44		651.44		1302.88

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
800.26		800.27		1600.53

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Anne Moses

Mailing Address
251 28th Street

City State Zip Code
San Francisco CA 94131

Purpose of Disbursement:
Telephone Reimbursement

Category/
Type

Activity or Event Identifier:
PSP05

See Attached Memo Entry

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

200954.67

Date 10 / 13 / 2005

Transaction ID: H4-79080

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.78		26.79		53.57

B. Full Name (Last, First, Middle Initial)
Pitney Bowes Credit Corp.

Mailing Address
P.O. Box 85460

City State Zip Code
Louisville KY 40285-5460

Purpose of Disbursement:
Equipment Rental

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4035535.59

Date 10 / 13 / 2005

Transaction ID: H4-79087

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
838.22		838.22		1676.44

C. Full Name (Last, First, Middle Initial)
Progressive Wisconsin, Inc.

Mailing Address
203 S. Paterson St. Suite 400

City State Zip Code
Madison WI 53704

Purpose of Disbursement:
Rent

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4036435.59

Date 10 / 13 / 2005

Transaction ID: H4-79088

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
450.00		450.00		900.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1315.00		1315.01		2630.01

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Progressive Wisconsin, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address 203 S. Paterson St. Suite 400			Allocated Activity or Event Year-To-Date 403655.59																		
City State Zip Code Madison WI 53704	Category/ Type		Date <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>0</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>1</td><td>3</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>			M	M	1	0	D	D	1	3	Y	Y	Y	Y	2	0	0	5
M	M																				
1	0																				
D	D																				
1	3																				
Y	Y	Y	Y																		
2	0	0	5																		
Purpose of Disbursement: Telephone			Transaction ID: H4-79089																		
Activity or Event Identifier: AVD05																					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
60.00		60.00		120.00

B. Full Name (Last, First, Middle Initial) AT&T			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address Payment Center			Allocated Activity or Event Year-To-Date 4036578.02																		
City State Zip Code Sacramento CA 95887-0001	Category/ Type		Date <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>0</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>1</td><td>3</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>			M	M	1	0	D	D	1	3	Y	Y	Y	Y	2	0	0	5
M	M																				
1	0																				
D	D																				
1	3																				
Y	Y	Y	Y																		
2	0	0	5																		
Purpose of Disbursement: Telephone			Transaction ID: H4-79093																		
Activity or Event Identifier: AVD05																					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.21		11.22		22.43

C. Full Name (Last, First, Middle Initial) AT&T			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address Payment Center			Allocated Activity or Event Year-To-Date 4037166.22																		
City State Zip Code Sacramento CA 95887-0001	Category/ Type		Date <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>0</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>1</td><td>3</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>			M	M	1	0	D	D	1	3	Y	Y	Y	Y	2	0	0	5
M	M																				
1	0																				
D	D																				
1	3																				
Y	Y	Y	Y																		
2	0	0	5																		
Purpose of Disbursement: Telephone			Transaction ID: H4-79094																		
Activity or Event Identifier: AVD05																					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
294.10		294.10		588.20

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
365.31		365.32		730.63

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
AT&T

Mailing Address
Payment Center

City State Zip Code
Sacramento CA 95887-0001

Purpose of Disbursement:
Telephone

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4037222.50

Date 10 / 13 / 2005

Transaction ID: H4-79095

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
28.14 + 28.14 = 56.28

B. Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address
PO Box 17464

City State Zip Code
Baltimore MD 21297-1464

Purpose of Disbursement:
Telephone

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4042116.50

Date 10 / 13 / 2005

Transaction ID: H4-79099

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
2447.00 + 2447.00 = 4894.00

C. Full Name (Last, First, Middle Initial)
Wisconsin Dept of Revenue

Mailing Address
PO Box 8981

City State Zip Code
Madison WI 53708-8981

Purpose of Disbursement:
Taxes - Payroll

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4042491.50

Date 10 / 13 / 2005

Transaction ID: H4-79102

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
187.50 + 187.50 = 375.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
2662.64 + 2662.64 = 5325.28

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Wisconsin Dept of Revenue

Mailing Address
PO Box 8981

City	State	Zip Code
Madison	WI	53708-8981

Purpose of Disbursement:
Taxes - Payroll

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4043991.50

Date / /
Transaction ID: H4-79103

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
750.00		750.00		1500.00

B. Full Name (Last, First, Middle Initial)
Verizon

Mailing Address
PO Box 1

City	State	Zip Code
Worcester	MA	01654

Purpose of Disbursement:
Telephone

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4044255.92

Date / /
Transaction ID: H4-79466

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
132.21		132.21		264.42

C. Full Name (Last, First, Middle Initial)
Amanda Bogden

Mailing Address
2414 Observatory Pl, NW

City	State	Zip Code
Washington	DC	20007

Purpose of Disbursement:
Salaries

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4045287.30

Date / /
Transaction ID: H4-79113

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
515.69		515.69		1031.38

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1397.90		1397.90		2795.80

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) SaBrina Brown			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 1265			Allocated Activity or Event Year-To-Date 4047908.20		
City	State	Zip Code	Category/ Type		
North Beach	MD	20714			
Purpose of Disbursement: Salaries			Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Activity or Event Identifier: AVD05			Transaction ID: H4-79114		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="1310.45"/>		<input type="text" value="1310.45"/>		<input type="text" value="2620.90"/>

B. Full Name (Last, First, Middle Initial) Caroline Fines			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 10621 Regent Park Court			Allocated Activity or Event Year-To-Date 4049728.50		
City	State	Zip Code	Category/ Type		
Fairfax	VA	22030			
Purpose of Disbursement: Salaries			Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Activity or Event Identifier: AVD05			Transaction ID: H4-79115		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="910.15"/>		<input type="text" value="910.15"/>		<input type="text" value="1820.30"/>

C. Full Name (Last, First, Middle Initial) Susan Finkle			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 11605 34th Place			Allocated Activity or Event Year-To-Date 4051217.33		
City	State	Zip Code	Category/ Type		
Beltsville	MD	20705			
Purpose of Disbursement: Salaries			Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Activity or Event Identifier: AVD05			Transaction ID: H4-79116		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="744.41"/>		<input type="text" value="744.42"/>		<input type="text" value="1488.83"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="2965.01"/>		<input type="text" value="2965.02"/>		<input type="text" value="5930.03"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Courtney Fry			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3140 Wisconsin Ave. NW Apt. 105			Allocated Activity or Event Year-To-Date 4052070.30		
City Washington	State DC	Zip Code 20016	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-79117		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
426.48		426.49		852.97

B. Full Name (Last, First, Middle Initial) Ray Keating			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 114 Adams Ct.			Allocated Activity or Event Year-To-Date 4054042.91		
City Walkersville	State MD	Zip Code 21793	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-79118		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
986.30		986.31		1972.61

C. Full Name (Last, First, Middle Initial) Britt Cocanour			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3100 Connecticut Avenue, NW Apt. 330			Allocated Activity or Event Year-To-Date 4057406.55		
City Washington	State DC	Zip Code 20008	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-79119		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1681.82		1681.82		3363.64

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3094.60		3094.62		6189.22

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ellen R Malcolm			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5060 Linnean Avenue, NW			Allocated Activity or Event Year-To-Date 4061676.43		
City	State	Zip Code	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Washington,	DC	20008			
Purpose of Disbursement: Salaries			Category/ Type		
Activity or Event Identifier: AVD05			Transaction ID: H4-79120		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2134.94		2134.94		4269.88

B. Full Name (Last, First, Middle Initial) Ellen L Moran			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 8220 Custer Rd			Allocated Activity or Event Year-To-Date 4065934.13		
City	State	Zip Code	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Bethesda	MD	20817			
Purpose of Disbursement: Salaries			Category/ Type		
Activity or Event Identifier: AVD05			Transaction ID: H4-79121		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2128.85		2128.85		4257.70

C. Full Name (Last, First, Middle Initial) Lisa Robillard			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4326 South 36th Street			Allocated Activity or Event Year-To-Date 4067576.20		
City	State	Zip Code	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Arlington	VA	22206			
Purpose of Disbursement: Salaries			Category/ Type		
Activity or Event Identifier: AVD05			Transaction ID: H4-79122		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
821.03		821.04		1642.07

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5084.82		5084.83		10169.65

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)
Larkin Barker

Mailing Address
120 Mackubori Street

City State Zip Code
St Paul MN 55102

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4067678.88

Date MM / DD / YYYY
10 / 15 / 2005

Transaction ID: H4-79123

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
51.34		51.34		102.68

B. Full Name (Last, First, Middle Initial)
Jeanne Duncan

Mailing Address
1416 Shepherd Street, NW

City State Zip Code
Washington DC 20011

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4070490.10

Date MM / DD / YYYY
10 / 15 / 2005

Transaction ID: H4-79124

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1405.61		1405.61		2811.22

C. Full Name (Last, First, Middle Initial)
Carrie Giddins

Mailing Address
4601 Connecticut Ave NW #909

City State Zip Code
Washington DC 20008

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4072139.47

Date MM / DD / YYYY
10 / 15 / 2005

Transaction ID: H4-79125

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
824.68		824.69		1649.37

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2281.63		2281.64		4563.27

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Katherine Goktepe

Mailing Address
1439 Mclean Mews Court

City State Zip Code
McLean VA 22101

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4073082.24

Activity or Event Identifier:
AVD05

Date MM / DD / YYYY
10 / 15 / 2005

Transaction ID: H4-79126

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
471.38		471.39		942.77

B. Full Name (Last, First, Middle Initial)
Ramona Oliver

Mailing Address
2311 North Front Street Apt 909

City State Zip Code
Harrisburg PA 17110

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4075952.03

Activity or Event Identifier:
AVD05

Date MM / DD / YYYY
10 / 15 / 2005

Transaction ID: H4-79127

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1434.89		1434.90		2869.79

C. Full Name (Last, First, Middle Initial)
Corinne Osborn

Mailing Address
3140 Wisconsin Avenue NW#414

City State Zip Code
Washington DC 20016

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4076177.27

Activity or Event Identifier:
AVD05

Date MM / DD / YYYY
10 / 15 / 2005

Transaction ID: H4-79128

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
112.62		112.62		225.24

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2018.89		2018.91		4037.80

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
[]	[]	[]

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Sara R Fewer			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 767 22nd Ave			Allocated Activity or Event Year-To-Date 4077030.48		
City	State	Zip Code	Category/Type		
San Francisco	CA	94121			
Purpose of Disbursement: Salaries					
Activity or Event Identifier: AVD05			Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2005"/> Transaction ID: H4-79129		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
426.60		426.61		853.21

B. Full Name (Last, First, Middle Initial) Kim Mathis			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3141 Martha Custis Dr.			Allocated Activity or Event Year-To-Date 4079401.89		
City	State	Zip Code	Category/Type		
Alexandria	VA	22302			
Purpose of Disbursement: Salaries					
Activity or Event Identifier: AVD05			Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2005"/> Transaction ID: H4-79130		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1185.70		1185.71		2371.41

C. Full Name (Last, First, Middle Initial) Edna Romero			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7111 Halleck Street			Allocated Activity or Event Year-To-Date 4080751.85		
City	State	Zip Code	Category/Type		
District Heights	MD	20747			
Purpose of Disbursement: Salaries					
Activity or Event Identifier: AVD05			Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2005"/> Transaction ID: H4-79131		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
674.98		674.98		1349.96

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2287.28		2287.30		4574.58

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Quiyana Washington

Mailing Address
5613 Elberton Court

City State Zip Code
Hyattsville MD 20781

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4082490.75

Date 10 / 15 / 2005

Transaction ID: H4-79132

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
869.45 + 869.45 = 1738.90

B. Full Name (Last, First, Middle Initial)
Yvonne Williams

Mailing Address
5412 Bradford Ct. #231

City State Zip Code
Alexandria VA 22311

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4083538.41

Date 10 / 15 / 2005

Transaction ID: H4-79133

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
523.83 + 523.83 = 1047.66

C. Full Name (Last, First, Middle Initial)
Paychex

Mailing Address
3060 Williams Drive #300

City State Zip Code
Fairfax VA 22031

Purpose of Disbursement:
Taxes - Payroll

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4138142.63

Date 10 / 15 / 2005

Transaction ID: H4-79134

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
27302.11 + 27302.11 = 54604.22

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
28695.39 + 28695.39 = 57390.78

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Paychex			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3060 Williams Drive #300			Allocated Activity or Event Year-To-Date 4151917.41		
City	State	Zip Code	Category/ Type		
Fairfax	VA	22031			
Purpose of Disbursement: Taxes - Payroll			Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Activity or Event Identifier: AVD05			Transaction ID: H4-79135		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="6887.39"/>		<input type="text" value="6887.39"/>		<input type="text" value="13774.78"/>

B. Full Name (Last, First, Middle Initial) Janet Ardrey			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 420 Greenbrier Court			Allocated Activity or Event Year-To-Date 4152009.76		
City	State	Zip Code	Category/ Type		
Fredericksburg	VA	22401			
Purpose of Disbursement: Salaries			Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Activity or Event Identifier: AVD05			Transaction ID: H4-79137		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="46.17"/>		<input type="text" value="46.18"/>		<input type="text" value="92.35"/>

C. Full Name (Last, First, Middle Initial) Hannah Carter			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1301 N. Lafayette			Allocated Activity or Event Year-To-Date 4152113.44		
City	State	Zip Code	Category/ Type		
Royal Oak	MI	48067			
Purpose of Disbursement: Salaries			Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Activity or Event Identifier: AVD05			Transaction ID: H4-79138		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="51.84"/>		<input type="text" value="51.84"/>		<input type="text" value="103.68"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="6985.40"/>		<input type="text" value="6985.41"/>		<input type="text" value="13970.81"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Lauren Caselli

Mailing Address
8 Smallwood Drive

City	State	Zip Code
Pittsford	NY	14534

Purpose of Disbursement:
Salaries

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4152227.42

Date / /

Transaction ID: H4-79139

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
56.99		56.99		113.98

B. Full Name (Last, First, Middle Initial)
Perry Collins

Mailing Address
GU Alumni Square 48

City	State	Zip Code
Washington	DC	20057

Purpose of Disbursement:
Salaries

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4152296.68

Date / /

Transaction ID: H4-79140

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34.63		34.63		69.26

C. Full Name (Last, First, Middle Initial)
Amy Drummond

Mailing Address
104 Roberts Lane #401

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement:
Salaries

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4153654.03

Date / /

Transaction ID: H4-79141

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
678.67		678.68		1357.35

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
770.29		770.30		1540.59

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Laura Fruge			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 420 Oklahoma Avenue, NE #102			Allocated Activity or Event Year-To-Date 4155930.04																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table> Transaction ID: H4-79142			M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	5	/	2	0	0	5
M	M	/				D	D	/	Y	Y	Y	Y													
1	0	/	1	5	/	2	0	0	5																
Washington	DC	20002																							
Purpose of Disbursement: Salaries			Category/ Type																						
Activity or Event Identifier: AVD05																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1138.00		1138.01		2276.01

B. Full Name (Last, First, Middle Initial) Andrea E Gottfried			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 666 Greenwich St			Allocated Activity or Event Year-To-Date 4157728.65																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table> Transaction ID: H4-79143			M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	5	/	2	0	0	5
M	M	/				D	D	/	Y	Y	Y	Y													
1	0	/	1	5	/	2	0	0	5																
New York	NY	10014																							
Purpose of Disbursement: Salaries			Category/ Type																						
Activity or Event Identifier: AVD05																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
899.30		899.31		1798.61

C. Full Name (Last, First, Middle Initial) Cheryl Gregory			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 4551 Sawgrass Ct.			Allocated Activity or Event Year-To-Date 4161865.48																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table> Transaction ID: H4-79144			M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	5	/	2	0	0	5
M	M	/				D	D	/	Y	Y	Y	Y													
1	0	/	1	5	/	2	0	0	5																
Alexandria	VA	22312																							
Purpose of Disbursement: Salaries			Category/ Type																						
Activity or Event Identifier: AVD05																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2068.41		2068.42		4136.83

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4105.71		4105.74		8211.45

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Julia Hejl

Mailing Address
10554 Brookview Dr.

City State Zip Code
Carmel IN 46032

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4161957.83

Activity or Event Identifier:
AVD05

Date MM / DD / YYYY
10 / 15 / 2005

Transaction ID: H4-79145

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.17		46.18		92.35

B. Full Name (Last, First, Middle Initial)
Judi Kanter

Mailing Address
267 Paseo Bernal Ave.

City State Zip Code
Moraga CA 94556

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4165043.71

Activity or Event Identifier:
AVD05

Date MM / DD / YYYY
10 / 15 / 2005

Transaction ID: H4-79146

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1542.94		1542.94		3085.88

C. Full Name (Last, First, Middle Initial)
Amie Kershner

Mailing Address
2209 E. Lombard St. #1

City State Zip Code
Baltimore MD 21231

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4166436.60

Activity or Event Identifier:
AVD05

Date MM / DD / YYYY
10 / 15 / 2005

Transaction ID: H4-79147

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
696.44		696.45		1392.89

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2285.55		2285.57		4571.12

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Alyssa Krop			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4525 N 20th Place			Allocated Activity or Event Year-To-Date 4167221.56		
City Arlington	State VA	Zip Code 22207	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-79148		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
392.48		392.48		784.96

B. Full Name (Last, First, Middle Initial) Julia Lamont			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4413 17th Street NW			Allocated Activity or Event Year-To-Date 4168272.19		
City Washington	State DC	Zip Code 20011	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-79149		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
525.31		525.32		1050.63

C. Full Name (Last, First, Middle Initial) Rochelle Sachs Levin			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 22800 SW 157th Avenue			Allocated Activity or Event Year-To-Date 4172614.75		
City Miami	State FL	Zip Code 33170	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-79150		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2171.28		2171.28		4342.56

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3089.07		3089.08		6178.15

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Judy Loeb Goldfein

Mailing Address
50 East 89th Street 6E

City	State	Zip Code
New York	NY	10128

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4175919.95

Activity or Event Identifier:
AVD05

Date

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

Transaction ID: H4-79151

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1652.60		1652.60		3305.20

B. Full Name (Last, First, Middle Initial)
Sarah Loebelson

Mailing Address
28 Buxton Landing

City	State	Zip Code
Riverside	CT	06878

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4175989.21

Activity or Event Identifier:
AVD05

Date

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

Transaction ID: H4-79152

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34.63		34.63		69.26

C. Full Name (Last, First, Middle Initial)
Colleen Medlock

Mailing Address
14637 Locustwood Lane

City	State	Zip Code
Silver Spring	MD	20905

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4176727.18

Activity or Event Identifier:
AVD05

Date

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

Transaction ID: H4-79153

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
368.98		368.99		737.97

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2056.21		2056.22		4112.43

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Sherry Merfish

Mailing Address
2720 Pittsburg

City Houston	State TX	Zip Code 77005	Category/ Type
Purpose of Disbursement: Salaries			

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4179866.07

Date / /

Transaction ID: H4-79154

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1569.44		1569.45		3138.89

B. Full Name (Last, First, Middle Initial)
Anne Moses

Mailing Address
251 28th Street

City San Francisco	State CA	Zip Code 94131	Category/ Type
Purpose of Disbursement: Salaries			

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4182745.63

Date / /

Transaction ID: H4-79155

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1439.78		1439.78		2879.56

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

Mailing Address
345 E. 94th St Apt 3H

City New York	State NY	Zip Code 10128	Category/ Type
Purpose of Disbursement: Salaries			

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4183496.06

Date / /

Transaction ID: H4-79156

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
375.21		375.22		750.43

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3384.43		3384.45		6768.88

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Jamie Natelson

Mailing Address
1128 6th Avenue, #1

City	State	Zip Code
Venice	CA	90291

Purpose of Disbursement:
Salaries

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4185601.66

Date / /

Transaction ID: H4-79157

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1052.80		1052.80		2105.60

B. Full Name (Last, First, Middle Initial)
Amy Padre

Mailing Address
3429 Yuma Street NW Apt 104

City	State	Zip Code
Washington	DC	20008

Purpose of Disbursement:
Salaries

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4186767.92

Date / /

Transaction ID: H4-79158

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
583.13		583.13		1166.26

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

Mailing Address
1320 N Veitch Street #1716

City	State	Zip Code
Arlington	VA	22201

Purpose of Disbursement:
Salaries

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4188201.15

Date / /

Transaction ID: H4-79159

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
716.61		716.62		1433.23

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2352.54		2352.55		4705.09

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Kara Pipoli			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 44 Spring Street			Allocated Activity or Event Year-To-Date 4188385.85		
City Chester	State CT	Zip Code 06412	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-79160		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
92.35		92.35		184.70

B. Full Name (Last, First, Middle Initial) Tiffany Reed			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2450 Ontario Rd, NW			Allocated Activity or Event Year-To-Date 4189383.27		
City Washington	State DC	Zip Code 20009	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-79161		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
498.71		498.71		997.42

C. Full Name (Last, First, Middle Initial) Ryan Rodriguez			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 612 C Street SE			Allocated Activity or Event Year-To-Date 4190714.86		
City Washington	State DC	Zip Code 20003	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-79162		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
665.79		665.80		1331.59

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1256.85		1256.86		2513.71

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Rebecca Hughes Runyan			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address 1503 30th Street NW Apt 1			Allocated Activity or Event Year-To-Date 4191577.05																		
City State Zip Code Washington DC 20007	Purpose of Disbursement: Salaries		Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>0</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>1</td><td>5</td></tr></table> / <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>			M	M	1	0	D	D	1	5	Y	Y	Y	Y	2	0	0	5
M	M																				
1	0																				
D	D																				
1	5																				
Y	Y	Y	Y																		
2	0	0	5																		
Activity or Event Identifier: AVD05			Transaction ID: H4-79163																		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
431.09		431.10		862.19

B. Full Name (Last, First, Middle Initial) Bret Shaw			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address 1411 N Rolfe Street #6			Allocated Activity or Event Year-To-Date 4192339.85																		
City State Zip Code Arlington VA 22209	Purpose of Disbursement: Salaries		Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>0</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>1</td><td>5</td></tr></table> / <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>			M	M	1	0	D	D	1	5	Y	Y	Y	Y	2	0	0	5
M	M																				
1	0																				
D	D																				
1	5																				
Y	Y	Y	Y																		
2	0	0	5																		
Activity or Event Identifier: AVD05			Transaction ID: H4-79164																		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
381.40		381.40		762.80

C. Full Name (Last, First, Middle Initial) Jacque St. Romain			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address 307 K Street NE			Allocated Activity or Event Year-To-Date 4192455.29																		
City State Zip Code Washington DC 20002	Purpose of Disbursement: Salaries		Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>0</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>1</td><td>5</td></tr></table> / <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>			M	M	1	0	D	D	1	5	Y	Y	Y	Y	2	0	0	5
M	M																				
1	0																				
D	D																				
1	5																				
Y	Y	Y	Y																		
2	0	0	5																		
Activity or Event Identifier: AVD05			Transaction ID: H4-79165																		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
57.72		57.72		115.44

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
870.21		870.22		1740.43

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Patricia Williams			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3 Wyndham Drive			Allocated Activity or Event Year-To-Date 4195923.62		
City Portola Valley	State CA	Zip Code 94028			
Purpose of Disbursement: Salaries			Category/ Type		
Activity or Event Identifier: AVD05			Transaction ID: H4-79166		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1734.16		1734.17		3468.33

B. Full Name (Last, First, Middle Initial) Joanne Wilson			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3806 Viser Court			Allocated Activity or Event Year-To-Date 4196917.05		
City Bowie	State MD	Zip Code 20715				Date MM / DD / YYYY 10 / 15 / 2005
Purpose of Disbursement: Salaries			Category/ Type		
Activity or Event Identifier: AVD05			Transaction ID: H4-79167		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
496.71		496.72		993.43

C. Full Name (Last, First, Middle Initial) Jennifer Zukowski			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 80			Allocated Activity or Event Year-To-Date 4198005.85		
City Falmouth	State MA	Zip Code 02541				Date MM / DD / YYYY 10 / 15 / 2005
Purpose of Disbursement: Salaries			Category/ Type		
Activity or Event Identifier: AVD05			Transaction ID: H4-79168		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
544.40		544.40		1088.80

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2775.27		2775.29		5550.56

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Julia Altum			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 213 Buchanan Street			Allocated Activity or Event Year-To-Date 4198220.26	
City Alexandria	State VA	Zip Code 22314	Date M M / D D / Y Y Y Y 10 / 15 / 2005 Transaction ID: H4-79169	
Purpose of Disbursement: Salaries				
Activity or Event Identifier: AVD05				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
107.20		107.21		214.41

B. Full Name (Last, First, Middle Initial) Krystal Banzon			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 7343 Palmetto Avenue			Allocated Activity or Event Year-To-Date 4198404.21	
City Fontana	State CA	Zip Code 92336	Date M M / D D / Y Y Y Y 10 / 15 / 2005 Transaction ID: H4-79170	
Purpose of Disbursement: Salaries				
Activity or Event Identifier: AVD05				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
91.97		91.98		183.95

C. Full Name (Last, First, Middle Initial) Amanda Bates			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 950 24th Street NW Apt 717			Allocated Activity or Event Year-To-Date 4198569.65	
City Washington	State DC	Zip Code 20052	Date M M / D D / Y Y Y Y 10 / 15 / 2005 Transaction ID: H4-79171	
Purpose of Disbursement: Salaries				
Activity or Event Identifier: AVD05				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
82.72		82.72		165.44

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
281.89		281.91		563.80

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Amanda Benzie

Mailing Address
15754 Culver Drive

City State Zip Code
East Lansing MI 48823

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4198735.09

Date / /

Transaction ID: H4-79172

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
82.72		82.72		165.44

B. Full Name (Last, First, Middle Initial)
Tanya Bjork

Mailing Address
203 South Paterson Street Suite 400

City State Zip Code
Madison WI 53703

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4201268.08

Date / /

Transaction ID: H4-79173

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1266.49		1266.50		2532.99

C. Full Name (Last, First, Middle Initial)
Anne Caprara

Mailing Address
2445 27th Court

City State Zip Code
Arlington VA 22206

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4202556.62

Date / /

Transaction ID: H4-79174

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
644.27		644.27		1288.54

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1993.48		1993.49		3986.97

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Kate Chapek
Mailing Address
1320 N Veitch Street #1037
City State Zip Code
Arlington VA 22201
Purpose of Disbursement:
Salaries
Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
4204068.94
Date 10 / 15 / 2005
Transaction ID: H4-79175

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
756.16		756.16		1512.32

B. Full Name (Last, First, Middle Initial)
Kathleen Coyne-McCoy
Mailing Address
267 Gleaner Chapel Road
City State Zip Code
North Scituate RI 02857
Purpose of Disbursement:
Salaries
Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
4206677.50
Date 10 / 15 / 2005
Transaction ID: H4-79176

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1304.28		1304.28		2608.56

C. Full Name (Last, First, Middle Initial)
Christopher Delaunay
Mailing Address
4127 River Road NW Apt 3
City State Zip Code
Washington DC 20016
Purpose of Disbursement:
Salaries
Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
4206769.85
Date 10 / 15 / 2005
Transaction ID: H4-79177

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.17		46.18		92.35

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2106.61		2106.62		4213.23

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) John-Michael Dorchak			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4850 Connecticut Avenue NW Apt 408			Allocated Activity or Event Year-To-Date 4206862.20		
City	State	Zip Code	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Washington	DC	20008	Transaction ID: H4-79178		
Purpose of Disbursement: Salaries			Category/ Type		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.17		46.18		92.35

B. Full Name (Last, First, Middle Initial) Kellie Dupree			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 333 12th Street, NE			Allocated Activity or Event Year-To-Date 4207767.18		
City	State	Zip Code	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Washington	DC	20002	Transaction ID: H4-79179		
Purpose of Disbursement: Salaries			Category/ Type		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
452.49		452.49		904.98

C. Full Name (Last, First, Middle Initial) Peggy Egan			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 9705 Meeks Bay Ave			Allocated Activity or Event Year-To-Date 4210021.53		
City	State	Zip Code	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Las Vegas	NV	89148	Transaction ID: H4-79180		
Purpose of Disbursement: Salaries			Category/ Type		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1127.17		1127.18		2254.35

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1625.83		1625.85		3251.68

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Emily Elbert			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 21811 Oceanview Lane			Allocated Activity or Event Year-To-Date 4212202.47		
City Huntington Beach	State CA	Zip Code 92646	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-79181		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1090.47		1090.47		2180.94

B. Full Name (Last, First, Middle Initial) Chris Esposito			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 624 East Broadway			Allocated Activity or Event Year-To-Date 4214980.11		
City Boston	State MA	Zip Code 02127	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-79182		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1388.82		1388.82		2777.64

C. Full Name (Last, First, Middle Initial) Eureka Gilkey			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 930 M Street, NW #804			Allocated Activity or Event Year-To-Date 4216897.16		
City Washington	State DC	Zip Code 20001	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-79183		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
958.52		958.53		1917.05

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3437.81		3437.82		6875.63

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Christina Heckart			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 532 20th Street, NW Apt. 215			Allocated Activity or Event Year-To-Date 4217651.67		
City	State	Zip Code	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Washington	DC	20006			
Purpose of Disbursement: Salaries			Category/ Type		
Activity or Event Identifier: AVD05			Transaction ID: H4-79184		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="377.25"/>		<input type="text" value="377.26"/>		<input type="text" value="754.51"/>

B. Full Name (Last, First, Middle Initial) Maren Hesla			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5515 Little Falls Rd.			Allocated Activity or Event Year-To-Date 4220343.92		
City	State	Zip Code	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Arlington	VA	22207			
Purpose of Disbursement: Salaries			Category/ Type		
Activity or Event Identifier: AVD05			Transaction ID: H4-79185		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="1346.12"/>		<input type="text" value="1346.13"/>		<input type="text" value="2692.25"/>

C. Full Name (Last, First, Middle Initial) Mary L Hodge			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 908 Harrison Circle			Allocated Activity or Event Year-To-Date 4221247.96		
City	State	Zip Code	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Alexandria	VA	22304			
Purpose of Disbursement: Salaries			Category/ Type		
Activity or Event Identifier: AVD05			Transaction ID: H4-79186		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="452.02"/>		<input type="text" value="452.02"/>		<input type="text" value="904.04"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="2175.39"/>		<input type="text" value="2175.41"/>		<input type="text" value="4350.80"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Julie Holzhueter			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6825 19th Road N			Allocated Activity or Event Year-To-Date 4222265.47		
City Arlington	State VA	Zip Code 22205	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-79187		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="508.75"/>		<input type="text" value="508.76"/>		<input type="text" value="1017.51"/>

B. Full Name (Last, First, Middle Initial) Benjamin Jones			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 10117 Big Rock Rd			Allocated Activity or Event Year-To-Date 4224759.31		
City Silver Spring	State MD	Zip Code 20901	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-79188		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="1246.92"/>		<input type="text" value="1246.92"/>		<input type="text" value="2493.84"/>

C. Full Name (Last, First, Middle Initial) Dana Jones			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 11726 Putting Green Court			Allocated Activity or Event Year-To-Date 4226549.00		
City Reston	State VA	Zip Code 20191	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-79189		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="894.84"/>		<input type="text" value="894.85"/>		<input type="text" value="1789.69"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="2650.51"/>		<input type="text" value="2650.53"/>		<input type="text" value="5301.04"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Bob Kearney

Mailing Address
1260 21st NW Apt 811

City State Zip Code
Washington DC 20036

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4228772.66

Activity or Event Identifier:
AVD05

Date 10 / 15 / 2005

Transaction ID: H4-79190

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1111.83		1111.83		2223.66

B. Full Name (Last, First, Middle Initial)
Meredith Kormes

Mailing Address
4850 Connecticut Avenue NW Apt 904

City State Zip Code
Washington DC 20008

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4228921.72

Activity or Event Identifier:
AVD05

Date 10 / 15 / 2005

Transaction ID: H4-79192

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
74.53		74.53		149.06

C. Full Name (Last, First, Middle Initial)
Susan Markham

Mailing Address
1423 A Street, SE

City State Zip Code
Washington DC 20003

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4230961.26

Activity or Event Identifier:
AVD05

Date 10 / 15 / 2005

Transaction ID: H4-79193

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1019.77		1019.77		2039.54

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2206.13		2206.13		4412.26

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) David McGonagle			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address 4857 Battery Lane Apt 506			Allocated Activity or Event Year-To-Date 4232094.49																		
City State Zip Code Bethesda MD 20814	Purpose of Disbursement: Salaries		Date <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>0</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>1</td><td>5</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>			M	M	1	0	D	D	1	5	Y	Y	Y	Y	2	0	0	5
M	M																				
1	0																				
D	D																				
1	5																				
Y	Y	Y	Y																		
2	0	0	5																		
Activity or Event Identifier: AVD05			Transaction ID: H4-79194																		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
566.61		566.62		1133.23

B. Full Name (Last, First, Middle Initial) Martha McKenna			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address 913 South Decker Avenue			Allocated Activity or Event Year-To-Date 4234635.59																		
City State Zip Code Baltimore MD 21224	Purpose of Disbursement: Salaries		Date <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>0</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>1</td><td>5</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>			M	M	1	0	D	D	1	5	Y	Y	Y	Y	2	0	0	5
M	M																				
1	0																				
D	D																				
1	5																				
Y	Y	Y	Y																		
2	0	0	5																		
Activity or Event Identifier: AVD05			Transaction ID: H4-79195																		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1270.55		1270.55		2541.10

C. Full Name (Last, First, Middle Initial) Ashley Mills			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address 4872 Trinidad			Allocated Activity or Event Year-To-Date 4234863.76																		
City State Zip Code Oakland CA 94602	Purpose of Disbursement: Salaries		Date <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>0</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>1</td><td>5</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>			M	M	1	0	D	D	1	5	Y	Y	Y	Y	2	0	0	5
M	M																				
1	0																				
D	D																				
1	5																				
Y	Y	Y	Y																		
2	0	0	5																		
Activity or Event Identifier: AVD05			Transaction ID: H4-79196																		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
114.08		114.09		228.17

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1951.24		1951.26		3902.50

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Gladstone Payton			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1723 Q Street NW #102			Allocated Activity or Event Year-To-Date 4236019.13		
City Washington	State DC	Zip Code 20009	Date MM / DD / YYYY 10 / 15 / 2005		
Purpose of Disbursement: Salaries			Category/Type		
Activity or Event Identifier: AVD05			Transaction ID: H4-79197		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
577.68		577.69		1155.37

B. Full Name (Last, First, Middle Initial) Katherine Pregliasco			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1900 South Eads Street No. 215			Allocated Activity or Event Year-To-Date 4236882.46		
City Arlington	State VA	Zip Code 22202	Date MM / DD / YYYY 10 / 15 / 2005		
Purpose of Disbursement: Salaries			Category/Type		
Activity or Event Identifier: AVD05			Transaction ID: H4-79198		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
431.66		431.67		863.33

C. Full Name (Last, First, Middle Initial) Rebecka Rosenquist			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4071A 24th Street			Allocated Activity or Event Year-To-Date 4237945.11		
City San Francisco	State CA	Zip Code 94114	Date MM / DD / YYYY 10 / 15 / 2005		
Purpose of Disbursement: Salaries			Category/Type		
Activity or Event Identifier: AVD05			Transaction ID: H4-79199		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
531.32		531.33		1062.65

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1540.66		1540.69		3081.35

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Cindy Smalls

Mailing Address
1900 South Eads Street # 206

City	State	Zip Code
Arlington	VA	22202

Purpose of Disbursement:
Salaries

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4239530.79

Date / /
Transaction ID: H4-79200

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
792.84		792.84		1585.68

B. Full Name (Last, First, Middle Initial)
Janice Smith

Mailing Address
4400 Massachusetts Avenue NW #503

City	State	Zip Code
Washington	DC	20016

Purpose of Disbursement:
Salaries

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4239623.14

Date / /
Transaction ID: H4-79201

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.17		46.18		92.35

C. Full Name (Last, First, Middle Initial)
Lisa Sohn

Mailing Address
3400 Sacramento St. #6

City	State	Zip Code
San Francisco	CA	94118

Purpose of Disbursement:
Salaries

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4241338.26

Date / /
Transaction ID: H4-79202

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
857.56		857.56		1715.12

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1696.57		1696.58		3393.15

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Cristina Uribe			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4212 26th Street, Unit A			Allocated Activity or Event Year-To-Date 4243605.00		
City	State	Zip Code	Category/ Type		
San Francisco	CA	94131			
Purpose of Disbursement: Salaries			Date MM / DD / YYYY 10 / 15 / 2005		
Activity or Event Identifier: AVD05			Transaction ID: H4-79203		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1133.37		1133.37		2266.74

B. Full Name (Last, First, Middle Initial) Margaret Van Cleave			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 438 New Jersey Ave SE			Allocated Activity or Event Year-To-Date 4244568.43		
City	State	Zip Code	Category/ Type		
Washington	DC	20003			
Purpose of Disbursement: Salaries			Date MM / DD / YYYY 10 / 15 / 2005		
Activity or Event Identifier: AVD05			Transaction ID: H4-79204		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
481.71		481.72		963.43

C. Full Name (Last, First, Middle Initial) Karen White			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1334 Walnut Avenue			Allocated Activity or Event Year-To-Date 4249322.35		
City	State	Zip Code	Category/ Type		
Annapolis	MD	21403			
Purpose of Disbursement: Salaries			Date MM / DD / YYYY 10 / 15 / 2005		
Activity or Event Identifier: AVD05			Transaction ID: H4-79205		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2376.96		2376.96		4753.92

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3992.04		3992.05		7984.09

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Renee Willette

Mailing Address
486 Mandana Blvd #5

City	State	Zip Code
Oakland	CA	94610

Purpose of Disbursement:
Salaries

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4250621.50

Date / /

Transaction ID: H4-79206

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
649.57		649.58		1299.15

B. Full Name (Last, First, Middle Initial)
Caitlin Zook

Mailing Address
4545 Connecticut Avenue N Apt 431

City	State	Zip Code
Washington	DC	20008

Purpose of Disbursement:
Salaries

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4250713.85

Date / /

Transaction ID: H4-79207

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.17		46.18		92.35

C. Full Name (Last, First, Middle Initial)
Lesbia Cajchun

Mailing Address
2902 Kings Chapel Rd

City	State	Zip Code
Falls Church	VA	22042

Purpose of Disbursement:
Salaries

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4252261.53

Date / /

Transaction ID: H4-79742

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
773.84		773.84		1547.68

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1469.58		1469.60		2939.18

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
MaiLien Le

Mailing Address
24571 Belgreen Place

City State Zip Code
Lake Forest CA 92630

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4252486.77

Date MM / DD / YYYY
10 / 15 / 2005

Transaction ID: H4-81655

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
112.62 + 112.62 = 225.24

B. Full Name (Last, First, Middle Initial)
WMATA

Mailing Address
600 5th St., NW

City State Zip Code
Washington DC 20001

Purpose of Disbursement:
Local Transportation

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4254181.77

Date MM / DD / YYYY
10 / 17 / 2005

Transaction ID: H4-79107

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
847.50 + 847.50 = 1695.00

C. Full Name (Last, First, Middle Initial)
John Hancock c/o City Bank Delaware

Mailing Address
1615 Brett Road Lock Box 7122

City State Zip Code
New Castle DE 19720

Purpose of Disbursement:
Employment Pension/ 401(k)

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4266657.05

Date MM / DD / YYYY
10 / 18 / 2005

Transaction ID: H4-79112

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
6237.64 + 6237.64 = 12475.28

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
7197.76 + 7197.76 = 14395.52

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Accommodations Contact
Mailing Address
P.O. Box 30439
City State Zip Code
Alexandria VA 22310
Purpose of Disbursement:
Meeting/Conference
Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
4266907.05
Date 10 / 20 / 2005
Transaction ID: H4-79400

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
125.00		125.00		250.00

B. Full Name (Last, First, Middle Initial)
Accommodations Contact
Mailing Address
P.O. Box 30439
City State Zip Code
Alexandria VA 22310
Purpose of Disbursement:
Meeting/Conference
Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
4267407.05
Date 10 / 20 / 2005
Transaction ID: H4-79401

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
250.00		250.00		500.00

C. Full Name (Last, First, Middle Initial)
Accommodations Contact
Mailing Address
P.O. Box 30439
City State Zip Code
Alexandria VA 22310
Purpose of Disbursement:
Meeting/Conference
Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
4267657.05
Date 10 / 20 / 2005
Transaction ID: H4-79402

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
125.00		125.00		250.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
500.00		500.00		1000.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
ACE Beverage

Mailing Address
3301 New Mexico Avenue, NW

City State Zip Code
Washington DC 20016

Purpose of Disbursement:
Catering/Facilities

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4267872.01

Activity or Event Identifier:
AVD05

Date 10 / 20 / 2005

Transaction ID: H4-79403

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
107.48		107.48		214.96

B. Full Name (Last, First, Middle Initial)
AC Transit

Mailing Address
425 Mission St.

City State Zip Code
San Francisco CA 94105

Purpose of Disbursement:
Local Transportation

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4267942.01

Activity or Event Identifier:
AVD05

Date 10 / 20 / 2005

Transaction ID: H4-79404

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.00		35.00		70.00

C. Full Name (Last, First, Middle Initial)
ArchivesOne, Inc.

Mailing Address
PO Box 13005

City State Zip Code
Lewiston ME 04243-9505

Purpose of Disbursement:
Rent

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4268100.57

Activity or Event Identifier:
AVD05

Date 10 / 20 / 2005

Transaction ID: H4-79405

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
79.28		79.28		158.56

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
221.76		221.76		443.52

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Arrowhead Mountain Spring Water Co.

Mailing Address
P.O. Box 52237

City Phoenix	State AZ	Zip Code 85072-2237	Category/ Type
Purpose of Disbursement: Office Supplies Expenses			

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4268128.69

Date / /
Transaction ID: H4-79406

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.06		14.06		28.12

B. Full Name (Last, First, Middle Initial)
ATX Telecommunications

Mailing Address
P.O.Box 57194

City Philadelphia	State PA	Zip Code 19111-7194	Category/ Type
Purpose of Disbursement: Telephone			

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4269721.96

Date / /
Transaction ID: H4-79407

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
796.63		796.64		1593.27

C. Full Name (Last, First, Middle Initial)
SaBrina Brown

Mailing Address
P.O. Box 1265

City North Beach	State MD	Zip Code 20714	Category/ Type
Purpose of Disbursement: Internet Services			

Activity or Event Identifier:
AVD05
See Attached Memo Entry

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4269767.91

Date / /
Transaction ID: H4-79408

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.97		22.98		45.95

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
833.66		833.68		1667.34

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Copymat			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 120 Howard Street			Allocated Activity or Event Year-To-Date 201010.82		
City San Francisco	State CA	Zip Code 94105	Date <input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Printing			Transaction ID: H4-79410		
Activity or Event Identifier: PSP05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
28.07		28.08		56.15

B. Full Name (Last, First, Middle Initial) Copymat			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 120 Howard Street			Allocated Activity or Event Year-To-Date 4269849.69		
City San Francisco	State CA	Zip Code 94105	Date <input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Printing			Transaction ID: H4-79411		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
40.89		40.89		81.78

C. Full Name (Last, First, Middle Initial) Kathleen Coyne-McCoy			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 267 Gleaner Chapel Road			Allocated Activity or Event Year-To-Date 4269939.19		
City North Scituate	State RI	Zip Code 02857	Date <input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Travel/ Accommodations			Transaction ID: H4-79412		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
44.75		44.75		89.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
113.71		113.72		227.43

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Federal Election Commission FEC Nonconnected Seminar

Mailing Address
999 E Street, NW, Room 820

City	State	Zip Code
Washington	DC	20463

Purpose of Disbursement:
Employee Training/ Planning

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4270139.19

Date / /
Transaction ID: H4-79415

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
100.00		100.00		200.00

B. Full Name (Last, First, Middle Initial)
Mary L Hodge

Mailing Address
908 Harrison Circle

City	State	Zip Code
Alexandria	VA	22304

Purpose of Disbursement:
Travel/ Accommodations

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4270339.19

Date / /
Transaction ID: H4-79417

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
100.00		100.00		200.00

C. Full Name (Last, First, Middle Initial)
Ikon Office Solutions

Mailing Address
P.O. Box 827468

City	State	Zip Code
Philadelphia	PA	19182-7468

Purpose of Disbursement:
Copier Equipment Rental

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4274638.57

Date / /
Transaction ID: H4-79418

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2149.69		2149.69		4299.38

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2349.69		2349.69		4699.38

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ikon Office Solutions			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 827468			Allocated Activity or Event Year-To-Date 4274920.67	
City Philadelphia	State PA	Zip Code 19182-7468	Date <input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2005"/>	
Purpose of Disbursement: Copier Equipment Rental			Transaction ID: H4-79419	
Activity or Event Identifier: AVD05				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="141.05"/>		<input type="text" value="141.05"/>		<input type="text" value="282.10"/>

B. Full Name (Last, First, Middle Initial) Ray Keating			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 114 Adams Ct.			Allocated Activity or Event Year-To-Date 4274958.50	
City Walkersville	State MD	Zip Code 21793	Date <input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2005"/>	
Purpose of Disbursement: Internet Services			Transaction ID: H4-79420	
Activity or Event Identifier: AVD05 See Attached Memo Entry				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="18.91"/>		<input type="text" value="18.92"/>		<input type="text" value="37.83"/>

C. Full Name (Last, First, Middle Initial) MA Division of Unemployment Assistance			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 3269			Allocated Activity or Event Year-To-Date 4275001.50	
City Boston	State MA	Zip Code 02241-3269	Date <input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2005"/>	
Purpose of Disbursement: Taxes - Payroll			Transaction ID: H4-79426	
Activity or Event Identifier: AVD05				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="21.50"/>		<input type="text" value="21.50"/>		<input type="text" value="43.00"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="181.46"/>		<input type="text" value="181.47"/>		<input type="text" value="362.93"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) News Spot			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 345 Spear Street			Allocated Activity or Event Year-To-Date 4275226.50		
City	State	Zip Code	Category/Type		
San Francisco	CA	94105			
Purpose of Disbursement: Local Transportation			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="5"/>		
Activity or Event Identifier: AVD05			Transaction ID: H4-79433		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
112.50		112.50		225.00

B. Full Name (Last, First, Middle Initial) Office Depot			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 633211			Allocated Activity or Event Year-To-Date 4275305.73		
City	State	Zip Code	Category/Type		
Cincinnati	OH	45263-3211			
Purpose of Disbursement: Office Supplies Expenses			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="5"/>		
Activity or Event Identifier: AVD05			Transaction ID: H4-79434		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
39.61		39.62		79.23

C. Full Name (Last, First, Middle Initial) Pollard & Associates, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address One North Park Drive Suite 104			Allocated Activity or Event Year-To-Date 4276518.23		
City	State	Zip Code	Category/Type		
Hunt Valley	MD	21030-1816			
Purpose of Disbursement: Accounting			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="5"/>		
Activity or Event Identifier: AVD05			Transaction ID: H4-79436		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
606.25		606.25		1212.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
758.36		758.37		1516.73

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Production Solutions, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address 1953 Gallows Road Suite 600			Allocated Activity or Event Year-To-Date 4278432.86																		
City State Zip Code Vienna VA 22182	Category/ Type		Date <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>0</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>2</td><td>0</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>			M	M	1	0	D	D	2	0	Y	Y	Y	Y	2	0	0	5
M	M																				
1	0																				
D	D																				
2	0																				
Y	Y	Y	Y																		
2	0	0	5																		
Purpose of Disbursement: Office Supplies Expenses			Transaction ID: H4-79437																		
Activity or Event Identifier: AVD05																					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
957.31		957.32		1914.63

B. Full Name (Last, First, Middle Initial) PTI Communications			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address 1334-E Shepard Drive			Allocated Activity or Event Year-To-Date 4278977.86																		
City State Zip Code Sterling VA 20164-4426	Category/ Type		Date <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>0</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>2</td><td>0</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>			M	M	1	0	D	D	2	0	Y	Y	Y	Y	2	0	0	5
M	M																				
1	0																				
D	D																				
2	0																				
Y	Y	Y	Y																		
2	0	0	5																		
Purpose of Disbursement: Equipment Maintenance			Transaction ID: H4-79439																		
Activity or Event Identifier: AVD05																					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
272.50		272.50		545.00

C. Full Name (Last, First, Middle Initial) AT&T			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address Payment Center			Allocated Activity or Event Year-To-Date 4280594.83																		
City State Zip Code Sacramento CA 95887-0001	Category/ Type		Date <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>0</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>2</td><td>0</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>			M	M	1	0	D	D	2	0	Y	Y	Y	Y	2	0	0	5
M	M																				
1	0																				
D	D																				
2	0																				
Y	Y	Y	Y																		
2	0	0	5																		
Purpose of Disbursement: Telephone			Transaction ID: H4-79446																		
Activity or Event Identifier: AVD05																					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
808.48		808.49		1616.97

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2038.29		2038.31		4076.60

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Thomas House Coffee Service

Mailing Address
2309 Kansas Ave.

City	State	Zip Code
Silver Spring	MD	20910

Purpose of Disbursement:
Office Supplies Expenses

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4280927.47

Date / /

Transaction ID: H4-79452

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
166.32		166.32		332.64

B. Full Name (Last, First, Middle Initial)
UNUM Life Insurance Co. of America

Mailing Address
P. O. Box 406990

City	State	Zip Code
Atlanta	GA	30384-6990

Purpose of Disbursement:
Insurance Health/Life

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4282410.80

Date / /

Transaction ID: H4-79456

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
741.66		741.67		1483.33

C. Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address
PO Box 489

City	State	Zip Code
Newark	NJ	07101-0489

Purpose of Disbursement:
Telephone

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4282529.20

Date / /

Transaction ID: H4-79457

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
59.20		59.20		118.40

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
967.18		967.19		1934.37

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Wisconsin Dept of Revenue

Mailing Address
PO Box 8981

City	State	Zip Code
Madison	WI	53708-8981

Purpose of Disbursement:
Taxes - Payroll

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4283668.10

Date / /

Transaction ID: H4-79458

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
569.45		569.45		1138.90

B. Full Name (Last, First, Middle Initial)
Working Assets

Mailing Address
P.O. Box 2041

City	State	Zip Code
Mechanicsburg	PA	17055

Purpose of Disbursement:
Telephone

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4284282.64

Date / /

Transaction ID: H4-79459

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
307.27		307.27		614.54

C. Full Name (Last, First, Middle Initial)
Working Assets

Mailing Address
P.O. Box 2041

City	State	Zip Code
Mechanicsburg	PA	17055

Purpose of Disbursement:
Telephone

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4284291.28

Date / /

Transaction ID: H4-79461

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.32		4.32		8.64

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
881.04		881.04		1762.08

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) 100 Spear Street Owners' Corp			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 10297			Allocated Activity or Event Year-To-Date 4290331.44		
City Newark	State NJ	Zip Code 07193-0297	Date <input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Rent			Transaction ID: H4-79519		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3020.08		3020.08		6040.16

B. Full Name (Last, First, Middle Initial) Adelstein Liston			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 222 West Ontario Street Suite 503			Allocated Activity or Event Year-To-Date 4295331.44		
City Chicago	State IL	Zip Code 60610	Date <input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Recruitment Video			Transaction ID: H4-79520		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2500.00		2500.00		5000.00

C. Full Name (Last, First, Middle Initial) Aramark			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address One Logan Square 130 N 8th Street			Allocated Activity or Event Year-To-Date 201126.32		
City Philadelphia	State PA	Zip Code 19103	Date <input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Meeting/Conference			Transaction ID: H4-79523		
Activity or Event Identifier: PSP05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
57.75		57.75		115.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5577.83		5577.83		11155.66

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Jack I. Bender & Sons

Mailing Address
1120 Connecticut Ave, NW Suite 1200

City State Zip Code
Washington DC 20036

Purpose of Disbursement:
Rent

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4357484.57

Date / /

Transaction ID: H4-79526

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31076.56		31076.57		62153.13

B. Full Name (Last, First, Middle Initial)
SAMCLAR Attn: Accounts Receivables

Mailing Address
1221 Diamond Way

City State Zip Code
Concord CA 94520

Purpose of Disbursement:
Furniture & Computer Equipment

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4358107.36

Date / /

Transaction ID: H4-79532

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
311.39		311.40		622.79

C. Full Name (Last, First, Middle Initial)
Colonial Parking, Inc.

Mailing Address
1050 Thomas Jefferson St., #100

City State Zip Code
Washington DC 20007

Purpose of Disbursement:
Parking Fees

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4360417.36

Date / /

Transaction ID: H4-79533

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1155.00		1155.00		2310.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32542.95		32542.97		65085.92

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) DirecTV			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 60036			Allocated Activity or Event Year-To-Date 4360422.35		
City Los Angeles	State CA	Zip Code 90060-0036	Date MM / DD / YYYY 10 / 27 / 2005		
Purpose of Disbursement: Publication & Dues			Transaction ID: H4-79540		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.49		2.50		4.99

B. Full Name (Last, First, Middle Initial) Federal Express			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P. O. Box 371461			Allocated Activity or Event Year-To-Date 201169.93		
City Pittsburg	State PA	Zip Code 15250-7461	Date MM / DD / YYYY 10 / 27 / 2005		
Purpose of Disbursement: Deliveries			Transaction ID: H4-79541		
Activity or Event Identifier: PSP05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.80		21.81		43.61

C. Full Name (Last, First, Middle Initial) Flynn Radice Architectural Finishes, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2219 Kansas Ave			Allocated Activity or Event Year-To-Date 4361597.35		
City Silver Spring	State MD	Zip Code 20910	Date MM / DD / YYYY 10 / 27 / 2005		
Purpose of Disbursement: Repairs Maintainence			Transaction ID: H4-79543		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
587.50		587.50		1175.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
611.79		611.81		1223.60

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Judy Loeb Goldfein			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 50 East 89th Street 6E			Allocated Activity or Event Year-To-Date 4362197.35		
City New York	State NY	Zip Code 10128	Date <input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Rent			Transaction ID: H4-79545		
Activity or Event Identifier: AVD05 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
300.00		300.00		600.00

B. Full Name (Last, First, Middle Initial) The Guardian			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P. O. Box 95101			Allocated Activity or Event Year-To-Date 4393584.83		
City Chicago	State IL	Zip Code 60694-5101	Date <input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Insurance Health/Life			Transaction ID: H4-79547		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15693.74		15693.74		31387.48

C. Full Name (Last, First, Middle Initial) The Guardian			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P. O. Box 95101			Allocated Activity or Event Year-To-Date 4401333.39		
City Chicago	State IL	Zip Code 60694-5101	Date <input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Insurance Health/Life			Transaction ID: H4-79548		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3874.28		3874.28		7748.56

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19868.02		19868.02		39736.04

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ikon Office Solutions			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 827468			Allocated Activity or Event Year-To-Date 4401439.42		
City	State	Zip Code	Category/ Type		
Philadelphia	PA	19182-7468			
Purpose of Disbursement: Equipment Maintenance			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/>		
Activity or Event Identifier: AVD05			Transaction ID: H4-79549		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
53.01		53.02		106.03

B. Full Name (Last, First, Middle Initial) JIB Monitoring Center			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1120 Connecticut Avenue, NW Suite 1200			Allocated Activity or Event Year-To-Date 4401675.69		
City	State	Zip Code	Category/ Type		
Washington	DC	20036			
Purpose of Disbursement: Building Utilities & Fees			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/>		
Activity or Event Identifier: AVD05			Transaction ID: H4-79550		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
118.13		118.14		236.27

C. Full Name (Last, First, Middle Initial) Sherry Merfish			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2720 Pittsburg			Allocated Activity or Event Year-To-Date 201280.93		
City	State	Zip Code	Category/ Type		
Houston	TX	77005			
Purpose of Disbursement: Postage			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/>		
Activity or Event Identifier: PSP05 See Attached Memo Entry			Transaction ID: H4-79561		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
55.50		55.50		111.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
226.64		226.66		453.30

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Sherry Merfish			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2720 Pittsburg			Allocated Activity or Event Year-To-Date 201289.73		
City Houston	State TX	Zip Code 77005	Date <input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Printing			Transaction ID: H4-79562		
Activity or Event Identifier: PSP05 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.40		4.40		8.80

B. Full Name (Last, First, Middle Initial) Sherry Merfish			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2720 Pittsburg			Allocated Activity or Event Year-To-Date 202218.42		
City Houston	State TX	Zip Code 77005	Date <input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Travel/ Accommodations			Transaction ID: H4-79563		
Activity or Event Identifier: PSP05 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
464.34		464.35		928.69

C. Full Name (Last, First, Middle Initial) Gerald Merfish			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 15879			Allocated Activity or Event Year-To-Date 4402275.69		
City Houston	State TX	Zip Code 77220-5879	Date <input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Rent			Transaction ID: H4-79564		
Activity or Event Identifier: AVD05 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
300.00		300.00		600.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
768.74		768.75		1537.49

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Metro Computer Supplies			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1200 18th Street, NW Suite LL101			Allocated Activity or Event Year-To-Date 4404286.90		
City	State	Zip Code	Date <input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2005"/>		
Washington	DC	20036			
Purpose of Disbursement: Office Supplies Expenses			Category/ Type		
Activity or Event Identifier: AVD05			Transaction ID: H4-79565		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1005.60		1005.61		2011.21

B. Full Name (Last, First, Middle Initial) Ashley Mills			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4872 Trinidad			Allocated Activity or Event Year-To-Date 4404376.90		
City	State	Zip Code	Date <input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2005"/>		
Oakland	CA	94602			
Purpose of Disbursement: Local Transportation			Category/ Type		
Activity or Event Identifier: AVD05			Transaction ID: H4-79566		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
45.00		45.00		90.00

C. Full Name (Last, First, Middle Initial) Prime Office Products			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 8629			Allocated Activity or Event Year-To-Date 4404744.91		
City	State	Zip Code	Date <input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2005"/>		
Elkridge	MD	21075			
Purpose of Disbursement: Office Supplies Expenses			Category/ Type		
Activity or Event Identifier: AVD05			Transaction ID: H4-79578		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
184.00		184.01		368.01

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1234.60		1234.62		2469.22

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Prime Office Products
Mailing Address
PO Box 8629
City State Zip Code
Elkridge MD 21075
Purpose of Disbursement:
Office Supplies Expenses
Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
4405112.92
Date 10 / 27 / 2005
Transaction ID: H4-79579

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
184.00 + 184.01 = 368.01

B. Full Name (Last, First, Middle Initial)
Prime Office Products
Mailing Address
PO Box 8629
City State Zip Code
Elkridge MD 21075
Purpose of Disbursement:
Office Supplies Expenses
Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
4405480.93
Date 10 / 27 / 2005
Transaction ID: H4-79580

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
184.00 + 184.01 = 368.01

C. Full Name (Last, First, Middle Initial)
Prime Office Products
Mailing Address
PO Box 8629
City State Zip Code
Elkridge MD 21075
Purpose of Disbursement:
Office Supplies Expenses
Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
4406154.93
Date 10 / 27 / 2005
Transaction ID: H4-79581

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
337.00 + 337.00 = 674.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
705.00 + 705.02 = 1410.02

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Prime Office Products			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 8629			Allocated Activity or Event Year-To-Date 4406550.06		
City Elkridge	State MD	Zip Code 21075	Date <input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Office Supplies Expenses			Transaction ID: H4-79582		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
197.56		197.57		395.13

B. Full Name (Last, First, Middle Initial) Cristina Uribe			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4212 26th Street, Unit A			Allocated Activity or Event Year-To-Date 4406624.06		
City San Francisco	State CA	Zip Code 94131	Date <input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Travel/ Accommodations			Transaction ID: H4-79612		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.00		37.00		74.00

C. Full Name (Last, First, Middle Initial) Verizon			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 1100			Allocated Activity or Event Year-To-Date 202313.44		
City Albany	State NY	Zip Code 12250-0001	Date <input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Telephone			Transaction ID: H4-79614		
Activity or Event Identifier: PSP05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
47.51		47.51		95.02

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
282.07		282.08		564.15

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)
Judith Lichtman

Mailing Address
2930 Ellicott Street, N.W.

City State Zip Code
Washington DC 20008

Purpose of Disbursement:
Consulting Fundraising

Category/
Type

Activity or Event Identifier:
PSP05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

207313.44

Date 10 / 31 / 2005

Transaction ID: H4-79616

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2500.00		2500.00		5000.00

B. Full Name (Last, First, Middle Initial)
Campaign Team, Inc. c/o Anna Lidman

Mailing Address
37 Brookview Terrace

City State Zip Code
Portland ME 04102

Purpose of Disbursement:
Consulting Fundraising

Category/
Type

Activity or Event Identifier:
PSP05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

213980.11

Date 10 / 31 / 2005

Transaction ID: H4-79617

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3333.33		3333.34		6666.67

C. Full Name (Last, First, Middle Initial)
Janet Ardrey

Mailing Address
420 Greenbrier Court

City State Zip Code
Fredericksburg VA 22401

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4406716.41

Date 10 / 31 / 2005

Transaction ID: H4-79741

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.17		46.18		92.35

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5879.50		5879.52		11759.02

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Amanda Bogden

Mailing Address
2414 Observatory Pl, NW

City State Zip Code
Washington DC 20007

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4407747.79

Activity or Event Identifier:
AVD05

Date 10 / 31 / 2005

Transaction ID: H4-79621

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
515.69		515.69		1031.38

B. Full Name (Last, First, Middle Initial)
SaBrina Brown

Mailing Address
P.O. Box 1265

City State Zip Code
North Beach MD 20714

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4410368.69

Activity or Event Identifier:
AVD05

Date 10 / 31 / 2005

Transaction ID: H4-79622

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1310.45		1310.45		2620.90

C. Full Name (Last, First, Middle Initial)
Lesbia Cajchun

Mailing Address
2902 Kings Chapel Rd

City State Zip Code
Falls Church VA 22042

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4411916.37

Activity or Event Identifier:
AVD05

Date 10 / 31 / 2005

Transaction ID: H4-79623

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
773.84		773.84		1547.68

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2599.98		2599.98		5199.96

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Caroline Fines

Mailing Address
10621 Regent Park Court

City State Zip Code
Fairfax VA 22030

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4413736.67

Date 10 / 31 / 2005

Transaction ID: H4-79624

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
910.15		910.15		1820.30

B. Full Name (Last, First, Middle Initial)
Susan Finkle

Mailing Address
11605 34th Place

City State Zip Code
Beltsville MD 20705

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4415225.50

Date 10 / 31 / 2005

Transaction ID: H4-79625

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
744.41		744.42		1488.83

C. Full Name (Last, First, Middle Initial)
Courtney Fry

Mailing Address
3140 Wisconsin Ave. NW Apt. 105

City State Zip Code
Washington DC 20016

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4416078.47

Date 10 / 31 / 2005

Transaction ID: H4-79626

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
426.48		426.49		852.97

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2081.04		2081.06		4162.10

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ray Keating			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 114 Adams Ct.			Allocated Activity or Event Year-To-Date 4418051.08	
City Walkersville	State MD	Zip Code 21793	Date MM / DD / YYYY 10 / 31 / 2005	
Purpose of Disbursement: Salaries			Transaction ID: H4-79627	
Activity or Event Identifier: AVD05				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
986.30		986.31		1972.61

B. Full Name (Last, First, Middle Initial) Britt Cocanour			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 3100 Connecticut Avenue, NW, Apt. 330			Allocated Activity or Event Year-To-Date 4421414.72	
City Washington	State DC	Zip Code 20008	Date MM / DD / YYYY 10 / 31 / 2005	
Purpose of Disbursement: Salaries			Transaction ID: H4-79628	
Activity or Event Identifier: AVD05				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1681.82		1681.82		3363.64

C. Full Name (Last, First, Middle Initial) Ellen R Malcolm			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 5060 Linnean Avenue, NW			Allocated Activity or Event Year-To-Date 4425684.60	
City Washington,	State DC	Zip Code 20008	Date MM / DD / YYYY 10 / 31 / 2005	
Purpose of Disbursement: Salaries			Transaction ID: H4-79629	
Activity or Event Identifier: AVD05				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2134.94		2134.94		4269.88

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4803.06		4803.07		9606.13

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ellen L Moran			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 8220 Custer Rd			Allocated Activity or Event Year-To-Date 4429942.30		
City	State	Zip Code	Date M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5 Transaction ID: H4-79630		
Bethesda	MD	20817			
Purpose of Disbursement: Salaries			Category/ Type		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2128.85		2128.85		4257.70

B. Full Name (Last, First, Middle Initial) Lisa Robillard			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4326 South 36th Street			Allocated Activity or Event Year-To-Date 4431584.37		
City	State	Zip Code	Date M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5 Transaction ID: H4-79631		
Arlington	VA	22206			
Purpose of Disbursement: Salaries			Category/ Type		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
821.03		821.04		1642.07

C. Full Name (Last, First, Middle Initial) Larkin Barker			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 120 Mackubori Street			Allocated Activity or Event Year-To-Date 4431687.05		
City	State	Zip Code	Date M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5 Transaction ID: H4-79632		
St Paul	MN	55102			
Purpose of Disbursement: Salaries			Category/ Type		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
51.34		51.34		102.68

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3001.22		3001.23		6002.45

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Jeanne Duncan

Mailing Address
1416 Shepherd Street, NW

City	State	Zip Code
Washington	DC	20011

Purpose of Disbursement:
Salaries

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4434498.27

Date / /
Transaction ID: H4-79633

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1405.61		1405.61		2811.22

B. Full Name (Last, First, Middle Initial)
Carrie Giddins

Mailing Address
4601 Connecticut Ave NW #909

City	State	Zip Code
Washington	DC	20008

Purpose of Disbursement:
Salaries

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4436147.64

Date / /
Transaction ID: H4-79634

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
824.68		824.69		1649.37

C. Full Name (Last, First, Middle Initial)
Katherine Goktepe

Mailing Address
1439 Mclean Mews Court

City	State	Zip Code
McLean	VA	22101

Purpose of Disbursement:
Salaries

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4437090.41

Date / /
Transaction ID: H4-79635

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
471.38		471.39		942.77

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2701.67		2701.69		5403.36

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ramona Oliver

Mailing Address
2311 North Front Street Apt 909

City State Zip Code
Harrisburg PA 17110

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4440051.39

Activity or Event Identifier:
AVD05

Date MM / DD / YYYY
10 / 31 / 2005

Transaction ID: H4-79636

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1480.49		1480.49		2960.98

B. Full Name (Last, First, Middle Initial)
Corinne Osborn

Mailing Address
3140 Wisconsin Avenue NW#414

City State Zip Code
Washington DC 20016

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4440276.63

Activity or Event Identifier:
AVD05

Date MM / DD / YYYY
10 / 31 / 2005

Transaction ID: H4-79637

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
112.62		112.62		225.24

C. Full Name (Last, First, Middle Initial)
Sara R Fewer

Mailing Address
767 22nd Ave

City State Zip Code
San Francisco CA 94121

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4441129.84

Activity or Event Identifier:
AVD05

Date MM / DD / YYYY
10 / 31 / 2005

Transaction ID: H4-79638

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
426.60		426.61		853.21

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2019.71		2019.72		4039.43

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Kim Mathis			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3141 Martha Custis Dr.			Allocated Activity or Event Year-To-Date 4443501.25		
City Alexandria	State VA	Zip Code 22302	Date <input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-79639		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1185.70		1185.71		2371.41

B. Full Name (Last, First, Middle Initial) Edna Romero			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7111 Halleck Street			Allocated Activity or Event Year-To-Date 4444851.21		
City District Heights	State MD	Zip Code 20747	Date <input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-79640		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
674.98		674.98		1349.96

C. Full Name (Last, First, Middle Initial) Quiyana Washington			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5613 Elberton Court			Allocated Activity or Event Year-To-Date 4446590.11		
City Hyattsville	State MD	Zip Code 20781	Date <input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-79641		
Activity or Event Identifier: AVD05					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
869.45		869.45		1738.90

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2730.13		2730.14		5460.27

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Yvonne Williams			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5412 Bradford Ct. #231			Allocated Activity or Event Year-To-Date 4447637.77		
City Alexandria	State VA	Zip Code 22311	Category/ Type		
Purpose of Disbursement: Salaries					
Activity or Event Identifier: AVD05			Date <input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2005"/> Transaction ID: H4-79642		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="523.83"/>		<input type="text" value="523.83"/>		<input type="text" value="1047.66"/>

B. Full Name (Last, First, Middle Initial) Paychex			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3060 Williams Drive #300			Allocated Activity or Event Year-To-Date 4501163.55		
City Fairfax	State VA	Zip Code 22031	Category/ Type		
Purpose of Disbursement: Taxes - Payroll					
Activity or Event Identifier: AVD05			Date <input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2005"/> Transaction ID: H4-79643		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="26762.89"/>		<input type="text" value="26762.89"/>		<input type="text" value="53525.78"/>

C. Full Name (Last, First, Middle Initial) Paychex			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3060 Williams Drive #300			Allocated Activity or Event Year-To-Date 4514472.62		
City Fairfax	State VA	Zip Code 22031	Category/ Type		
Purpose of Disbursement: Taxes - Payroll					
Activity or Event Identifier: AVD05			Date <input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2005"/> Transaction ID: H4-79644		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="6654.53"/>		<input type="text" value="6654.54"/>		<input type="text" value="13309.07"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="33941.25"/>		<input type="text" value="33941.26"/>		<input type="text" value="67882.51"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Hannah Carter

Mailing Address
1301 N. Lafayette

City State Zip Code
Royal Oak MI 48067

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4514576.30

Date 10 / 31 / 2005

Transaction ID: H4-79646

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
51.84		51.84		103.68

B. Full Name (Last, First, Middle Initial)
Amy Drummond

Mailing Address
104 Roberts Lane #401

City State Zip Code
Alexandria VA 22314

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4515933.65

Date 10 / 31 / 2005

Transaction ID: H4-79648

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
678.67		678.68		1357.35

C. Full Name (Last, First, Middle Initial)
Laura Fruge

Mailing Address
420 Oklahoma Avenue, NE #102

City State Zip Code
Washington DC 20002

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4518209.66

Date 10 / 31 / 2005

Transaction ID: H4-79649

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1138.00		1138.01		2276.01

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1868.51		1868.53		3737.04

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Andrea E Gottfried

Mailing Address
666 Greenwich St

City State Zip Code
New York NY 10014

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4520008.27

Date / /

Transaction ID: H4-79650

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="899.30"/>		<input type="text" value="899.31"/>		<input type="text" value="1798.61"/>

B. Full Name (Last, First, Middle Initial)
Cheryl Gregory

Mailing Address
4551 Sawgrass Ct.

City State Zip Code
Alexandria VA 22312

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4524145.10

Date / /

Transaction ID: H4-79651

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="2068.41"/>		<input type="text" value="2068.42"/>		<input type="text" value="4136.83"/>

C. Full Name (Last, First, Middle Initial)
Julia Hejl

Mailing Address
10554 Brookview Dr.

City State Zip Code
Carmel IN 46032

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4524237.45

Date / /

Transaction ID: H4-79652

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="46.17"/>		<input type="text" value="46.18"/>		<input type="text" value="92.35"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="3013.88"/>		<input type="text" value="3013.91"/>		<input type="text" value="6027.79"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Judi Kanter

Mailing Address
267 Paseo Bernal Ave.

City State Zip Code
Moraga CA 94556

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4527483.89

Activity or Event Identifier:
AVD05

Date / /

Transaction ID: H4-79653

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1623.22		1623.22		3246.44

B. Full Name (Last, First, Middle Initial)
Amie Kershner

Mailing Address
2209 E. Lombard St. #1

City State Zip Code
Baltimore MD 21231

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4528876.78

Activity or Event Identifier:
AVD05

Date / /

Transaction ID: H4-79654

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
696.44		696.45		1392.89

C. Full Name (Last, First, Middle Initial)
Alyssa Krop

Mailing Address
4525 N 20th Place

City State Zip Code
Arlington VA 22207

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4529661.74

Activity or Event Identifier:
AVD05

Date / /

Transaction ID: H4-79655

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
392.48		392.48		784.96

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2712.14		2712.15		5424.29

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Julia Lamont

Mailing Address
4413 17th Street NW

City State Zip Code
Washington DC 20011

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4530712.37

Date 10 / 31 / 2005

Transaction ID: H4-79656

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
525.31		525.32		1050.63

B. Full Name (Last, First, Middle Initial)
Rochelle Sachs Levin

Mailing Address
22800 SW 157th Avenue

City State Zip Code
Miami FL 33170

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4535054.93

Date 10 / 31 / 2005

Transaction ID: H4-79657

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2171.28		2171.28		4342.56

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

Mailing Address
50 East 89th Street 6E

City State Zip Code
New York NY 10128

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4538360.13

Date 10 / 31 / 2005

Transaction ID: H4-79658

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1652.60		1652.60		3305.20

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4349.19		4349.20		8698.39

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Colleen Medlock			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 14637 Locustwood Lane			Allocated Activity or Event Year-To-Date 4539098.10	
City Silver Spring	State MD	Zip Code 20905	Date M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5 Transaction ID: H4-79659	
Purpose of Disbursement: Salaries				
Activity or Event Identifier: AVD05				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
368.98		368.99		737.97

B. Full Name (Last, First, Middle Initial) Sherry Merfish			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2720 Pittsburg			Allocated Activity or Event Year-To-Date 4542428.36	
City Houston	State TX	Zip Code 77005	Date M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5 Transaction ID: H4-79660	
Purpose of Disbursement: Salaries				
Activity or Event Identifier: AVD05				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1665.13		1665.13		3330.26

C. Full Name (Last, First, Middle Initial) Anne Moses			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 251 28th Street			Allocated Activity or Event Year-To-Date 4545307.92	
City San Francisco	State CA	Zip Code 94131	Date M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5 Transaction ID: H4-79661	
Purpose of Disbursement: Salaries				
Activity or Event Identifier: AVD05				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1439.78		1439.78		2879.56

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3473.89		3473.90		6947.79

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Elizabeth Mullane			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 345 E. 94th St Apt 3H			Allocated Activity or Event Year-To-Date 4545736.98		
City New York	State NY	Zip Code 10128	Date MM / DD / YYYY 10 / 31 / 2005		
Purpose of Disbursement: Salaries			Category/Type		
Activity or Event Identifier: AVD05			Transaction ID: H4-79662		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
214.53		214.53		429.06

B. Full Name (Last, First, Middle Initial) Jamie Natelson			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1128 6th Avenue, #1			Allocated Activity or Event Year-To-Date 4547842.58		
City Venice	State CA	Zip Code 90291	Date MM / DD / YYYY 10 / 31 / 2005		
Purpose of Disbursement: Salaries			Category/Type		
Activity or Event Identifier: AVD05			Transaction ID: H4-79663		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1052.80		1052.80		2105.60

C. Full Name (Last, First, Middle Initial) Amy Padre			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3429 Yuma Street NW Apt 104			Allocated Activity or Event Year-To-Date 4549008.84		
City Washington	State DC	Zip Code 20008	Date MM / DD / YYYY 10 / 31 / 2005		
Purpose of Disbursement: Salaries			Category/Type		
Activity or Event Identifier: AVD05			Transaction ID: H4-79664		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
583.13		583.13		1166.26

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1850.46		1850.46		3700.92

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

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

Mailing Address
1320 N Veitch Street #1716

City State Zip Code
Arlington VA 22201

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4550442.07

Date 10 / 31 / 2005

Transaction ID: H4-79665

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
716.61		716.62		1433.23

B. Full Name (Last, First, Middle Initial)
Kara Pipoli

Mailing Address
44 Spring Street

City State Zip Code
Chester CT 06412

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4550626.77

Date 10 / 31 / 2005

Transaction ID: H4-79666

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
92.35		92.35		184.70

C. Full Name (Last, First, Middle Initial)
Tiffany Reed

Mailing Address
2450 Ontario Rd, NW

City State Zip Code
Washington DC 20009

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4551624.19

Date 10 / 31 / 2005

Transaction ID: H4-79667

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
498.71		498.71		997.42

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1307.67		1307.68		2615.35

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

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

Mailing Address
612 C Street SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement:
Salaries

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4552955.78

Date / /
Transaction ID: H4-79668

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
665.79		665.80		1331.59

B. Full Name (Last, First, Middle Initial)
Rebecca Hughes Runyan

Mailing Address
1503 30th Street NW Apt 1

City	State	Zip Code
Washington	DC	20007

Purpose of Disbursement:
Salaries

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4553817.97

Date / /
Transaction ID: H4-79669

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
431.09		431.10		862.19

C. Full Name (Last, First, Middle Initial)
Bret Shaw

Mailing Address
1411 N Rolfe Street #6

City	State	Zip Code
Arlington	VA	22209

Purpose of Disbursement:
Salaries

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4554580.77

Date / /
Transaction ID: H4-79670

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
381.40		381.40		762.80

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1478.28		1478.30		2956.58

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Jacque St. Romain

Mailing Address
307 K Street NE

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement:
Salaries

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4554696.21

Date / /

Transaction ID: H4-79671

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
57.72		57.72		115.44

B. Full Name (Last, First, Middle Initial)
Patricia Williams

Mailing Address
3 Wyndham Drive

City	State	Zip Code
Portola Valley	CA	94028

Purpose of Disbursement:
Salaries

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4558164.54

Date / /

Transaction ID: H4-79672

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1734.16		1734.17		3468.33

C. Full Name (Last, First, Middle Initial)
Joanne Wilson

Mailing Address
3806 Viser Court

City	State	Zip Code
Bowie	MD	20715

Purpose of Disbursement:
Salaries

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4559157.97

Date / /

Transaction ID: H4-79673

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
496.71		496.72		993.43

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2288.59		2288.61		4577.20

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Jennifer Zukowski			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 80			Allocated Activity or Event Year-To-Date 4560246.77		
City	State	Zip Code	Category/ Type		
Falmouth	MA	02541			
Purpose of Disbursement: Salaries			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/>		
Activity or Event Identifier: AVD05			Transaction ID: H4-79674		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
544.40		544.40		1088.80

B. Full Name (Last, First, Middle Initial) Julia Altum			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 213 Buchanan Street			Allocated Activity or Event Year-To-Date 4560461.18		
City	State	Zip Code	Category/ Type		
Alexandria	VA	22314			
Purpose of Disbursement: Salaries			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/>		
Activity or Event Identifier: AVD05			Transaction ID: H4-79675		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
107.20		107.21		214.41

C. Full Name (Last, First, Middle Initial) Krystal Banzon			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7343 Palmetto Avenue			Allocated Activity or Event Year-To-Date 4560645.13		
City	State	Zip Code	Category/ Type		
Fontana	CA	92336			
Purpose of Disbursement: Salaries			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/>		
Activity or Event Identifier: AVD05			Transaction ID: H4-79676		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
91.97		91.98		183.95

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
743.57		743.59		1487.16

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Amanda Bates

Mailing Address
950 24th Street NW Apt 717

City State Zip Code
Washington DC 20052

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4560810.57

Activity or Event Identifier:
AVD05

Date / /

Transaction ID: H4-79677

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="82.72"/>		<input type="text" value="82.72"/>		<input type="text" value="165.44"/>

B. Full Name (Last, First, Middle Initial)
Amanda Benzie

Mailing Address
15754 Culver Drive

City State Zip Code
East Lansing MI 48823

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4560976.01

Activity or Event Identifier:
AVD05

Date / /

Transaction ID: H4-79678

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="82.72"/>		<input type="text" value="82.72"/>		<input type="text" value="165.44"/>

C. Full Name (Last, First, Middle Initial)
Tanya Bjork

Mailing Address
203 South Paterson Street Suite 400

City State Zip Code
Madison WI 53703

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4563509.00

Activity or Event Identifier:
AVD05

Date / /

Transaction ID: H4-79679

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="1266.49"/>		<input type="text" value="1266.50"/>		<input type="text" value="2532.99"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="1431.93"/>		<input type="text" value="1431.94"/>		<input type="text" value="2863.87"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Anne Caprara

Mailing Address
2445 27th Court

City State Zip Code
Arlington VA 22206

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4564797.54

Date / /

Transaction ID: H4-79680

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
644.27		644.27		1288.54

B. Full Name (Last, First, Middle Initial)
Kate Chapek

Mailing Address
1320 N Veitch Street #1037

City State Zip Code
Arlington VA 22201

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4566309.86

Date / /

Transaction ID: H4-79681

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
756.16		756.16		1512.32

C. Full Name (Last, First, Middle Initial)
Kathleen Coyne-McCoy

Mailing Address
267 Gleaner Chapel Road

City State Zip Code
North Scituate RI 02857

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4568918.42

Date / /

Transaction ID: H4-79682

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1304.28		1304.28		2608.56

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2704.71		2704.71		5409.42

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Christopher Delaunay

Mailing Address
4127 River Road NW Apt 3

City State Zip Code
Washington DC 20016

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4569010.77

Activity or Event Identifier:
AVD05

Date 10 / 31 / 2005

Transaction ID: H4-79683

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.17		46.18		92.35

B. Full Name (Last, First, Middle Initial)
John-Michael Dorchak

Mailing Address
4850 Connecticut Avenue NW Apt 408

City State Zip Code
Washington DC 20008

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4569103.12

Activity or Event Identifier:
AVD05

Date 10 / 31 / 2005

Transaction ID: H4-79684

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.17		46.18		92.35

C. Full Name (Last, First, Middle Initial)
Kellie Dupree

Mailing Address
333 12th Street, NE

City State Zip Code
Washington DC 20002

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4570008.10

Activity or Event Identifier:
AVD05

Date 10 / 31 / 2005

Transaction ID: H4-79685

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
452.49		452.49		904.98

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
544.83		544.85		1089.68

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Peggy Egan

Mailing Address
9705 Meeks Bay Ave

City State Zip Code
Las Vegas NV 89148

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4572262.45

Activity or Event Identifier:
AVD05

Date / /

Transaction ID: H4-79686

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1127.17		1127.18		2254.35

B. Full Name (Last, First, Middle Initial)
Emily Elbert

Mailing Address
21811 Oceanview Lane

City State Zip Code
Huntington Beach CA 92646

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4574443.39

Activity or Event Identifier:
AVD05

Date / /

Transaction ID: H4-79687

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1090.47		1090.47		2180.94

C. Full Name (Last, First, Middle Initial)
Chris Esposito

Mailing Address
624 East Broadway

City State Zip Code
Boston MA 02127

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4577221.03

Activity or Event Identifier:
AVD05

Date / /

Transaction ID: H4-79688

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1388.82		1388.82		2777.64

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3606.46		3606.47		7212.93

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Eureka Gilkey

Mailing Address
930 M Street, NW #804

City State Zip Code
Washington DC 20001

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4578989.50

Activity or Event Identifier:
AVD05

Date / /

Transaction ID: H4-79689

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="884.23"/>		<input type="text" value="884.24"/>		<input type="text" value="1768.47"/>

B. Full Name (Last, First, Middle Initial)
Christina Heckart

Mailing Address
532 20th Street, NW Apt. 215

City State Zip Code
Washington DC 20006

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4579744.01

Activity or Event Identifier:
AVD05

Date / /

Transaction ID: H4-79690

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="377.25"/>		<input type="text" value="377.26"/>		<input type="text" value="754.51"/>

C. Full Name (Last, First, Middle Initial)
Maren Hesla

Mailing Address
5515 Little Falls Rd.

City State Zip Code
Arlington VA 22207

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4582436.26

Activity or Event Identifier:
AVD05

Date / /

Transaction ID: H4-79691

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="1346.12"/>		<input type="text" value="1346.13"/>		<input type="text" value="2692.25"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="2607.60"/>		<input type="text" value="2607.63"/>		<input type="text" value="5215.23"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mary L Hodge

Mailing Address
908 Harrison Circle

City State Zip Code
Alexandria VA 22304

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4583340.30

Activity or Event Identifier:
AVD05

Date / /

Transaction ID: H4-79692

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="452.02"/>		<input type="text" value="452.02"/>		<input type="text" value="904.04"/>

B. Full Name (Last, First, Middle Initial)
Julie Holzhueter

Mailing Address
6825 19th Road N

City State Zip Code
Arlington VA 22205

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4584357.81

Activity or Event Identifier:
AVD05

Date / /

Transaction ID: H4-79693

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="508.75"/>		<input type="text" value="508.76"/>		<input type="text" value="1017.51"/>

C. Full Name (Last, First, Middle Initial)
Benjamin Jones

Mailing Address
10117 Big Rock Rd

City State Zip Code
Silver Spring MD 20901

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4586851.65

Activity or Event Identifier:
AVD05

Date / /

Transaction ID: H4-79694

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="1246.92"/>		<input type="text" value="1246.92"/>		<input type="text" value="2493.84"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="2207.69"/>		<input type="text" value="2207.70"/>		<input type="text" value="4415.39"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Dana Jones

Mailing Address
11726 Putting Green Court

City State Zip Code
Reston VA 20191

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4588641.34

Activity or Event Identifier:
AVD05

Date / /

Transaction ID: H4-79695

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
894.84		894.85		1789.69

B. Full Name (Last, First, Middle Initial)
Bob Kearney

Mailing Address
1260 21st NW Apt 811

City State Zip Code
Washington DC 20036

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4590865.00

Activity or Event Identifier:
AVD05

Date / /

Transaction ID: H4-79696

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1111.83		1111.83		2223.66

C. Full Name (Last, First, Middle Initial)
Meredith Kormes

Mailing Address
4850 Connecticut Avenue NW Apt 904

City State Zip Code
Washington DC 20008

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4591014.06

Activity or Event Identifier:
AVD05

Date / /

Transaction ID: H4-79697

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
74.53		74.53		149.06

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2081.20		2081.21		4162.41

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
MaiLien Le

Mailing Address
24571 Belgreen Place

City State Zip Code
Lake Forest CA 92630

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4591239.30

Date / /

Transaction ID: H4-79698

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="112.62"/>		<input type="text" value="112.62"/>		<input type="text" value="225.24"/>

B. Full Name (Last, First, Middle Initial)
Susan Markham

Mailing Address
1423 A Street, SE

City State Zip Code
Washington DC 20003

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4593278.84

Date / /

Transaction ID: H4-79699

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="1019.77"/>		<input type="text" value="1019.77"/>		<input type="text" value="2039.54"/>

C. Full Name (Last, First, Middle Initial)
David McGonagle

Mailing Address
4857 Battery Lane Apt 506

City State Zip Code
Bethesda MD 20814

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4594412.07

Date / /

Transaction ID: H4-79700

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="566.61"/>		<input type="text" value="566.62"/>		<input type="text" value="1133.23"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="1699.00"/>		<input type="text" value="1699.01"/>		<input type="text" value="3398.01"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Martha McKenna

Mailing Address
913 South Decker Avenue

City State Zip Code
Baltimore MD 21224

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4597208.57

Date 10 / 31 / 2005

Transaction ID: H4-79701

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1398.25		1398.25		2796.50

B. Full Name (Last, First, Middle Initial)
Ashley Mills

Mailing Address
4872 Trinidad

City State Zip Code
Oakland CA 94602

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4597436.74

Date 10 / 31 / 2005

Transaction ID: H4-79702

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
114.08		114.09		228.17

C. Full Name (Last, First, Middle Initial)
Gladstone Payton

Mailing Address
1723 Q Street NW #102

City State Zip Code
Washington DC 20009

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4598592.11

Date 10 / 31 / 2005

Transaction ID: H4-79703

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
577.68		577.69		1155.37

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2090.01		2090.03		4180.04

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Katherine Pregliasco

Mailing Address
1900 South Eads Street No. 215

City State Zip Code
Arlington VA 22202

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4599455.44

Date 10 / 31 / 2005

Transaction ID: H4-79704

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
431.66		431.67		863.33

B. Full Name (Last, First, Middle Initial)
Rebecka Rosenquist

Mailing Address
4071A 24th Street

City State Zip Code
San Francisco CA 94114

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4600518.09

Date 10 / 31 / 2005

Transaction ID: H4-79705

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
531.32		531.33		1062.65

C. Full Name (Last, First, Middle Initial)
Cindy Smalls

Mailing Address
1900 South Eads Street # 206

City State Zip Code
Arlington VA 22202

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4601984.22

Date 10 / 31 / 2005

Transaction ID: H4-79706

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
733.06		733.07		1466.13

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1696.04		1696.07		3392.11

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Janice Smith
Mailing Address
4400 Massachusetts Avenue NW
City State Zip Code
Washington DC 20016
Purpose of Disbursement:
Salaries
Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
4602076.57
Date 10 / 31 / 2005
Transaction ID: H4-79707

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.17		46.18		92.35

B. Full Name (Last, First, Middle Initial)
Lisa Sohn
Mailing Address
3400 Sacramento St. #6
City State Zip Code
San Francisco CA 94118
Purpose of Disbursement:
Salaries
Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
4603791.69
Date 10 / 31 / 2005
Transaction ID: H4-79708

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
857.56		857.56		1715.12

C. Full Name (Last, First, Middle Initial)
Cristina Uribe
Mailing Address
4212 26th Street, Unit A
City State Zip Code
San Francisco CA 94131
Purpose of Disbursement:
Salaries
Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
4606058.43
Date 10 / 31 / 2005
Transaction ID: H4-79709

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1133.37		1133.37		2266.74

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2037.10		2037.11		4074.21

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Margaret Van Cleave

Mailing Address
438 New Jersey Ave SE

City State Zip Code
Washington DC 20003

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4607021.86

Date 10 / 31 / 2005

Transaction ID: H4-79710

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
481.71		481.72		963.43

B. Full Name (Last, First, Middle Initial)
Karen White

Mailing Address
1334 Walnut Avenue

City State Zip Code
Annapolis MD 21403

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4611775.78

Date 10 / 31 / 2005

Transaction ID: H4-79711

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2376.96		2376.96		4753.92

C. Full Name (Last, First, Middle Initial)
Renee Willette

Mailing Address
486 Mandana Blvd #5

City State Zip Code
Oakland CA 94610

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD05

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4612855.26

Date 10 / 31 / 2005

Transaction ID: H4-79712

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
539.74		539.74		1079.48

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3398.41		3398.42		6796.83

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Caitlin Zook

Mailing Address
4545 Connecticut Avenue NW Apt 431

City	State	Zip Code
Washington	DC	20008

Purpose of Disbursement:
Salaries

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4612901.43

Date / /
Transaction ID: H4-79713

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.08		23.09		46.17

B. Full Name (Last, First, Middle Initial)
Lauren Caselli

Mailing Address
8 Smallwood Drive

City	State	Zip Code
Pittsford	NY	14534

Purpose of Disbursement:
Salaries

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4613015.41

Date / /
Transaction ID: H4-79714

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
56.99		56.99		113.98

C. Full Name (Last, First, Middle Initial)
Perry Collins

Mailing Address
GU Alumni Square 48

City	State	Zip Code
Washington	DC	20057

Purpose of Disbursement:
Salaries

Activity or Event Identifier:
AVD05

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
4613106.76

Date / /
Transaction ID: H4-81654

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
45.67		45.68		91.35

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
125.74		125.76		251.50

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Staples

Mailing Address
1901 L Street NW

City State Zip Code
Washington DC 20036

Purpose of Disbursement:
Office Supplies Reimbursement

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 06 / 2005

Transaction ID: H4-78940-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
49.00		49.00		98.00

B. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
PO Box 360001

City State Zip Code
Ft Lauderdale FL 33336

Purpose of Disbursement:
Publication & Dues

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78956-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.50		7.50		15.00

C. Full Name (Last, First, Middle Initial)
Freeconference.com

Mailing Address
P.O. Box 93428

City State Zip Code
Los Angeles CA 90093

Purpose of Disbursement:
Meeting/Conference

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78957-30000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.65		75.65		151.30

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Exxon

Mailing Address
2150 M St NW

City State Zip Code
Washington DC 20037

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78958-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.78		17.78		35.56

B. Full Name (Last, First, Middle Initial)
Holiday Inn Express

Mailing Address
4 Tower Center Blvd

City State Zip Code
East Brunswick NJ 08816

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78958-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.81		52.81		105.62

C. Full Name (Last, First, Middle Initial)
Working Girls Cafe

Mailing Address
100 Spear St

City State Zip Code
San Francisco CA 94105

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78961-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
45.84		45.84		91.68

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Radio Shack

Mailing Address
938 Market St

City State Zip Code
San Francisco CA 94102

Purpose of Disbursement:
Office Supplies Expenses

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78962-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.73		1.73		3.46

B. Full Name (Last, First, Middle Initial)
US Post Office

Mailing Address
390 Main St

City State Zip Code
San Francisco CA 94105

Purpose of Disbursement:
Postage

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78963-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.00		37.00		74.00

C. Full Name (Last, First, Middle Initial)
Oakland Airport

Mailing Address
1 Airport Drive

City State Zip Code
Oakland CA 94621

Purpose of Disbursement:
Parking Fees

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78964-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.99		4.00		7.99

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Silver Legacy

Mailing Address
407 N Virginia St

City State Zip Code
Reno NV 89501

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78964-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.50		1.50		3.00

B. Full Name (Last, First, Middle Initial)
Tugals Bistro

Mailing Address
776 N Terminal Dr

City State Zip Code
Salt Lake City UT 84122

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78965-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.22		3.23		6.45

C. Full Name (Last, First, Middle Initial)
Tipu's Tiger

Mailing Address
531 S Higgins Ave

City State Zip Code
Missoula MT 59801

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78965-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.20		7.20		14.40

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
The Dark Room

Mailing Address
135 N Higgins Ave

City State Zip Code
Missoula MT 59802

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78965-30000

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
5.00 + 5.00 = 10.00

B. Full Name (Last, First, Middle Initial)
IT's A Grind Coffee

Mailing Address
1603 India St

City State Zip Code
San Diego CA 92101

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78966-10000

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
2.22 + 2.23 = 4.45

C. Full Name (Last, First, Middle Initial)
Indigo Grill

Mailing Address
1536 India St

City State Zip Code
San Diego CA 92101

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78966-20000

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
18.29 + 18.29 = 36.58

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
0.00 + 0.00 = 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Oakland Airport

Mailing Address
1 Airport Drive

City	State	Zip Code
Oakland	CA	94621

Purpose of Disbursement:
Parking Fees

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /

Transaction ID: H4-78966-30000

Activity or Event Identifier:
[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="4.49"/>		<input type="text" value="4.48"/>		<input type="text" value="8.97"/>

B. Full Name (Last, First, Middle Initial)
Five Star Parking

Mailing Address
Oakland Airport

City	State	Zip Code
Oakland	CA	94621

Purpose of Disbursement:
Parking Fees

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /

Transaction ID: H4-78966-40000

Activity or Event Identifier:
[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="7.98"/>		<input type="text" value="7.98"/>		<input type="text" value="15.96"/>

C. Full Name (Last, First, Middle Initial)
Enterprise Rent A Car

Mailing Address
1327 W Palm St

City	State	Zip Code
San Diego	CA	92101

Purpose of Disbursement:
Travel/ Accommodations

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /

Transaction ID: H4-78966-50000

Activity or Event Identifier:
[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="12.66"/>		<input type="text" value="12.66"/>		<input type="text" value="25.32"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Tugals Bistro

Mailing Address
776 N Terminal Dr

City State Zip Code
Salt Lake City UT 84122

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78966-60000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.91		2.91		5.82

B. Full Name (Last, First, Middle Initial)
HMS Host

Mailing Address
Po Box 22073

City State Zip Code
Salt Lake City UT 84122

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78966-70000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.13		2.14		4.27

C. Full Name (Last, First, Middle Initial)
Skywest

Mailing Address
776 N Terminal Dr

City State Zip Code
Salt Lake City UT 84122

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78966-80000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.98		2.97		5.95

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Barnes & Noble

Mailing Address
98 Broadway

City State Zip Code
Oakland CA 94607

Purpose of Disbursement:
Office Supplies Expenses

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 10 / 13 / 2005

Transaction ID: H4-78966-90000

Activity or Event Identifier:

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.00		3.00		6.00

B. Full Name (Last, First, Middle Initial)
Blue & Gold Fleet

Mailing Address
41 Pier

City State Zip Code
San Francisco CA 94133

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 10 / 13 / 2005

Transaction ID: H4-78966-100000

Activity or Event Identifier:

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.50		5.50		11.00

C. Full Name (Last, First, Middle Initial)
Oakland Airport

Mailing Address
1 Airport Rd

City State Zip Code
Oakland CA 94621

Purpose of Disbursement:
Parking Fees

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 10 / 13 / 2005

Transaction ID: H4-78967-10000

Activity or Event Identifier:

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.02		8.02		16.04

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Au Bon Pain
Mailing Address
1732 L Street NW
City Washington **State** DC **Zip Code** 20036
Purpose of Disbursement:
Travel/Accommodation /Meals

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
.00

Activity or Event Identifier:
[MEMO ITEM]

Date 10 / 13 / 2005
Transaction ID: H4-78968-10000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.69		1.69		3.38

B. Full Name (Last, First, Middle Initial)
Staples
Mailing Address
1901 L Street NW
City Washington **State** DC **Zip Code** 20036
Purpose of Disbursement:
Office Supplies Expenses

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
.00

Activity or Event Identifier:
[MEMO ITEM]

Date 10 / 13 / 2005
Transaction ID: H4-78969-10000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
73.50		73.49		146.99

C. Full Name (Last, First, Middle Initial)
Staples
Mailing Address
1901 L Street NW
City Washington **State** DC **Zip Code** 20036
Purpose of Disbursement:
Office Supplies Expenses

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
.00

Activity or Event Identifier:
[MEMO ITEM]

Date 10 / 13 / 2005
Transaction ID: H4-78969-20000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.22		23.23		46.45

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Crate & Barrel

Mailing Address
2800 Clarendon Blvd

City	State	Zip Code
Arlington	VA	22201

Purpose of Disbursement:
Office Supplies Expenses

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-78969-30000

Activity or Event Identifier:
[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="37.50"/>		<input type="text" value="37.50"/>		<input type="text" value="75.00"/>

B. Full Name (Last, First, Middle Initial)
Office Depot

Mailing Address
676 S Whitney Way

City	State	Zip Code
Madison	WI	53711

Purpose of Disbursement:
Office Supplies Expenses

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-78971-10000

Activity or Event Identifier:
[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="42.19"/>		<input type="text" value="42.20"/>		<input type="text" value="84.39"/>

C. Full Name (Last, First, Middle Initial)
Travelocity.com

Mailing Address
15100 Trinity Blvd

City	State	Zip Code
Fort Worth	TX	76155

Purpose of Disbursement:
Travel/ Accommodations

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-78972-10000

Activity or Event Identifier:
[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="2.50"/>		<input type="text" value="2.50"/>		<input type="text" value="5.00"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Northwest Airlines

Mailing Address
7500 Airline Drive

City	State	Zip Code
Minneapolis	MN	55450

Purpose of Disbursement:
Travel/ Accommodations

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /

Transaction ID: H4-78972-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="201.20"/>		<input type="text" value="201.20"/>		<input type="text" value="402.40"/>

B. Full Name (Last, First, Middle Initial)
Northwest Airlines

Mailing Address
7500 Airline Drive

City	State	Zip Code
Minneapolis	MN	55450

Purpose of Disbursement:
Travel/ Accommodations

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /

Transaction ID: H4-78972-30000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="129.90"/>		<input type="text" value="129.89"/>		<input type="text" value="259.79"/>

C. Full Name (Last, First, Middle Initial)
Country Springs

Mailing Address
1501 N Point

City	State	Zip Code
Stevens Point	WI	54481

Purpose of Disbursement:
Travel/ Accommodations

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /

Transaction ID: H4-78972-40000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="47.05"/>		<input type="text" value="47.06"/>		<input type="text" value="94.11"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Louisiana Cafe

Mailing Address
613 Selby Ave

City State Zip Code
St Paul MN 55102

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78972-50000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.29		6.30		12.59

B. Full Name (Last, First, Middle Initial)
The Liffey

Mailing Address
175 7th St W

City State Zip Code
St Paul MN 55102

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78972-60000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.56		10.55		21.11

C. Full Name (Last, First, Middle Initial)
Avis Rent A Car

Mailing Address
Mpls Stp Intl Airport

City State Zip Code
St Paul MN 55111

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78972-70000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.65		33.65		67.30

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Service Station

Mailing Address
296 7th St E

City State Zip Code
St Paul MN 55101

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78972-80000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.35		8.34		16.69

B. Full Name (Last, First, Middle Initial)
Radisson Hotel

Mailing Address
411 Minnesota St

City State Zip Code
St Paul MN 55101

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78972-90000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
64.93		64.94		129.87

C. Full Name (Last, First, Middle Initial)
Airport Parking

Mailing Address
4000 International Ln

City State Zip Code
Madison WI 53704

Purpose of Disbursement:
Parking Fees

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78972-100000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.00		10.00		20.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
[]	[]	[]

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Expedia

Mailing Address
13810 SE Eastgate Way

City State Zip Code
Bellevue WA 98005

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78972-110000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.50		2.50		5.00

B. Full Name (Last, First, Middle Initial)
Northwest Airlines

Mailing Address
7500 Airline Drive

City State Zip Code
Minneapolis MN 55450

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78973-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
371.90		371.90		743.80

C. Full Name (Last, First, Middle Initial)
HMS Host

Mailing Address
4300 Glumack Dr

City State Zip Code
St Paul MN 55111

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78973-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.08		8.09		16.17

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Alexis

Mailing Address
3550 N Central Ave

City State Zip Code
Phoenix AZ 85012

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78973-30000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.68		30.67		61.35

B. Full Name (Last, First, Middle Initial)
Wyndham Hotel

Mailing Address
427 N 44th St

City State Zip Code
Phoenix AZ 85008

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78973-40000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.28		27.29		54.57

C. Full Name (Last, First, Middle Initial)
Airport Parking

Mailing Address
4000 International Ln

City State Zip Code
Madison WI 53704

Purpose of Disbursement:
Parking Fees

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78973-50000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.00		11.00		22.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Northwest Airlines

Mailing Address
7500 Airline Drive

City State Zip Code
Minneapolis MN 55450

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78974-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
290.44		290.45		580.89

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

Mailing Address
8140 Wlanut Hill Lane

City State Zip Code
Dallas TX 75231

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78975-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.50		12.50		25.00

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

Mailing Address
13810 SE Eastgate Way

City State Zip Code
Bellevue WA 98005

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78975-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.00		25.00		50.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Serafina

Mailing Address
1022 Madison Ave

City	State	Zip Code	Category/ Type
New York	NY	10021	

Purpose of Disbursement:
Travel/Accommodation /Meals

Activity or Event Identifier:
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-78976-10000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="10.44"/>		<input type="text" value="10.44"/>		<input type="text" value="20.88"/>

B. Full Name (Last, First, Middle Initial)
Staples

Mailing Address
86th & Lexington

City	State	Zip Code	Category/ Type
New York	NY	10028	

Purpose of Disbursement:
Office Supplies Expenses

Activity or Event Identifier:
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-78977-10000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="36.81"/>		<input type="text" value="36.81"/>		<input type="text" value="73.62"/>

C. Full Name (Last, First, Middle Initial)
Wyndham Phoenix

Mailing Address
50 East Adams

City	State	Zip Code	Category/ Type
Phoenix	AZ	85004	

Purpose of Disbursement:
Catering/Facilities

Activity or Event Identifier:
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-78978-10000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="529.23"/>		<input type="text" value="529.24"/>		<input type="text" value="1058.47"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Wyndham Phoenix

Mailing Address
50 East Adams

City Phoenix	State AZ	Zip Code 85004	Category/ Type
Purpose of Disbursement: Catering/Facilities			

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-78978-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="3173.48"/>		<input type="text" value="3173.48"/>		<input type="text" value="6346.96"/>

B. Full Name (Last, First, Middle Initial)
Cendant

Mailing Address
9 West 57th

City Chicago	State IL	Zip Code 10019	Category/ Type
Purpose of Disbursement: Travel/ Accommodations			

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-78978-30000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="3.49"/>		<input type="text" value="3.50"/>		<input type="text" value="6.99"/>

C. Full Name (Last, First, Middle Initial)
Cendant

Mailing Address
9 West 57th

City Chicago	State IL	Zip Code 10019	Category/ Type
Purpose of Disbursement: Travel/ Accommodations			

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-78978-40000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="3.00"/>		<input type="text" value="2.99"/>		<input type="text" value="5.99"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Southwest Airlines

Mailing Address
2702 Love Field Drive

City State Zip Code
Dallas TX 75235

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78979-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
104.20		104.20		208.40

B. Full Name (Last, First, Middle Initial)
Sentrylink

Mailing Address
7500 Greenway Center Dr

City State Zip Code
Greenbelt MD 20770

Purpose of Disbursement:
Employee Recruitment

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78979-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.97		9.98		19.95

C. Full Name (Last, First, Middle Initial)
Southwest Airlines

Mailing Address
2702 Love Field Drive

City State Zip Code
Dallas TX 75235

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78979-30000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
44.00		44.00		88.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
AOL Service

Mailing Address
8619 Westwood Center

City State Zip Code
Vienna VA 22182

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78980-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.98		4.97		9.95

B. Full Name (Last, First, Middle Initial)
Midwest Airlines

Mailing Address
6744 S Howell Ave

City State Zip Code
Oak Creek WI 53154

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78980-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
118.95		118.96		237.91

C. Full Name (Last, First, Middle Initial)
United Airlines

Mailing Address
PO Box 66100

City State Zip Code
Chicago IL 60666

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78980-30000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
179.20		179.20		358.40

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Southwest Airlines

Mailing Address
2702 Love Field Drive

City State Zip Code
Dallas TX 75235

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78980-40000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.00		2.00		4.00

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

Mailing Address
13810 SE Eastgate Way

City State Zip Code
Bellevue WA 98005

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78980-50000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.50		2.50		5.00

C. Full Name (Last, First, Middle Initial)
Rhode Island Comm Service

Mailing Address
50 Houghton Street

City State Zip Code
Providence RI 02904

Purpose of Disbursement:
Cable Services

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78980-60000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.97		24.98		49.95

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Southwest Airlines

Mailing Address
2702 Love Field Drive

City	State	Zip Code	Category/ Type
Dallas	TX	75235	

Purpose of Disbursement: Travel/ Accommodations	Category/ Type
--	-------------------

Activity or Event Identifier:
[MEMO ITEM]

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
..... .00

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	3	/	2	0	0	5

Transaction ID: H4-78980-70000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
..... 158.20		..... 158.20		..... 316.40

B. Full Name (Last, First, Middle Initial)
Alaska Airlines

Mailing Address
PO Box 68900

City	State	Zip Code	Category/ Type
Seattle	WA	98168	

Purpose of Disbursement: Travel/ Accommodations	Category/ Type
--	-------------------

Activity or Event Identifier:
[MEMO ITEM]

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
..... .00

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	3	/	2	0	0	5

Transaction ID: H4-78980-80000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
..... 79.20		..... 79.20		..... 158.40

C. Full Name (Last, First, Middle Initial)
Alaska Airlines

Mailing Address
PO Box 68900

City	State	Zip Code	Category/ Type
Seattle	WA	98168	

Purpose of Disbursement: Travel/ Accommodations	Category/ Type
--	-------------------

Activity or Event Identifier:
[MEMO ITEM]

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
..... .00

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	3	/	2	0	0	5

Transaction ID: H4-78980-90000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
..... 79.20		..... 79.20		..... 158.40

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
..... 0.00		..... 0.00		..... 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
.....

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Southwest Airlines

Mailing Address
2702 Love Field Drive

City	State	Zip Code
Dallas	TX	75235

Purpose of Disbursement:
Travel/ Accommodations

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /

Transaction ID: H4-78980-100000

Activity or Event Identifier:
[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="90.20"/>		<input type="text" value="90.20"/>		<input type="text" value="180.40"/>

B. Full Name (Last, First, Middle Initial)
Southwest Airlines

Mailing Address
2702 Love Field Drive

City	State	Zip Code
Dallas	TX	75235

Purpose of Disbursement:
Travel/ Accommodations

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /

Transaction ID: H4-78980-110000

Activity or Event Identifier:
[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="142.20"/>		<input type="text" value="142.20"/>		<input type="text" value="284.40"/>

C. Full Name (Last, First, Middle Initial)
Northwest Airlines

Mailing Address
7500 Airline Drive

City	State	Zip Code
Minneapolis	MN	55450

Purpose of Disbursement:
Travel/ Accommodations

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /

Transaction ID: H4-78980-120000

Activity or Event Identifier:
[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="171.45"/>		<input type="text" value="171.45"/>		<input type="text" value="342.90"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Frontier Airlines

Mailing Address
7001 Tower Rd

City State Zip Code
Denver CO 80249

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78980-130000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
116.70		116.69		233.39

B. Full Name (Last, First, Middle Initial)
Cendant

Mailing Address
9 West 57th Ave

City State Zip Code
New York NY 10019

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78980-140000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.99		3.00		5.99

C. Full Name (Last, First, Middle Initial)
Southwest Airlines

Mailing Address
2702 Love Field Drive

City State Zip Code
Dallas TX 75235

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78981-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
56.35		56.35		112.70

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Indiana Mem Hotel

Mailing Address
900 E 7TH St

City State Zip Code
Bloomington IN 47405

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78982-10000

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
1238.89 + 1238.89 = 2477.78

B. Full Name (Last, First, Middle Initial)
Holiday Inn

Mailing Address
200 S Pattee St

City State Zip Code
Missoula MT 59802

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78983-10000

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
1585.65 + 1585.66 = 3171.31

C. Full Name (Last, First, Middle Initial)
US Airways

Mailing Address
2345 Crystal Drive

City State Zip Code
Arlington VA 22227

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78984-10000

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
94.20 + 94.20 = 188.40

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
0.00 + 0.00 = 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Cheaptickets

Mailing Address
200 South Wacker Drive

City	State	Zip Code
Chicago	IL	60606

Purpose of Disbursement:
Publication & Dues

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-78985-10000

Activity or Event Identifier:
[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="1.99"/>		<input type="text" value="2.00"/>		<input type="text" value="3.99"/>

B. Full Name (Last, First, Middle Initial)
Cosi

Mailing Address
1875 K Street NW

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement:
Travel/Accommodation /Meals

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-78985-20000

Activity or Event Identifier:
[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="9.35"/>		<input type="text" value="9.36"/>		<input type="text" value="18.71"/>

C. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
PO Box 360001

City	State	Zip Code
Ft Lauderdale	FL	33336

Purpose of Disbursement:
Publication & Dues

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-78985-30000

Activity or Event Identifier:
[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="80.00"/>		<input type="text" value="79.99"/>		<input type="text" value="159.99"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Staples

Mailing Address
1901 L Street NW

City State Zip Code
Washington DC 20036

Purpose of Disbursement:
Office Supplies Expenses

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-78985-40000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="7.36"/>		<input type="text" value="7.36"/>		<input type="text" value="14.72"/>

B. Full Name (Last, First, Middle Initial)
Ikea

Mailing Address
2700 Potomac Mills Cir

City State Zip Code
Woodbridge VA 22192

Purpose of Disbursement:
Office Supplies Expenses

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-78985-50000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="6.28"/>		<input type="text" value="6.28"/>		<input type="text" value="12.56"/>

C. Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address
1738 L Street NW

City State Zip Code
Washington DC 20036

Purpose of Disbursement:
Telephone

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-78986-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="4423.33"/>		<input type="text" value="4423.34"/>		<input type="text" value="8846.67"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
World Access Service

Mailing Address
2805 N Parham Rd

City State Zip Code
Richmond VA 23294

Purpose of Disbursement:
Internet Services

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78987-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.75		6.75		13.50

B. Full Name (Last, First, Middle Initial)
World Access Service

Mailing Address
2805 N Parham Rd

City State Zip Code
Richmond VA 23294

Purpose of Disbursement:
Internet Services

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78987-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.75		6.75		13.50

C. Full Name (Last, First, Middle Initial)
World Access Service

Mailing Address
2805 N Parham Rd

City State Zip Code
Richmond VA 23294

Purpose of Disbursement:
Internet Services

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78987-30000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.00		6.00		12.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Northwest Airlines

Mailing Address
7500 Airline Drive

City State Zip Code
Minneapolis MN 55450

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78988-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
89.20		89.20		178.40

B. Full Name (Last, First, Middle Initial)
Northwest Airlines

Mailing Address
7500 Airline Drive

City State Zip Code
Minneapolis MN 55450

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78988-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
89.20		89.20		178.40

C. Full Name (Last, First, Middle Initial)
Northwest Airlines

Mailing Address
7500 Airline Drive

City State Zip Code
Minneapolis MN 55450

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-78989-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
59.60		59.60		119.20

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Flying Star

Mailing Address
3416 Central Ave Se

City State Zip Code
Albuquerque NM 87106

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 10 / 13 / 2005

Transaction ID: H4-79001-10000

Activity or Event Identifier:

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.85		13.85		27.70

B. Full Name (Last, First, Middle Initial)
Starbucks

Mailing Address
100 N 1st St

City State Zip Code
Phoenix AZ 85004

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 10 / 13 / 2005

Transaction ID: H4-79001-20000

Activity or Event Identifier:

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.92		6.92		13.84

C. Full Name (Last, First, Middle Initial)
Budget Rent A Car

Mailing Address
5045 N Black Canyon Hwy

City State Zip Code
Phoenix AZ 85015

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 10 / 13 / 2005

Transaction ID: H4-79001-30000

Activity or Event Identifier:

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
137.42		137.41		274.83

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Tucson Airport

Mailing Address
7250 S Tucson Blvd

City State Zip Code
Tucson AZ 85706

Purpose of Disbursement:
Parking Fees

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79001-40000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.23		5.24		10.47

B. Full Name (Last, First, Middle Initial)
Chaya Brasserie

Mailing Address
132 The Embarcadero

City State Zip Code
San Francisco CA 94105

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79004-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
36.93		36.92		73.85

C. Full Name (Last, First, Middle Initial)
Henry's Hunan

Mailing Address
110 Natoma St

City State Zip Code
San Francisco CA 94105

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79004-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.32		10.33		20.65

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Cosmopolitan Cafe

Mailing Address
121 Spear St # B8

City State Zip Code
San Francisco CA 94105

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 10 / 13 / 2005

Transaction ID: H4-79004-30000

Activity or Event Identifier:

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34.20		34.20		68.40

B. Full Name (Last, First, Middle Initial)
Bay Wolf

Mailing Address
3853 Piedmont Ave

City State Zip Code
Oakland CA 94611

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 10 / 13 / 2005

Transaction ID: H4-79004-40000

Activity or Event Identifier:

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.11		25.12		50.23

C. Full Name (Last, First, Middle Initial)
US Post Office

Mailing Address
226 Harrison Street

City State Zip Code
San Francisco CA 94105

Purpose of Disbursement:
Postage

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 10 / 13 / 2005

Transaction ID: H4-79005-10000

Activity or Event Identifier:

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.50		18.50		37.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Wayport

Mailing Address
8303 North Mopac Expressway

City State Zip Code
Austin TX 75080

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79006-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.97		4.98		9.95

B. Full Name (Last, First, Middle Initial)
Avis Rent A Car

Mailing Address
7000 NE Airport Way

City State Zip Code
Portland OR 97218

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79006-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
61.24		61.24		122.48

C. Full Name (Last, First, Middle Initial)
Benson Hotel

Mailing Address
309 SW Broadway

City State Zip Code
Portland OR 97205

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79006-30000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.50		25.50		51.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
PO Box 360001

City	State	Zip Code
Ft Lauderdale	FL	33336

Purpose of Disbursement:
Publication & Dues

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /

Transaction ID: H4-79007-10000

Activity or Event Identifier:
[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="37.50"/>		<input type="text" value="37.50"/>		<input type="text" value="75.00"/>

B. Full Name (Last, First, Middle Initial)
AOL Service

Mailing Address
8619 Westwood Center

City	State	Zip Code
Vienna	VA	22182

Purpose of Disbursement:
Internet Services

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /

Transaction ID: H4-79010-10000

Activity or Event Identifier:
[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="11.95"/>		<input type="text" value="11.95"/>		<input type="text" value="23.90"/>

C. Full Name (Last, First, Middle Initial)
AOL Service

Mailing Address
8619 Westwood Center

City	State	Zip Code
Vienna	VA	22182

Purpose of Disbursement:
Internet Services

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /

Transaction ID: H4-79010-20000

Activity or Event Identifier:
[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="11.95"/>		<input type="text" value="11.95"/>		<input type="text" value="23.90"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
AOL Service

Mailing Address
8619 Westwood Center

City	State	Zip Code
Vienna	VA	22182

Purpose of Disbursement:
Internet Services

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
..... .00

Date / /

Transaction ID: H4-79010-30000

Activity or Event Identifier:
[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
..... 11.95		..... 11.95		..... 23.90

B. Full Name (Last, First, Middle Initial)
AOL Service

Mailing Address
8619 Westwood Center

City	State	Zip Code
Vienna	VA	22182

Purpose of Disbursement:
Internet Services

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
..... .00

Date / /

Transaction ID: H4-79010-40000

Activity or Event Identifier:
[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
..... 11.95		..... 11.95		..... 23.90

C. Full Name (Last, First, Middle Initial)
AOL Service

Mailing Address
8619 Westwood Center

City	State	Zip Code
Vienna	VA	22182

Purpose of Disbursement:
Internet Services

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
..... .00

Date / /

Transaction ID: H4-79010-50000

Activity or Event Identifier:
[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
..... 11.95		..... 11.95		..... 23.90

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
..... 0.00		..... 0.00		..... 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
.....

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
AOL

Mailing Address

8619 Westwood Center Dr

City State Zip Code
Vienna VA 22182

Purpose of Disbursement:
Internet Services

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79013-10000

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
7.47 + 7.48 = 14.95

B. Full Name (Last, First, Middle Initial)
HMS Host

Mailing Address

Tampa International Airport

City State Zip Code
Tampa FL 33607

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79014-10000

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
14.00 + 14.00 = 28.00

C. Full Name (Last, First, Middle Initial)
HMS Host

Mailing Address

2000 Sullivan Rd

City State Zip Code
Atlanta GA 30337

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79014-20000

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
3.53 + 3.52 = 7.05

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
0.00 + 0.00 = 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Murphys

Mailing Address
997 Virginia Ave Ne

City State Zip Code
Atlanta GA 30306

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79014-30000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.14		11.14		22.28

B. Full Name (Last, First, Middle Initial)
Murphys

Mailing Address
997 Virginia Ave Ne

City State Zip Code
Atlanta GA 30306

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79014-40000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.00		19.00		38.00

C. Full Name (Last, First, Middle Initial)
McDonalds

Mailing Address
Tampa International Airport

City State Zip Code
Tampa FL 33607

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79014-50000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.71		2.71		5.42

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
[]	[]	[]

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
HMS Host

Mailing Address
Tampa International Airport

City	State	Zip Code
Tampa	FL	33607

Purpose of Disbursement:
Travel/Accommodation /Meals

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-79014-60000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="15.23"/>		<input type="text" value="15.23"/>		<input type="text" value="30.46"/>

B. Full Name (Last, First, Middle Initial)
HMS Host

Mailing Address
Charlotte Douglas Inter

City	State	Zip Code
Charlotte	NC	28208

Purpose of Disbursement:
Travel/Accommodation /Meals

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-79014-70000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="6.38"/>		<input type="text" value="6.39"/>		<input type="text" value="12.77"/>

C. Full Name (Last, First, Middle Initial)
HMS Host

Mailing Address
Charlotte Douglas Inter

City	State	Zip Code
Charlotte	NC	28208

Purpose of Disbursement:
Travel/Accommodation /Meals

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-79014-80000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="10.74"/>		<input type="text" value="10.73"/>		<input type="text" value="21.47"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
HMS Host

Mailing Address
Charlotte Douglas Inter

City State Zip Code
Charlotte NC 28208

Purpose of Disbursement:
Travel/Accommodation /Meals

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /

Transaction ID: H4-79014-90000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="2.84"/>		<input type="text" value="2.85"/>		<input type="text" value="5.69"/>

B. Full Name (Last, First, Middle Initial)
Sky Asian Bistro

Mailing Address
Phil Intern Airport

City State Zip Code
Philadelphia PA 19102

Purpose of Disbursement:
Travel/Accommodation /Meals

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /

Transaction ID: H4-79014-100000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="6.42"/>		<input type="text" value="6.42"/>		<input type="text" value="12.84"/>

C. Full Name (Last, First, Middle Initial)
Kash N Karry

Mailing Address
3801 Sugar Palm Drive

City State Zip Code
Tampa FL 33619

Purpose of Disbursement:
Travel/Accommodation /Meals

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /

Transaction ID: H4-79014-110000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="8.80"/>		<input type="text" value="8.79"/>		<input type="text" value="17.59"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Burger King

Mailing Address
Tampa International Airport

City State Zip Code
Tampa FL 33607

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79014-120000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.81		2.82		5.63

B. Full Name (Last, First, Middle Initial)
Publix

Mailing Address
6001 N Nebraska Ave

City State Zip Code
Tampa FL 33604

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79014-130000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.77		9.78		19.55

C. Full Name (Last, First, Middle Initial)
Mama Fu's

Mailing Address
3838 W. Neptune St

City State Zip Code
Tampa FL 33629

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79014-140000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.88		9.87		19.75

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Publix

Mailing Address
6001 N Nebraska Ave

City State Zip Code
Tampa FL 33604

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date / /

Transaction ID: H4-79014-150000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.40		15.40		30.80

B. Full Name (Last, First, Middle Initial)
HMS Host

Mailing Address
Tampa International Airport

City State Zip Code
Tampa FL 33607

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date / /

Transaction ID: H4-79014-160000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.80		5.81		11.61

C. Full Name (Last, First, Middle Initial)
Target Stores

Mailing Address
1245 Bald Hill Rd

City State Zip Code
Warwick RI 02886

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date / /

Transaction ID: H4-79014-170000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.35		5.34		10.69

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Bistro Sensations

Mailing Address
1625 Market St

City Philadelphia	State PA	Zip Code 19103	Category/ Type
Purpose of Disbursement: Travel/Accommodation /Meals			

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-79014-180000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="3.34"/>		<input type="text" value="3.35"/>		<input type="text" value="6.69"/>

B. Full Name (Last, First, Middle Initial)
Radio Shack

Mailing Address
1345 Plainfield Street

City Johnston	State RI	Zip Code 02919	Category/ Type
Purpose of Disbursement: Office Supplies Expenses			

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-79015-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="16.04"/>		<input type="text" value="16.05"/>		<input type="text" value="32.09"/>

C. Full Name (Last, First, Middle Initial)
Staples

Mailing Address
500 Staples Drive

City Framingham	State MA	Zip Code 01702	Category/ Type
Purpose of Disbursement: Office Supplies Expenses			

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-79015-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="81.67"/>		<input type="text" value="81.67"/>		<input type="text" value="163.34"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Hotels.com

Mailing Address
8140 Walnut Hill Lane

City	State	Zip Code
Dallas	TX	75231

Purpose of Disbursement:
Travel/ Accommodations

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /

Transaction ID: H4-79016-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="39.50"/>		<input type="text" value="39.50"/>		<input type="text" value="79.00"/>

B. Full Name (Last, First, Middle Initial)
Texaco

Mailing Address
816 S Central Ave

City	State	Zip Code
Hapeville	GA	30354

Purpose of Disbursement:
Travel/ Accommodations

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /

Transaction ID: H4-79016-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="6.05"/>		<input type="text" value="6.06"/>		<input type="text" value="12.11"/>

C. Full Name (Last, First, Middle Initial)
Avis Rent A Car

Mailing Address
4225 Car Rental Row

City	State	Zip Code
Atlanta	GA	30320

Purpose of Disbursement:
Travel/ Accommodations

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /

Transaction ID: H4-79016-30000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="35.84"/>		<input type="text" value="35.83"/>		<input type="text" value="71.67"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Avis Rent A Car

Mailing Address
2266 E Fowler Ave

City State Zip Code
Tampa FL 33612

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79016-40000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
45.30		45.30		90.60

B. Full Name (Last, First, Middle Initial)
RI Airport

Mailing Address
2000 Post Road

City State Zip Code
Warwick RI 02886

Purpose of Disbursement:
Parking Fees

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79016-50000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.50		22.50		45.00

C. Full Name (Last, First, Middle Initial)
US Airways

Mailing Address
2345 Crystal Drive

City State Zip Code
Arlington VA 22227

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79016-60000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
181.50		181.50		363.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
US Airways

Mailing Address
2345 Crystal Drive

City State Zip Code
Arlington VA 22227

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

- Administrative Fundraising Exempt
- Voter Drive Direct Candidate Support
- Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 10 / 13 / 2005

Transaction ID: H4-79016-70000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
47.60		47.60		95.20

B. Full Name (Last, First, Middle Initial)
RI Airport

Mailing Address
2000 Post Road

City State Zip Code
Warwick RI 02886

Purpose of Disbursement:
Parking Fees

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

- Administrative Fundraising Exempt
- Voter Drive Direct Candidate Support
- Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 10 / 13 / 2005

Transaction ID: H4-79016-80000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.50		22.50		45.00

C. Full Name (Last, First, Middle Initial)
US Airways

Mailing Address
2345 Crystal Drive

City State Zip Code
Arlington VA 22227

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

- Administrative Fundraising Exempt
- Voter Drive Direct Candidate Support
- Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 10 / 13 / 2005

Transaction ID: H4-79016-90000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
156.60		156.60		313.20

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Expedia

Mailing Address
13810 SE Eastgate Way

City State Zip Code
Bellevue WA 98005

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79016-100000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
60.80		60.79		121.59

B. Full Name (Last, First, Middle Initial)
Avis Rent A Car

Mailing Address
2266 E Fowler Ave

City State Zip Code
Tampa FL 33612

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79016-110000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.83		35.83		71.66

C. Full Name (Last, First, Middle Initial)
Circle K

Mailing Address
210 E 7th Ave

City State Zip Code
Tallahassee FL 32303

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79016-120000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.52		2.52		5.04

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Circle K

Mailing Address
210 E 7th Ave

City State Zip Code
Tallahassee FL 32303

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
- Voter Drive Direct Candidate Support
- Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79016-130000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.20		15.20		30.40

B. Full Name (Last, First, Middle Initial)
BP

Mailing Address
848 McClosky Blvd

City State Zip Code
Tampa FL 33605

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
- Voter Drive Direct Candidate Support
- Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79016-140000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.17		17.17		34.34

C. Full Name (Last, First, Middle Initial)
Avis Rent A Car

Mailing Address
2266 E Fowler Ave

City State Zip Code
Tampa FL 33612

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
- Voter Drive Direct Candidate Support
- Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79016-150000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
81.07		81.08		162.15

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
RI Airport

Mailing Address
2000 Post Road

City State Zip Code
Warwick RI 02886

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79016-160000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.00		30.00		60.00

B. Full Name (Last, First, Middle Initial)
US Airways

Mailing Address
2345 Crystal Drive

City State Zip Code
Arlington VA 22227

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79016-170000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
126.45		126.45		252.90

C. Full Name (Last, First, Middle Initial)
Matador Restaurant

Mailing Address
125 E Adams St

City State Zip Code
Phoenix AZ 85004

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79017-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.93		32.93		65.86

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
US Airways

Mailing Address
2345 Crystal Drive

City State Zip Code
Arlington VA 22227

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79018-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
168.65		168.65		337.30

B. Full Name (Last, First, Middle Initial)
Avis Rent A Car

Mailing Address
3801 International Gtwy

City State Zip Code
Columbus OH 43219

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79024-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.50		27.50		55.00

C. Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address
1744 L St NW

City State Zip Code
Washington DC 20036

Purpose of Disbursement:
Telephone

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79026-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
40.02		40.02		80.04

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address
1744 L St NW

City State Zip Code
Washington DC 20036

Purpose of Disbursement:
Telephone

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
- Voter Drive Direct Candidate Support
- Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79026-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
74.00		73.99		147.99

B. Full Name (Last, First, Middle Initial)
Cingular Wireless

Mailing Address
1050 Connecticut Ave NW

City State Zip Code
Washington DC 20036

Purpose of Disbursement:
Telephone

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
- Voter Drive Direct Candidate Support
- Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79026-30000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.60		23.61		47.21

C. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
PO Box 360001

City State Zip Code
Ft Lauderdale FL 33336

Purpose of Disbursement:
Publication & Dues

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
- Voter Drive Direct Candidate Support
- Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79028-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.50		37.50		75.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Silver Legacy

Mailing Address
407 N Virginia St

City State Zip Code
Reno NV 89501

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79033-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.99		5.00		9.99

B. Full Name (Last, First, Middle Initial)
Main & Mission

Mailing Address
123 Mission

City State Zip Code
San Francisco CA 94102

Purpose of Disbursement:
Parking Fees

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79034-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.00		8.00		16.00

C. Full Name (Last, First, Middle Initial)
Main & Mission

Mailing Address
123 Mission

City State Zip Code
San Francisco CA 94102

Purpose of Disbursement:
Parking Fees

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79034-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.50		12.50		25.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Main & Mission

Mailing Address
123 Mission

City State Zip Code
San Francisco CA 94102

Purpose of Disbursement:
Parking Fees

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79034-30000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.50		12.50		25.00

B. Full Name (Last, First, Middle Initial)
Ampco Parking

Mailing Address
600 Harrison St

City State Zip Code
San Francisco CA 94107

Purpose of Disbursement:
Parking Fees

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79034-40000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.50		24.50		49.00

C. Full Name (Last, First, Middle Initial)
Main & Mission

Mailing Address
123 Mission

City State Zip Code
San Francisco CA 94102

Purpose of Disbursement:
Parking Fees

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79034-50000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.50		12.50		25.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Rincon Center

Mailing Address
121 Spear St

City State Zip Code
San Francisco CA 94105

Purpose of Disbursement:
Parking Fees

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79034-60000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.75		14.75		29.50

B. Full Name (Last, First, Middle Initial)
Cingular Wireless

Mailing Address
5565 Glenridge Connector

City State Zip Code
Atlanta GA 30342

Purpose of Disbursement:
Telephone

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79035-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
99.02		99.03		198.05

C. Full Name (Last, First, Middle Initial)
Cheese Board

Mailing Address
247 California Ave

City State Zip Code
Reno NV 89509

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79036-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.84		12.85		25.69

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Budget Rent A Car

Mailing Address
1595 Marietta Way

City State Zip Code
Sparks NV 89431

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79036-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
54.98		54.97		109.95

B. Full Name (Last, First, Middle Initial)
Silver Legacy

Mailing Address
407 N Virginia St

City State Zip Code
Reno NV 89501

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79036-30000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.48		14.49		28.97

C. Full Name (Last, First, Middle Initial)
Five Star Parking

Mailing Address
Airport

City State Zip Code
Oakland CA 94621

Purpose of Disbursement:
Parking Fees

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79036-40000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.00		22.00		44.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Reno Airport

Mailing Address
2001 E Plumb Ln

City State Zip Code
Reno NV 89502

Purpose of Disbursement:
Parking Fees

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 10 / 13 / 2005

Transaction ID: H4-79036-50000

Activity or Event Identifier:

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.99		4.99		9.98

B. Full Name (Last, First, Middle Initial)
Silver Legacy

Mailing Address
407 N Virginia St

City State Zip Code
Reno NV 89501

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 10 / 13 / 2005

Transaction ID: H4-79036-60000

Activity or Event Identifier:

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.50		5.50		11.00

C. Full Name (Last, First, Middle Initial)
Alamo Rent A Car

Mailing Address
2627 N Hollywood Way

City State Zip Code
Burbank CA 91505

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 10 / 13 / 2005

Transaction ID: H4-79036-70000

Activity or Event Identifier:

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
36.80		36.79		73.59

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Starbucks

Mailing Address
1135 Truman St

City	State	Zip Code
San Fernando	CA	91340

Purpose of Disbursement:
Travel/Accommodation /Meals

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-79036-80000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="2.62"/>		<input type="text" value="2.63"/>		<input type="text" value="5.25"/>

B. Full Name (Last, First, Middle Initial)
Five Star Parking

Mailing Address
Airport

City	State	Zip Code
Oakland	CA	94621

Purpose of Disbursement:
Parking Fees

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-79036-90000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="16.00"/>		<input type="text" value="16.00"/>		<input type="text" value="32.00"/>

C. Full Name (Last, First, Middle Initial)
Union 76

Mailing Address
1998 Market St

City	State	Zip Code
San Francisco	CA	94102

Purpose of Disbursement:
Travel/ Accommodations

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-79036-100000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="10.04"/>		<input type="text" value="10.04"/>		<input type="text" value="20.08"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Joes Stone Cab

Mailing Address
3500 Las Vegas Blvd South

City State Zip Code
Las Vegas NV 89109

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79036-110000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
29.43		29.42		58.85

B. Full Name (Last, First, Middle Initial)
Starbucks

Mailing Address
300 S 4th St

City State Zip Code
Las Vegas NV 89101

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79036-120000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.98		2.99		5.97

C. Full Name (Last, First, Middle Initial)
Accessories 4 Wire

Mailing Address
3226 N Rancho Dr

City State Zip Code
Las Vegas NV 89130

Purpose of Disbursement:
Office Supplies Expenses

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79036-130000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.43		13.43		26.86

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Five Star Parking

Mailing Address
Airport

City State Zip Code
Oakland CA 94621

Purpose of Disbursement:
Parking Fees

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 10 / 13 / 2005

Transaction ID: H4-79036-140000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.00		16.00		32.00

B. Full Name (Last, First, Middle Initial)
United Airlines

Mailing Address
PO Box 66100

City State Zip Code
Chicago IL 60666

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 10 / 13 / 2005

Transaction ID: H4-79036-150000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.50		27.50		55.00

C. Full Name (Last, First, Middle Initial)
Union 76

Mailing Address
1998 Market St

City State Zip Code
San Francisco CA 94102

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 10 / 13 / 2005

Transaction ID: H4-79036-160000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.02		10.02		20.04

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Tugals Bistro

Mailing Address
776 N Terminal Dr

City State Zip Code
Salt Lake City UT 84122

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79037-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.34		8.33		16.67

B. Full Name (Last, First, Middle Initial)
Perry's

Mailing Address
1944 Union St

City State Zip Code
San Francisco CA 94123

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79037-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.17		18.17		36.34

C. Full Name (Last, First, Middle Initial)
Pearl Cafe

Mailing Address
231 E Front St

City State Zip Code
Missoula MT 59802

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79037-30000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.50		23.50		47.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Budget Rent A Car

Mailing Address
5225 W Broadway St

City State Zip Code
Missoula MT 59808

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79037-40000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
84.54		84.54		169.08

B. Full Name (Last, First, Middle Initial)
The Bridge

Mailing Address
515 S Higgins Ave

City State Zip Code
Missoula MT 59801

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79037-50000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
51.97		51.98		103.95

C. Full Name (Last, First, Middle Initial)
Microsoft Support

Mailing Address
1 Microsoft Way

City State Zip Code
Redmond WA 98052

Purpose of Disbursement:
Computer Supplies/Hardware

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79042-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.16		12.16		24.32

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Moftware

Mailing Address
4564 Eisenhower Avenue

City State Zip Code
Arlington VA 22304

Purpose of Disbursement:
Office Supplies Expenses

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
- Voter Drive Direct Candidate Support
- Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79043-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.44		26.45		52.89

B. Full Name (Last, First, Middle Initial)
Kinkos

Mailing Address
9602 N Metro Pkwy W

City State Zip Code
Phoenix AZ 85051

Purpose of Disbursement:
Printing

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
- Voter Drive Direct Candidate Support
- Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79044-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.68		10.68		21.36

C. Full Name (Last, First, Middle Initial)
Kinkos

Mailing Address
9602 N Metro Pkwy W

City State Zip Code
Phoenix AZ 85051

Purpose of Disbursement:
Printing

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
- Voter Drive Direct Candidate Support
- Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79044-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
71.34		71.35		142.69

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Travelocity.com

Mailing Address
15100 Trinity Blvd

City State Zip Code
Fort Worth TX 76155

Purpose of Disbursement:
Travel/ Accommodations

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-79045-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="2.50"/>		<input type="text" value="2.50"/>		<input type="text" value="5.00"/>

B. Full Name (Last, First, Middle Initial)
United Airlines

Mailing Address
PO Box 66100

City State Zip Code
Chicago IL 60666

Purpose of Disbursement:
Travel/ Accommodations

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-79046-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="134.90"/>		<input type="text" value="134.90"/>		<input type="text" value="269.80"/>

C. Full Name (Last, First, Middle Initial)
HMS Host

Mailing Address
PO Box 66048

City State Zip Code
Chicago IL 60666

Purpose of Disbursement:
Travel/Accommodation /Meals

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-79046-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="3.73"/>		<input type="text" value="3.73"/>		<input type="text" value="7.46"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
HMS Host

Mailing Address
3400 Sky Harbor Blvd

City State Zip Code
Phoenix AZ 85034

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79046-30000

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
3.74 + 3.73 = 7.47

B. Full Name (Last, First, Middle Initial)
Burger King

Mailing Address
1 N 1st St

City State Zip Code
Phoenix AZ 85004

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79046-40000

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
2.25 + 2.26 = 4.51

C. Full Name (Last, First, Middle Initial)
Phoenix Airport

Mailing Address
3400 E Sky Harbor Blvd

City State Zip Code
Phoenix AZ 85034

Purpose of Disbursement:
Parking Fees

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79046-50000

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
3.39 + 3.39 = 6.78

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
0.00 + 0.00 = 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Cosmopolitan Cafe

Mailing Address
121 Spear St # B8

City	State	Zip Code	Category/ Type
San Francisco	CA	94105	

Purpose of Disbursement:
Travel/Accommodation /Meals

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /

Transaction ID: H4-79047-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="32.67"/>		<input type="text" value="32.67"/>		<input type="text" value="65.34"/>

B. Full Name (Last, First, Middle Initial)
1 800 Flowers

Mailing Address
1600 Stewart Ave

City	State	Zip Code	Category/ Type
Westbury	NY	11590	

Purpose of Disbursement:
Office Supplies Expenses

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /

Transaction ID: H4-79049-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="38.42"/>		<input type="text" value="38.42"/>		<input type="text" value="76.84"/>

C. Full Name (Last, First, Middle Initial)
Pronto Press

Mailing Address
1353 Connecticut Ave NW

City	State	Zip Code	Category/ Type
Washington	DC	20036	

Purpose of Disbursement:
Printing

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /

Transaction ID: H4-79050-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="23.85"/>		<input type="text" value="23.85"/>		<input type="text" value="47.70"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Bell South

Mailing Address
PO Box 1262

City	State	Zip Code
Charlotte	NC	28201

Purpose of Disbursement:
Telephone

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-79069-10000

Activity or Event Identifier:
[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="56.57"/>		<input type="text" value="56.57"/>		<input type="text" value="113.14"/>

B. Full Name (Last, First, Middle Initial)
Bell South

Mailing Address
PO Box 1262

City	State	Zip Code
Charlotte	NC	28201

Purpose of Disbursement:
Telephone

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-79069-20000

Activity or Event Identifier:
[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="119.52"/>		<input type="text" value="119.53"/>		<input type="text" value="239.05"/>

C. Full Name (Last, First, Middle Initial)
US Post Office

Mailing Address
2802 Timmons LN

City	State	Zip Code
Houston	TX	77027

Purpose of Disbursement:
Postage

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-79073-10000

Activity or Event Identifier:
[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="21.02"/>		<input type="text" value="21.03"/>		<input type="text" value="42.05"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Time Warner

Mailing Address
PO Box 172567

City	State	Zip Code
Denver	CO	80217

Purpose of Disbursement:
Telephone

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-79074-10000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="27.17"/>		<input type="text" value="27.17"/>		<input type="text" value="54.34"/>

B. Full Name (Last, First, Middle Initial)
AOL

Mailing Address
8619 Westwood Center

City	State	Zip Code
Vienna	VA	22182

Purpose of Disbursement:
Telephone

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-79074-20000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="7.48"/>		<input type="text" value="7.47"/>		<input type="text" value="14.95"/>

C. Full Name (Last, First, Middle Initial)
MCI

Mailing Address
PO Box 17890

City	State	Zip Code
Denver	CO	80217

Purpose of Disbursement:
Telephone

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-79074-30000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="15.93"/>		<input type="text" value="15.94"/>		<input type="text" value="31.87"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
SBC

Mailing Address
175 E Houston

City	State	Zip Code
San Antonio	TX	78258

Purpose of Disbursement:
Telephone

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-79074-40000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="32.36"/>		<input type="text" value="32.36"/>		<input type="text" value="64.72"/>

B. Full Name (Last, First, Middle Initial)
Staples

Mailing Address
3711 Briarpark Drive

City	State	Zip Code
Houston	TX	77042

Purpose of Disbursement:
Office Supplies Reimbursement

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-79077-10000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="51.06"/>		<input type="text" value="51.06"/>		<input type="text" value="102.12"/>

C. Full Name (Last, First, Middle Initial)
SBC

Mailing Address
175 E Houston

City	State	Zip Code
San Antonio	TX	78258

Purpose of Disbursement:
Telephone

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-79078-10000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="36.67"/>		<input type="text" value="36.68"/>		<input type="text" value="73.35"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
AOL

Mailing Address
8619 Westwood Center

City State Zip Code
Vienna VA 22182

Purpose of Disbursement:
Telephone

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79078-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.47		7.48		14.95

B. Full Name (Last, First, Middle Initial)
Time Warner

Mailing Address
PO Box 172567

City State Zip Code
Denver CO 80217

Purpose of Disbursement:
Telephone

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79078-30000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.17		27.17		54.34

C. Full Name (Last, First, Middle Initial)
MCI

Mailing Address
PO Box 17890

City State Zip Code
Denver CO 80217

Purpose of Disbursement:
Telephone

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79078-40000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.45		26.44		52.89

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Continental Airlines

Mailing Address
1600 Smith Street

City State Zip Code
Houston TX 77002

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79079-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
146.95		146.95		293.90

B. Full Name (Last, First, Middle Initial)
Fuzzy's Pizza

Mailing Address
5925 Kirby Drive

City State Zip Code
Houston TX 77005

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79079-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.85		7.85		15.70

C. Full Name (Last, First, Middle Initial)
Continental Airlines

Mailing Address
1600 Smith Street

City State Zip Code
Houston TX 77002

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79079-30000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
172.05		172.05		344.10

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Hilton Hotels

Mailing Address
28100 Franklin Rd

City State Zip Code
Southfield MI 48034

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79079-40000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
324.59		324.59		649.18

B. Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address
PO Box 96082

City State Zip Code
Bellevue WA 98009

Purpose of Disbursement:
Telephone Reimbursement

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 13 / 2005

Transaction ID: H4-79080-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.78		26.79		53.57

C. Full Name (Last, First, Middle Initial)
Comcast

Mailing Address
West Leads Ave

City State Zip Code
Pleasantville NJ 08232

Purpose of Disbursement:
Internet Services

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 20 / 2005

Transaction ID: H4-79408-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.97		22.98		45.95

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Verizon DSL

Mailing Address
PO Box 12045

City State Zip Code
Trenton NJ 08650

Purpose of Disbursement:
Internet Services

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 20 / 2005

Transaction ID: H4-79420-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.91		18.92		37.83

B. Full Name (Last, First, Middle Initial)
Judy Loeb Goldfein

Mailing Address
50 East 89th Street 6E

City State Zip Code
New York NY 10128

Purpose of Disbursement:
Rent

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 27 / 2005

Transaction ID: H4-79545-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
300.00		300.00		600.00

C. Full Name (Last, First, Middle Initial)
US Post Office

Mailing Address
2802 Timmons LN

City State Zip Code
Houston TX 77027

Purpose of Disbursement:
Postage

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 27 / 2005

Transaction ID: H4-79561-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
55.50		55.50		111.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
[]	[]	[]

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Staples

Mailing Address

315 N Sam Houston Pkwy E

City State Zip Code
Houston TX 77060

Purpose of Disbursement:
Printing

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 27 / 2005

Transaction ID: H4-79562-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.40		4.40		8.80

B. Full Name (Last, First, Middle Initial)
Continental

Mailing Address

1600 Smith Street

City State Zip Code
Houston TX 77002

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 27 / 2005

Transaction ID: H4-79563-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
116.95		116.95		233.90

C. Full Name (Last, First, Middle Initial)
Continental

Mailing Address

1600 Smith Street

City State Zip Code
Houston TX 77002

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 27 / 2005

Transaction ID: H4-79563-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
109.70		109.70		219.40

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Hilton

Mailing Address
1919 Connecticut Ave NW

City State Zip Code
Washington DC 20009

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 27 / 2005

Transaction ID: H4-79563-30000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
124.19		124.20		248.39

B. Full Name (Last, First, Middle Initial)
Cruz Service

Mailing Address
16703 Silver Sky

City State Zip Code
Houston TX 77095

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 27 / 2005

Transaction ID: H4-79563-40000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.50		37.50		75.00

C. Full Name (Last, First, Middle Initial)
Red Top Cab

Mailing Address
3251 Washington Blvd

City State Zip Code
Arlington VA 22201

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 27 / 2005

Transaction ID: H4-79563-50000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.00		12.00		24.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Yellow Cab

Mailing Address
1636 Bladensburg Rd NE

City State Zip Code
Washington DC 20002

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 27 / 2005

Transaction ID: H4-79563-60000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.50		12.50		25.00

B. Full Name (Last, First, Middle Initial)
Yellow Cab

Mailing Address
1636 Bladensburg Rd NE

City State Zip Code
Washington DC 20002

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 27 / 2005

Transaction ID: H4-79563-70000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.00		14.00		28.00

C. Full Name (Last, First, Middle Initial)
Cruz Service

Mailing Address
16703 Silver Sky

City State Zip Code
Houston TX 77095

Purpose of Disbursement:
Travel/ Accommodations

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 10 / 27 / 2005

Transaction ID: H4-79563-80000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.50		37.50		75.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Gerald Merfish

Mailing Address
PO Box 15879

City State Zip Code
Houston TX 77220

Purpose of Disbursement:
Rent

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date / /

Transaction ID: H4-79564-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
300.00		300.00		600.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
353945.08	353946.53	707891.61

**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)
EMILY's List

A. Kathleen Villacorta Full Name (Last, First, Middle Initial) Mailing Address 2057 Florida Ave City Tallahassee State FL Zip Code 32303 Purpose of Disbursement In-Kind Catering/ Facilities Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-80218 Date of Disbursement 10 / 01 / 2005 Amount of Each Disbursement this Period 756.14 Category/ Type
--	--	---

B. Bank of America Full Name (Last, First, Middle Initial) Mailing Address 1501 Pennsylvania Ave. NW City Washington State DC Zip Code 20005 Purpose of Disbursement Credit Card Service Charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79718 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 45.83 Category/ Type
---	--	--

C. American Express Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 0001 City Chicago State IL Zip Code 60679 Purpose of Disbursement Credit Card Service Charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79468 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 4.50 Category/ Type
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SUBTOTAL of Disbursements This Page (optional)	806.47
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Bank of America		Transaction ID: SB21B-79467 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address 1501 Pennsylvania Ave. NW		Amount of Each Disbursement this Period 5375.79
City Washington State DC Zip Code 20005	Purpose of Disbursement Credit Card Service Charges Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. GSI - Gordon & Schwenkmeyer		Transaction ID: SB21B-80235 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 300 N Sepulveda Blvd #2050		Amount of Each Disbursement this Period 30.11
City El Segundo State CA Zip Code 90245	Purpose of Disbursement Credit Card Service Charges Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B-79469 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address P.O. Box 0001		Amount of Each Disbursement this Period 96.00
City Chicago State IL Zip Code 60679	Purpose of Disbursement Credit Card Service Charges Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	5501.90
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)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B-79470 Date of Disbursement 10 / 05 / 2005
Mailing Address P.O. Box 0001		Amount of Each Disbursement this Period 29.89
City Chicago State IL Zip Code 60679	Purpose of Disbursement Credit Card Service Charges Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B-79471 Date of Disbursement 10 / 06 / 2005
Mailing Address P.O. Box 0001		Amount of Each Disbursement this Period 30.00
City Chicago State IL Zip Code 60679	Purpose of Disbursement Credit Card Service Charges Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Alison Dowd Marketing, Inc.		Transaction ID: SB21B-78910 Date of Disbursement 10 / 06 / 2005
Mailing Address 46 Waltham St, Suite 309		Amount of Each Disbursement this Period 3403.75
City Boston State MA Zip Code 02118	Purpose of Disbursement Design/Graphics Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	3463.64
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)

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<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)
EMILY's List

A. Bulletproof Full Name (Last, First, Middle Initial) Mailing Address 1840 41st Ave, #102-333 City Capitola State CA Zip Code 95010 Purpose of Disbursement Copy Writer Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-78911 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5 Amount of Each Disbursement this Period: 180.00 Category/Type
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B. Bulletproof Full Name (Last, First, Middle Initial) Mailing Address 1840 41st Ave, #102-333 City Capitola State CA Zip Code 95010 Purpose of Disbursement Copy Writer Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-78912 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5 Amount of Each Disbursement this Period: 200.00 Category/Type
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C. Martha McKenna Full Name (Last, First, Middle Initial) Mailing Address 913 South Decker Avenue City Baltimore State MD Zip Code 21224 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-78917 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5 Amount of Each Disbursement this Period: 99.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	479.00
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 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. NCEC Services Inc.		Transaction ID: SB21B-78919 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 122 C Street, NW #650		Amount of Each Disbursement this Period 12500.00
City Washington State DC Zip Code 20001	Category/ Type	
Purpose of Disbursement Consulting Political		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Production Solutions, Inc.		Transaction ID: SB21B-78925 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 27.71
City Vienna State VA Zip Code 22182	Category/ Type	
Purpose of Disbursement Deliveries		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Production Solutions, Inc.		Transaction ID: SB21B-78926 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 450.00
City Vienna State VA Zip Code 22182	Category/ Type	
Purpose of Disbursement Direct Mail Expense		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	12977.71
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Production Solutions, Inc.		Transaction ID: SB21B-78927 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 550.00
City Vienna State VA Zip Code 22182		
Purpose of Disbursement Printing	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Quick Messenger		Transaction ID: SB21B-78928 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 4829 Fairmont Ave Suite B		Amount of Each Disbursement this Period 66.02
City Bethesda State MD Zip Code 20814		
Purpose of Disbursement Deliveries	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Erica Rachal		Transaction ID: SB21B-78929 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 149 V Street, NE		Amount of Each Disbursement this Period 64.00
City Washington State DC Zip Code 20002		
Purpose of Disbursement Consulting Fundraising	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	680.02
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Red Top Cab		Transaction ID: SB21B-78930 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address P.O. Box 100519		Amount of Each Disbursement this Period 107.12
City Arlington State VA Zip Code 22210	Purpose of Disbursement Local Transportation Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Edna Romero		Transaction ID: SB21B-78931 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 7111 Halleck Street		Amount of Each Disbursement this Period 20.10
City District Heights State MD Zip Code 20747	Purpose of Disbursement Copying/Faxing Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	See Attached Memo Entry

Full Name (Last, First, Middle Initial) C. Edna Romero		Transaction ID: SB21B-78932 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 7111 Halleck Street		Amount of Each Disbursement this Period 145.10
City District Heights State MD Zip Code 20747	Purpose of Disbursement Local Transportation Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	272.32
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)

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<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)
EMILY's List

A. Edna Romero Full Name (Last, First, Middle Initial) Mailing Address 7111 Halleck Street City District Heights State MD Zip Code 20747 Purpose of Disbursement Local Transportation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-78933 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 58.00 Category/Type
--	--	---

B. United Parcel Service Full Name (Last, First, Middle Initial) Mailing Address P. O. Box 7247-0244 City Philadelphia State PA Zip Code 19170-0001 Purpose of Disbursement Deliveries Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-78939 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 86.15 Category/Type
---	--	---

C. Triplex Direct Marketing Full Name (Last, First, Middle Initial) Mailing Address 20 Leveroni Court PO Box 1800 City Novato State CA Zip Code 94948-1800 Purpose of Disbursement List Rental Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-78944 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 151.14 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	295.29
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)
EMILY's List

A. GSI - Gordon & Schwenkmeyer Full Name (Last, First, Middle Initial) Mailing Address 300 N Sepulveda Blvd #2050 City El Segundo State CA Zip Code 90245 Purpose of Disbursement Credit Card Service Charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-80049 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 15.53 Category/Type
---	--	---

B. American Express Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 0001 City Chicago State IL Zip Code 60679 Purpose of Disbursement Credit Card Service Charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79472 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 208.80 Category/Type
--	--	--

C. Paychex Full Name (Last, First, Middle Initial) Mailing Address 3060 Williams Drive #300 City Fairfax State VA Zip Code 22031 Purpose of Disbursement Payroll Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79482 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 501.53 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	725.86
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B-79473 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address P.O. Box 0001		Amount of Each Disbursement this Period 376.40
City Chicago State IL Zip Code 60679	Purpose of Disbursement Credit Card Service Charges Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Adams Hussey & Associates Inc		Transaction ID: SB21B-78951 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 1400 I Street, NW Suite 650		Amount of Each Disbursement this Period 1.50
City Washington State DC Zip Code 20005	Purpose of Disbursement Office Supplies Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Adams Hussey & Associates Inc		Transaction ID: SB21B-78952 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 1400 I Street, NW Suite 650		Amount of Each Disbursement this Period 8.29
City Washington State DC Zip Code 20005	Purpose of Disbursement Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	386.19
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Adams Hussey & Associates Inc		Transaction ID: SB21B-78953	
Mailing Address 1400 I Street, NW Suite 650		Date of Disbursement 10 / 13 / 2005	
City Washington	State DC	Zip Code 20005	Amount of Each Disbursement this Period 12.60
Purpose of Disbursement Telephone	Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Alison Dowd Marketing, Inc.		Transaction ID: SB21B-79483	
Mailing Address 46 Waltham St, Suite 309		Date of Disbursement 10 / 13 / 2005	
City Boston	State MA	Zip Code 02118	Amount of Each Disbursement this Period 4564.45
Purpose of Disbursement Design/Graphics	Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. AliMar Partners, LLC		Transaction ID: SB21B-78954	
Mailing Address 1120 Connecticut Avenue Suite 1100		Date of Disbursement 10 / 13 / 2005	
City Washington	State DC	Zip Code 20036	Amount of Each Disbursement this Period 825.78
Purpose of Disbursement Travel/ Accommodations	Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	5402.83
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B-78959 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 56.80
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B-78960 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 22.10
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Office Supplies Expenses Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B-78970 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address Suite 0001		Amount of Each Disbursement this Period 50.00
City Chicago State IL Zip Code 60679-0001	See Attached Memo Entry	
Purpose of Disbursement Publication & Dues Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	128.90
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B-78990 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 500.96
City Ft Lauderdale State FL Zip Code 33336	See Attached Memo Entry	
Purpose of Disbursement Printing		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B-78991 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 1418.38
City Ft Lauderdale State FL Zip Code 33336	See Attached Memo Entry	
Purpose of Disbursement Travel/ Accommodations		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B-78992 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 224.69
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Travel/Accommodation /Meals		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2144.03
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)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B-78993 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 9.45
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Office Supplies Expenses Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B-78994 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 313.40
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Travel/ Accommodations Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B-78995 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 29.08
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Office Supplies Expenses Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	351.93
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B-78996 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 72.16
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Office Supplies Expenses		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B-78997 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 310.29
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Postage		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B-78998 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 148.00
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Postage		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	530.45
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B-78999 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address Suite 0001		Amount of Each Disbursement this Period 184.51
City Chicago State IL Zip Code 60679-0001	See Attached Memo Entry	
Purpose of Disbursement Office Supplies Expenses Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B-79000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address Suite 0001		Amount of Each Disbursement this Period 443.71
City Chicago State IL Zip Code 60679-0001	See Attached Memo Entry	
Purpose of Disbursement Office Supplies Expenses Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B-79002 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 367.14
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	995.36
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B-79003 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 310.80
City Ft Lauderdale State FL Zip Code 33336-0001	Purpose of Disbursement Travel/ Accommodations Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	See Attached Memo Entry

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B-79008 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address P.O. Box 1270		Amount of Each Disbursement this Period 76.90
City Newark State NJ Zip Code 07101-1270	Purpose of Disbursement Office Supplies Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	See Attached Memo Entry

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B-79009 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address P.O. Box 1270		Amount of Each Disbursement this Period 661.27
City Newark State NJ Zip Code 07101-1270	Purpose of Disbursement Travel/Accommodation /Meals Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional) ▶	1048.97
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B-79011 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address P.O. Box 1270		Amount of Each Disbursement this Period 2492.04
City Newark State NJ Zip Code 07101-1270	See Attached Memo Entry	
Purpose of Disbursement Travel/ Accommodations Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B-79012 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address Suite 0001		Amount of Each Disbursement this Period 1340.75
City Chicago State IL Zip Code 60679-0001	See Attached Memo Entry	
Purpose of Disbursement Travel/ Accommodations Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B-79019 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address Suite 0001		Amount of Each Disbursement this Period 20.00
City Chicago State IL Zip Code 60679-0001	See Attached Memo Entry	
Purpose of Disbursement Office Supplies Expenses Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	3852.79
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B-79020 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address Suite 0001		Amount of Each Disbursement this Period 191.21
City Chicago State IL Zip Code 60679-0001	See Attached Memo Entry	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B-79021 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address P.O. Box 360001		Amount of Each Disbursement this Period 1709.67
City Ft. Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Travel/Accomm/Meals /Postage Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B-79022 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 13.00
City Fort Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Travel/ Accommodations Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	1913.88
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B-79023 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 1541.23
City Ft. Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B-79025 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 1556.79
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B-79027 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 711.14
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	3809.16
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B-79029 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 44.70
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Travel/Accommodation /Meals		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B-79030 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 414.72
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Catering/Facilities		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B-79031 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 116.24
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Catering/Facilities Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	575.66
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B-79032 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 354.25
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B-79038 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 97.13
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B-79039 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 29.80
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Office Supplies Expenses Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	481.18
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B-79040 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 27.38
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Office Supplies Expenses		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B-79041 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 722.17
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Travel/Accommodation /Meals/Office		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B-79048 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 595.46
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Internet Services/ Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1345.01
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Aquent Financial Services		Transaction ID: SB21B-79051 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address PO Box 90505		Amount of Each Disbursement this Period 8690.00
City Chicago State IL Zip Code 60696-0505	Category/ Type	
Purpose of Disbursement Phone Banks		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Jack I. Bender & Sons		Transaction ID: SB21B-79052 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 1120 Connecticut Ave, NW Suite 1200		Amount of Each Disbursement this Period 1921.79
City Washington State DC Zip Code 20036	Category/ Type	
Purpose of Disbursement Repairs Maintenance		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Bulletproof		Transaction ID: SB21B-79053 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 1840 41st Ave, #102-333		Amount of Each Disbursement this Period 25.00
City Capitola State CA Zip Code 95010	Category/ Type	
Purpose of Disbursement Copy Writer		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	10636.79
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Capitol Prompting Service		Transaction ID: SB21B-79059 Date of Disbursement
Mailing Address 639 S. 20th Street		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/>
City Arlington	State VA	Zip Code 22202
Purpose of Disbursement Equipment Rental	<input type="text" value="1225.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Eureka Gilkey		Transaction ID: SB21B-79066 Date of Disbursement
Mailing Address 930 M Street, NW #804		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/>
City Washington	State DC	Zip Code 20001
Purpose of Disbursement Travel/ Accommodations	<input type="text" value="46.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Sherry Merfish		Transaction ID: SB21B-79075 Date of Disbursement
Mailing Address 2720 Pittsburg		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/>
City Houston	State TX	Zip Code 77005
Purpose of Disbursement Travel/ Accommodations	<input type="text" value="243.90"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1514.90"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Names In The News		Transaction ID: SB21B-79081 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 1300 Clay Street, 11th Floor		Amount of Each Disbursement this Period 1452.76
City Oakland State CA Zip Code 94612-1429		
Purpose of Disbursement List Rental Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Names In The News		Transaction ID: SB21B-79082 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 1300 Clay Street, 11th Floor		Amount of Each Disbursement this Period 2393.96
City Oakland State CA Zip Code 94612-1429		
Purpose of Disbursement List Rental Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Payment Solutions, Inc.		Transaction ID: SB21B-79084 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address P.O. Box 30217		Amount of Each Disbursement this Period 311.40
City Bethesda State MD Zip Code 20824		
Purpose of Disbursement Data Management Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	4158.12
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Payment Solutions, Inc.		Transaction ID: SB21B-79085 Date of Disbursement 10 / 13 / 2005
Mailing Address P.O. Box 30217		Amount of Each Disbursement this Period 1119.00
City Bethesda State MD Zip Code 20824	Purpose of Disbursement Data Management Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Barbara Perell		Transaction ID: SB21B-79086 Date of Disbursement 10 / 13 / 2005
Mailing Address 1320 N Veitch Street #1716		Amount of Each Disbursement this Period 28.75
City Arlington State VA Zip Code 22201	Purpose of Disbursement Travel/ Accommodations Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Public Interest Communications		Transaction ID: SB21B-79090 Date of Disbursement 10 / 13 / 2005
Mailing Address 7700 Leesburg Pike Suite 301 North		Amount of Each Disbursement this Period 544.50
City Falls Church State VA Zip Code 22043	Purpose of Disbursement Phone Banks Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	1692.25
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Quick Messenger		Transaction ID: SB21B-79091 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 4829 Fairmont Ave Suite B		Amount of Each Disbursement this Period 6.82
City Bethesda State MD Zip Code 20814	Purpose of Disbursement Deliveries	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Rackspace Managed Hosting		Transaction ID: SB21B-79092 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address PO Box 671337		Amount of Each Disbursement this Period 1375.00
City Dallas State TX Zip Code 75267-1337	Purpose of Disbursement Internet Services	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Starfish Design Carolyn M. Coon		Transaction ID: SB21B-79096 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 106 Kidwell Avenue		Amount of Each Disbursement this Period 160.00
City Centreville State MD Zip Code 21617	Purpose of Disbursement Design/Graphics	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1541.82
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Starfish Design Carolyn M. Coon		Transaction ID: SB21B-79097 Date of Disbursement 10 / 13 / 2005
Mailing Address 106 Kidwell Avenue		Amount of Each Disbursement this Period 155.00
City Centreville	State MD Zip Code 21617	
Purpose of Disbursement Design/Graphics Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Starfish Design Carolyn M. Coon		Transaction ID: SB21B-79098 Date of Disbursement 10 / 13 / 2005
Mailing Address 106 Kidwell Avenue		Amount of Each Disbursement this Period 1012.50
City Centreville	State MD Zip Code 21617	
Purpose of Disbursement Design/Graphics Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. WebSideStory		Transaction ID: SB21B-79100 Date of Disbursement 10 / 13 / 2005
Mailing Address Dept. 33793 P.O. Box 39000		Amount of Each Disbursement this Period 4961.50
City San Francisco	State CA Zip Code 94139	
Purpose of Disbursement Internet Services Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	6129.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Joanne Wilson		Transaction ID: SB21B-79101 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 3806 Viser Court		Amount of Each Disbursement this Period 67.62
City Bowie State MD Zip Code 20715	Purpose of Disbursement Travel/ Accommodations Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

B. Full Name (Last, First, Middle Initial) Triplex Direct Marketing		Transaction ID: SB21B-79104 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 20 Leveroni Court PO Box 1800		Amount of Each Disbursement this Period 5860.33
City Novato State CA Zip Code 94948-1800	Purpose of Disbursement List Rental Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

C. Full Name (Last, First, Middle Initial) Paychex		Transaction ID: SB21B-79465 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 3060 Williams Drive #300		Amount of Each Disbursement this Period 66.00
City Fairfax State VA Zip Code 22031	Purpose of Disbursement Payroll Service Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	5993.95
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)

PAGE 238 / 1975

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B-79474 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address P.O. Box 0001		Amount of Each Disbursement this Period 6.00
City Chicago State IL Zip Code 60679	Purpose of Disbursement Credit Card Service Charges Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Bank of America		Transaction ID: SB21B-79464 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 1501 Pennsylvania Ave. NW		Amount of Each Disbursement this Period 1437.54
City Washington State DC Zip Code 20005	Purpose of Disbursement Bank Charges Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B-79475 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address P.O. Box 0001		Amount of Each Disbursement this Period 6.10
City Chicago State IL Zip Code 60679	Purpose of Disbursement Credit Card Service Charges Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1449.64
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)
EMILY's List

Full Name (Last, First, Middle Initial) A. GSI - Gordon & Schwenkmeyer		Transaction ID: SB21B-80050 Date of Disbursement 10 / 18 / 2005
Mailing Address 300 N Sepulveda Blvd #2050		Amount of Each Disbursement this Period 9.26
City El Segundo State CA Zip Code 90245	Purpose of Disbursement Credit Card Service Charges Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B-79476 Date of Disbursement 10 / 18 / 2005
Mailing Address P.O. Box 0001		Amount of Each Disbursement this Period 710.76
City Chicago State IL Zip Code 60679	Purpose of Disbursement Credit Card Service Charges Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B-79477 Date of Disbursement 10 / 19 / 2005
Mailing Address P.O. Box 0001		Amount of Each Disbursement this Period 245.75
City Chicago State IL Zip Code 60679	Purpose of Disbursement Credit Card Service Charges Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	965.77
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B-79478 Date of Disbursement 10 / 20 / 2005
Mailing Address P.O. Box 0001		Amount of Each Disbursement this Period 241.33
City Chicago	State IL Zip Code 60679	
Purpose of Disbursement Credit Card Service Charges		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Mary Beth Cahill		Transaction ID: SB21B-79409 Date of Disbursement 10 / 20 / 2005
Mailing Address 4800 Dexter Street, NW		Amount of Each Disbursement this Period 181.90
City Washington	State DC Zip Code 20007	
Purpose of Disbursement Travel/ Accommodations		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. CustomScoop		Transaction ID: SB21B-79413 Date of Disbursement 10 / 20 / 2005
Mailing Address PO Box 609		Amount of Each Disbursement this Period 750.00
City Concord	State NH Zip Code 03302	
Purpose of Disbursement Publication & Dues		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	1173.23
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)

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<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)
EMILY's List

A. Emily Elbert Full Name (Last, First, Middle Initial) Mailing Address 21811 Oceanview Lane City Huntington Beach State CA Zip Code 92646 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79414 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 118.22 Category/ Type
--	--	---

B. Getactive Software, Inc. Attn: Billing Dept Full Name (Last, First, Middle Initial) Mailing Address 2855 Telegraph Ave, Ste 600 City Berkeley State CA Zip Code 94705 Purpose of Disbursement Internet Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79416 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 3000.00 Category/ Type
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C. Faith B. Kerr Full Name (Last, First, Middle Initial) Mailing Address 44 Summit Street City Ivoryton State CT Zip Code 06442 Purpose of Disbursement Copy Writer Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79421 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 28.00 Category/ Type
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SUBTOTAL of Disbursements This Page (optional) ▶	3146.22
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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)
EMILY's List

A. Faith B. Kerr Full Name (Last, First, Middle Initial) Mailing Address 44 Summit Street City Ivoryton State CT Zip Code 06442 Purpose of Disbursement Copy Writer Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79422 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 7.00 Category/Type
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B. Faith B. Kerr Full Name (Last, First, Middle Initial) Mailing Address 44 Summit Street City Ivoryton State CT Zip Code 06442 Purpose of Disbursement Copy Writer Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79423 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 21.00 Category/Type
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C. Alyssa Krop Full Name (Last, First, Middle Initial) Mailing Address 4525 N 20th Place City Arlington State VA Zip Code 22207 Purpose of Disbursement Local Transportation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79424 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 79.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	107.00
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 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lexis Nexis		Transaction ID: SB21B-79425 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address P. O. Box 7247-7090		Amount of Each Disbursement this Period 3632.56
City Philadelphia State PA Zip Code 19170	Purpose of Disbursement Computer Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Hal Malchow		Transaction ID: SB21B-79427 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 1101 14th Street, NW Suite 300		Amount of Each Disbursement this Period 3000.00
City Washington State DC Zip Code 20005	Purpose of Disbursement Copy Writer Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Hal Malchow		Transaction ID: SB21B-79428 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 1101 14th Street, NW Suite 300		Amount of Each Disbursement this Period 3000.00
City Washington State DC Zip Code 20005	Purpose of Disbursement Copy Writer Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	9632.56
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)

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<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)
EMILY's List

A. Names In The News Full Name (Last, First, Middle Initial) Mailing Address 1300 Clay Street, 11th Floor City Oakland State CA Zip Code 94612-1429 Purpose of Disbursement List Rental Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79429 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5 Amount of Each Disbursement this Period: 1035.06 Category/Type
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B. Names In The News Full Name (Last, First, Middle Initial) Mailing Address 1300 Clay Street, 11th Floor City Oakland State CA Zip Code 94612-1429 Purpose of Disbursement List Rental Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79430 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5 Amount of Each Disbursement this Period: 901.71 Category/Type
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C. Pacific East Full Name (Last, First, Middle Initial) Mailing Address PO Box 439 City Sumas State WA Zip Code 98295-0439 Purpose of Disbursement Data Management Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79435 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5 Amount of Each Disbursement this Period: 320.63 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	2257.40
TOTAL This Period (last page this line number only) ▶	(Empty field)

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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Production Solutions, Inc.		Transaction ID: SB21B-79438 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 9674.95
City Vienna State VA Zip Code 22182		
Purpose of Disbursement Printing	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Erica Rachal		Transaction ID: SB21B-79440 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 149 V Street, NE		Amount of Each Disbursement this Period 232.00
City Washington State DC Zip Code 20002		
Purpose of Disbursement Consulting Fundraising	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Lisa Robillard		Transaction ID: SB21B-79441 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 4326 South 36th Street		Amount of Each Disbursement this Period 21.00
City Arlington State VA Zip Code 22206		
Purpose of Disbursement Local Transportation	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	9927.95
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Rebecka Rosenquist		Transaction ID: SB21B-79442 Date of Disbursement 10 / 20 / 2005
Mailing Address 4071A 24th Street		Amount of Each Disbursement this Period 32.00
City San Francisco	State CA Zip Code 94114	
Purpose of Disbursement Local Transportation		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Rebecka Rosenquist		Transaction ID: SB21B-79443 Date of Disbursement 10 / 20 / 2005
Mailing Address 4071A 24th Street		Amount of Each Disbursement this Period 27.37
City San Francisco	State CA Zip Code 94114	
Purpose of Disbursement Office Supplies Reimbursement		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	See Attached Memo Entry
State: District:		

Full Name (Last, First, Middle Initial) C. Rebecka Rosenquist		Transaction ID: SB21B-79444 Date of Disbursement 10 / 20 / 2005
Mailing Address 4071A 24th Street		Amount of Each Disbursement this Period 48.82
City San Francisco	State CA Zip Code 94114	
Purpose of Disbursement Postage		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	See Attached Memo Entry
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	108.19
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Sheads & Associates, Ltd.		Transaction ID: SB21B-79447 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address Prince William Square 303 Post Office Rd. Bldg A		Amount of Each Disbursement this Period 4374.65
City Waldorf State MD Zip Code 20602		
Purpose of Disbursement Contribution Processing Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Sheads & Associates, Ltd.		Transaction ID: SB21B-79448 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address Prince William Square 303 Post Office Rd. Bldg A		Amount of Each Disbursement this Period 112.42
City Waldorf State MD Zip Code 20602		
Purpose of Disbursement Contribution Processing Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Starfish Design Carolyn M. Coon		Transaction ID: SB21B-79449 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 106 Kidwell Avenue		Amount of Each Disbursement this Period 90.00
City Centreville State MD Zip Code 21617		
Purpose of Disbursement Design/Graphics Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	4577.07
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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Starfish Design Carolyn M. Coon		Transaction ID: SB21B-79450 Date of Disbursement 10 / 20 / 2005
Mailing Address 106 Kidwell Avenue		Amount of Each Disbursement this Period 135.00
City Centreville State MD Zip Code 21617	Purpose of Disbursement Design/Graphics Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Starfish Design Carolyn M. Coon		Transaction ID: SB21B-79451 Date of Disbursement 10 / 20 / 2005
Mailing Address 106 Kidwell Avenue		Amount of Each Disbursement this Period 135.00
City Centreville State MD Zip Code 21617	Purpose of Disbursement Design/Graphics Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. United Parcel Service		Transaction ID: SB21B-79453 Date of Disbursement 10 / 20 / 2005
Mailing Address P. O. Box 7247-0244		Amount of Each Disbursement this Period 290.87
City Philadelphia State PA Zip Code 19170-0001	Purpose of Disbursement Deliveries Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	560.87
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. United Parcel Service		Transaction ID: SB21B-79454 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address P. O. Box 7247-0244		Amount of Each Disbursement this Period 51.07
City Philadelphia State PA Zip Code 19170-0001		
Purpose of Disbursement Deliveries Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. United Parcel Service		Transaction ID: SB21B-79455 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address P. O. Box 7247-0244		Amount of Each Disbursement this Period 11.32	
City Philadelphia State PA Zip Code 19170-0001			
Purpose of Disbursement Deliveries Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Working Assets		Transaction ID: SB21B-79460 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address P.O. Box 2041		Amount of Each Disbursement this Period 63.22	
City Mechanicsburg State PA Zip Code 17055			
Purpose of Disbursement Telephone Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	125.61
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lexis Nexis		Transaction ID: SB21B-79462 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address P. O. Box 7247-7090		Amount of Each Disbursement this Period 317.25
City Philadelphia State PA Zip Code 19170	Purpose of Disbursement Computer Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Production Solutions, Inc.		Transaction ID: SB21B-79463 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 6807.71
City Vienna State VA Zip Code 22182	Purpose of Disbursement Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B-79479 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 5
Mailing Address P.O. Box 0001		Amount of Each Disbursement this Period 52.00
City Chicago State IL Zip Code 60679	Purpose of Disbursement Credit Card Service Charges Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	7176.96
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. GSI - Gordon & Schwenkmeyer		Transaction ID: SB21B-80051 Date of Disbursement 10 / 25 / 2005
Mailing Address 300 N Sepulveda Blvd #2050		Amount of Each Disbursement this Period 1.43
City El Segundo State CA Zip Code 90245	Purpose of Disbursement Credit Card Service Charges Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B-79737 Date of Disbursement 10 / 25 / 2005
Mailing Address P.O. Box 0001		Amount of Each Disbursement this Period 78.03
City Chicago State IL Zip Code 60679	Purpose of Disbursement Credit Card Service Charges Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Production Solutions, Inc.		Transaction ID: SB21B-79481 Date of Disbursement 10 / 25 / 2005
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 27620.69
City Vienna State VA Zip Code 22182	Purpose of Disbursement Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	27700.15
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B-79738 Date of Disbursement 10 / 26 / 2005
Mailing Address P.O. Box 0001		Amount of Each Disbursement this Period 310.60
City Chicago State IL Zip Code 60679	Purpose of Disbursement Credit Card Service Charges Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Adelstein Liston		Transaction ID: SB21B-79521 Date of Disbursement 10 / 27 / 2005
Mailing Address 222 West Ontario Street Suite 503		Amount of Each Disbursement this Period 2000.00
City Chicago State IL Zip Code 60610	Purpose of Disbursement Consulting Political Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. AliMar Partners, LLC		Transaction ID: SB21B-79522 Date of Disbursement 10 / 27 / 2005
Mailing Address 1120 Connecticut Avenue Suite 1100		Amount of Each Disbursement this Period 8000.00
City Washington State DC Zip Code 20036	Purpose of Disbursement Consulting Fundraising Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	10310.60
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Beaconfire Consulting Inc.		Transaction ID: SB21B-79524 Date of Disbursement 10 / 27 / 2005
Mailing Address 2300 Clarendon Blvd Suite 1100		Amount of Each Disbursement this Period 4270.00
City Arlington State VA Zip Code 22201		
Purpose of Disbursement Internet Services Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Paul Bennett		Transaction ID: SB21B-79525 Date of Disbursement 10 / 27 / 2005
Mailing Address 7608 Savannah Drive		Amount of Each Disbursement this Period 3171.42
City Bethesda State MD Zip Code 20817		
Purpose of Disbursement Copy Writer Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Jack I. Bender & Sons		Transaction ID: SB21B-79527 Date of Disbursement 10 / 27 / 2005
Mailing Address 1120 Connecticut Ave, NW Suite 1200		Amount of Each Disbursement this Period 5275.00
City Washington State DC Zip Code 20036		
Purpose of Disbursement Rent Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	12716.42
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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Jack I. Bender & Sons		Transaction ID: SB21B-79528 Date of Disbursement 10 / 27 / 2005
Mailing Address 1120 Connecticut Ave, NW Suite 1200		Amount of Each Disbursement this Period 475.88
City Washington State DC Zip Code 20036	Purpose of Disbursement Equipment Maintenance Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. BHK Arts Consultants, Inc.		Transaction ID: SB21B-79529 Date of Disbursement 10 / 27 / 2005
Mailing Address PO Box 50		Amount of Each Disbursement this Period 2500.00
City Reedville State VA Zip Code 22539	Purpose of Disbursement Consulting Fundraising Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. BHK Arts Consultants, Inc.		Transaction ID: SB21B-79530 Date of Disbursement 10 / 27 / 2005
Mailing Address PO Box 50		Amount of Each Disbursement this Period 240.96
City Reedville State VA Zip Code 22539	Purpose of Disbursement Travel/ Accommodations Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3216.84
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Bulletproof		Transaction ID: SB21B-79531 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 1840 41st Ave, #102-333		Amount of Each Disbursement this Period 107.14
City Capitola State CA Zip Code 95010		
Purpose of Disbursement Copy Writer Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Colonial Parking, Inc.		Transaction ID: SB21B-79534 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 1050 Thomas Jefferson St., NW #100		Amount of Each Disbursement this Period 420.00
City Washington State DC Zip Code 20007		
Purpose of Disbursement Parking Fees Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Condor Communications		Transaction ID: SB21B-79535 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 5520 Connecticut Ave, NW		Amount of Each Disbursement this Period 2865.90
City Washington State DC Zip Code 20015		
Purpose of Disbursement Printing Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3393.04
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Direct Advantage Marketing		Transaction ID: SB21B-79536 Date of Disbursement 10 / 27 / 2005
Mailing Address PO Box 55043		Amount of Each Disbursement this Period 4898.40
City Boston	State MA Zip Code 02205	
Purpose of Disbursement Phone Banks		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Double R Production		Transaction ID: SB21B-79537 Date of Disbursement 10 / 27 / 2005
Mailing Address 1424 16th Street, NW Suite 501		Amount of Each Disbursement this Period 200.00
City Washington	State DC Zip Code 20036	
Purpose of Disbursement Printing		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Double R Production		Transaction ID: SB21B-79538 Date of Disbursement 10 / 27 / 2005
Mailing Address 1424 16th Street, NW Suite 501		Amount of Each Disbursement this Period 2260.00
City Washington	State DC Zip Code 20036	
Purpose of Disbursement Printing		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	7358.40
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Double R Production		Transaction ID: SB21B-79539 Date of Disbursement 10 / 27 / 2005
Mailing Address 1424 16th Street, NW Suite 501		Amount of Each Disbursement this Period 24300.00
City Washington State DC Zip Code 20036	Category/ Type	
Purpose of Disbursement Printing		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Sara R Fewer		Transaction ID: SB21B-79542 Date of Disbursement 10 / 27 / 2005
Mailing Address 767 22nd Ave		Amount of Each Disbursement this Period 57.75
City San Francisco State CA Zip Code 94121	Category/ Type	
Purpose of Disbursement Travel/ Accommodations		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Margot Friedman		Transaction ID: SB21B-79544 Date of Disbursement 10 / 27 / 2005
Mailing Address 1713 18th Street, NW Suite B		Amount of Each Disbursement this Period 1500.00
City Washington State DC Zip Code 20009	Category/ Type	
Purpose of Disbursement Consulting Fundraising		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	25857.75
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Gordon and Schwenkmeyer, Inc.		Transaction ID: SB21B-79546 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 300 N. Sepulveda Blvd. Suite 2050		Amount of Each Disbursement this Period 21 145.25
City El Segundo State CA Zip Code 90245		
Purpose of Disbursement Phone Banks Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Cathy Kades		Transaction ID: SB21B-79551 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 5832 Mossrock Drive		Amount of Each Disbursement this Period 450.00
City Rockville State MD Zip Code 20852		
Purpose of Disbursement Consulting Fundraising Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Judi Kanter		Transaction ID: SB21B-79552 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 267 Paseo Bernal Ave.		Amount of Each Disbursement this Period 368.40
City Moraga State CA Zip Code 94556		
Purpose of Disbursement Travel/ Accommodations Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	21963.65
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Faith B. Kerr		Transaction ID: SB21B-79555 Date of Disbursement 10 / 27 / 2005	
Mailing Address 44 Summit Street		Amount of Each Disbursement this Period 105.00	
City Ivoryton State CT Zip Code 06442	Purpose of Disbursement Copy Writer Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Faith B. Kerr		Transaction ID: SB21B-79556 Date of Disbursement 10 / 27 / 2005	
Mailing Address 44 Summit Street		Amount of Each Disbursement this Period 14.00	
City Ivoryton State CT Zip Code 06442	Purpose of Disbursement Copy Writer Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Amie Kershner		Transaction ID: SB21B-79557 Date of Disbursement 10 / 27 / 2005	
Mailing Address 2209 E. Lombard St. #1		Amount of Each Disbursement this Period 16.00	
City Baltimore State MD Zip Code 21231	Purpose of Disbursement Local Transportation Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	135.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. LK Photos		Transaction ID: SB21B-79558 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address Leslie E. Kossoff 5225 Pooks Hill Road		Amount of Each Disbursement this Period 820.00
City Bethesda State MD Zip Code 20814	Category/ Type	
Purpose of Disbursement Photography		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. LK Photos		Transaction ID: SB21B-79559 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address Leslie E. Kossoff 5225 Pooks Hill Road		Amount of Each Disbursement this Period 1110.00
City Bethesda State MD Zip Code 20814	Category/ Type	
Purpose of Disbursement Photography		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Colleen Medlock		Transaction ID: SB21B-79560 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 14637 Locustwood Lane		Amount of Each Disbursement this Period 40.00
City Silver Spring State MD Zip Code 20905	Category/ Type	
Purpose of Disbursement Local Transportation		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1970.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Anne Moses		Transaction ID: SB21B-79567 Date of Disbursement 10 / 27 / 2005
Mailing Address 251 28th Street		Amount of Each Disbursement this Period 172.65
City San Francisco	State CA Zip Code 94131	
Purpose of Disbursement Travel/ Accommodations		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Names In The News		Transaction ID: SB21B-79568 Date of Disbursement 10 / 27 / 2005
Mailing Address 1300 Clay Street, 11th Floor		Amount of Each Disbursement this Period 4423.23
City Oakland	State CA Zip Code 94612-1429	
Purpose of Disbursement List Rental		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Names In The News		Transaction ID: SB21B-79569 Date of Disbursement 10 / 27 / 2005
Mailing Address 1300 Clay Street, 11th Floor		Amount of Each Disbursement this Period 975.46
City Oakland	State CA Zip Code 94612-1429	
Purpose of Disbursement List Rental		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	5571.34
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)

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<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)
EMILY's List

A. Names In The News Full Name (Last, First, Middle Initial) Mailing Address 1300 Clay Street, 11th Floor City Oakland State CA Zip Code 94612-1429 Purpose of Disbursement List Rental Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79570 Date of Disbursement: 10 / 27 / 2005 Amount of Each Disbursement this Period: 477.36 Category/Type
---	--	--

B. Names In The News Full Name (Last, First, Middle Initial) Mailing Address 1300 Clay Street, 11th Floor City Oakland State CA Zip Code 94612-1429 Purpose of Disbursement List Rental Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79571 Date of Disbursement: 10 / 27 / 2005 Amount of Each Disbursement this Period: 477.28 Category/Type
---	--	--

C. Omni Shoreham Hotel Attn: Andrea Telfer Full Name (Last, First, Middle Initial) Mailing Address 2500 Calvert Street NW City Washington State DC Zip Code 20008 Purpose of Disbursement Catering/Facilities Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79574 Date of Disbursement: 10 / 27 / 2005 Amount of Each Disbursement this Period: 3000.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	3954.64
TOTAL This Period (last page this line number only) ▶	[Empty Box]

**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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Omni Shoreham Hotel Attn: Andrea Telfer		Transaction ID: SB21B-79575 Date of Disbursement
Mailing Address 2500 Calvert Street NW		<input type="text" value="10"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="05"/>
City Washington	State DC	Zip Code 20008
Purpose of Disbursement Catering/Facilities	<input type="text" value="3000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Prime Office Products		Transaction ID: SB21B-79576 Date of Disbursement
Mailing Address PO Box 8629		<input type="text" value="10"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="05"/>
City Elkridge	State MD	Zip Code 21075
Purpose of Disbursement Office Supplies Expenses	<input type="text" value="399.94"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Prime Office Products		Transaction ID: SB21B-79577 Date of Disbursement
Mailing Address PO Box 8629		<input type="text" value="10"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="05"/>
City Elkridge	State MD	Zip Code 21075
Purpose of Disbursement Office Supplies Expenses	<input type="text" value="131.39"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3531.33"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Production Solutions, Inc.		Transaction ID: SB21B-79583 Date of Disbursement 10 / 27 / 2005
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 175.62
City Vienna State VA Zip Code 22182	Purpose of Disbursement Deliveries	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Production Solutions, Inc.		Transaction ID: SB21B-79584 Date of Disbursement 10 / 27 / 2005
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 1057.15
City Vienna State VA Zip Code 22182	Purpose of Disbursement Direct Mail Expense	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Production Solutions, Inc.		Transaction ID: SB21B-79585 Date of Disbursement 10 / 27 / 2005
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 525.00
City Vienna State VA Zip Code 22182	Purpose of Disbursement Printing	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1757.77
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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)

PAGE 265 / 1975

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Production Solutions, Inc.		Transaction ID: SB21B-79586 Date of Disbursement 10 / 27 / 2005
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 0.00
City Vienna State VA Zip Code 22182		
Purpose of Disbursement Printing	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Production Solutions, Inc.		Transaction ID: SB21B-79587 Date of Disbursement 10 / 27 / 2005
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 10176.52
City Vienna State VA Zip Code 22182		
Purpose of Disbursement Printing	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Production Solutions, Inc.		Transaction ID: SB21B-79588 Date of Disbursement 10 / 27 / 2005
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 387.54
City Vienna State VA Zip Code 22182		
Purpose of Disbursement Deliveries	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	10564.06
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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Production Solutions, Inc.		Transaction ID: SB21B-79589 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 7794.14
City Vienna State VA Zip Code 22182		
Purpose of Disbursement Direct Mail Expense Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Production Solutions, Inc.		Transaction ID: SB21B-79590 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 3570.97
City Vienna State VA Zip Code 22182		
Purpose of Disbursement Printing Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Production Solutions, Inc.		Transaction ID: SB21B-79591 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 69.86
City Vienna State VA Zip Code 22182		
Purpose of Disbursement Deliveries Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	11434.97
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Production Solutions, Inc.		Transaction ID: SB21B-79592 Date of Disbursement 10 / 27 / 2005
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 450.00
City Vienna State VA Zip Code 22182		
Purpose of Disbursement Direct Mail Expense Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		
Full Name (Last, First, Middle Initial) B. Production Solutions, Inc.		Transaction ID: SB21B-79593 Date of Disbursement 10 / 27 / 2005
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 550.00
City Vienna State VA Zip Code 22182		
Purpose of Disbursement Printing Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		
Full Name (Last, First, Middle Initial) C. Production Solutions, Inc.		Transaction ID: SB21B-79594 Date of Disbursement 10 / 27 / 2005
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 34.92
City Vienna State VA Zip Code 22182		
Purpose of Disbursement Deliveries Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	1034.92
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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Production Solutions, Inc.		Transaction ID: SB21B-79595 Date of Disbursement 10 / 27 / 2005
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 450.00
City Vienna State VA Zip Code 22182	Category/ Type	
Purpose of Disbursement Direct Mail Expense		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Production Solutions, Inc.		Transaction ID: SB21B-79596 Date of Disbursement 10 / 27 / 2005
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 550.00
City Vienna State VA Zip Code 22182	Category/ Type	
Purpose of Disbursement Printing		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Production Solutions, Inc.		Transaction ID: SB21B-79597 Date of Disbursement 10 / 27 / 2005
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 13.91
City Vienna State VA Zip Code 22182	Category/ Type	
Purpose of Disbursement Deliveries		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1013.91
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Production Solutions, Inc.		Transaction ID: SB21B-79598 Date of Disbursement 10 / 27 / 2005
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 450.00
City Vienna State VA Zip Code 22182	Category/ Type	
Purpose of Disbursement Direct Mail Expense		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Production Solutions, Inc.		Transaction ID: SB21B-79599 Date of Disbursement 10 / 27 / 2005
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 550.00
City Vienna State VA Zip Code 22182	Category/ Type	
Purpose of Disbursement Printing		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Production Solutions, Inc.		Transaction ID: SB21B-79600 Date of Disbursement 10 / 27 / 2005
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 1050.00
City Vienna State VA Zip Code 22182	Category/ Type	
Purpose of Disbursement Printing		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2050.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Production Solutions, Inc.		Transaction ID: SB21B-79601 Date of Disbursement 10 / 27 / 2005
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 116.17
City Vienna State VA Zip Code 22182	Purpose of Disbursement Deliveries	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Production Solutions, Inc.		Transaction ID: SB21B-79602 Date of Disbursement 10 / 27 / 2005
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 793.50
City Vienna State VA Zip Code 22182	Purpose of Disbursement Direct Mail Expense	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Production Solutions, Inc.		Transaction ID: SB21B-79603 Date of Disbursement 10 / 27 / 2005
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 750.00
City Vienna State VA Zip Code 22182	Purpose of Disbursement Printing	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1659.67
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Production Solutions, Inc.		Transaction ID: SB21B-79604 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 950.00
City Vienna State VA Zip Code 22182		
Purpose of Disbursement Printing	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Quick Messenger		Transaction ID: SB21B-79605 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 4829 Fairmont Ave Suite B		Amount of Each Disbursement this Period 31.11
City Bethesda State MD Zip Code 20814		
Purpose of Disbursement Deliveries	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Ryan Rodriguez		Transaction ID: SB21B-79606 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 612 C Street SE		Amount of Each Disbursement this Period 59.00
City Washington State DC Zip Code 20003		
Purpose of Disbursement Local Transportation	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1040.11
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Share Group		Transaction ID: SB21B-79607 Date of Disbursement 10 / 27 / 2005
Mailing Address PO Box 55183		Amount of Each Disbursement this Period 1248.38
City Boston State MA Zip Code 02205-5183		
Purpose of Disbursement Phone Banks Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Share Group		Transaction ID: SB21B-79608 Date of Disbursement 10 / 27 / 2005
Mailing Address PO Box 55183		Amount of Each Disbursement this Period 9093.12
City Boston State MA Zip Code 02205-5183		
Purpose of Disbursement Phone Banks Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. United Parcel Service		Transaction ID: SB21B-79609 Date of Disbursement 10 / 27 / 2005
Mailing Address P. O. Box 7247-0244		Amount of Each Disbursement this Period 206.44
City Philadelphia State PA Zip Code 19170-0001		
Purpose of Disbursement Deliveries Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	10547.94
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. United Parcel Service		Transaction ID: SB21B-79610 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address P. O. Box 7247-0244		Amount of Each Disbursement this Period 1.50
City Philadelphia State PA Zip Code 19170-0001		
Purpose of Disbursement Deliveries Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. United Parcel Service		Transaction ID: SB21B-79611 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5	
Mailing Address P. O. Box 7247-0244		Amount of Each Disbursement this Period 431.80	
City Philadelphia State PA Zip Code 19170-0001			
Purpose of Disbursement Deliveries Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. U. S. Postal Service		Transaction ID: SB21B-79613 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5	
Mailing Address 1400 L Street NW		Amount of Each Disbursement this Period 666.00	
City Washington State DC Zip Code 20005			
Purpose of Disbursement Postage Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	1099.30
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Triplex Direct Marketing		Transaction ID: SB21B-79615 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 20 Leveroni Court PO Box 1800		Amount of Each Disbursement this Period 230.07
City Novato State CA Zip Code 94948-1800		
Purpose of Disbursement List Rental Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B-79739 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address P.O. Box 0001		Amount of Each Disbursement this Period 102.79	
City Chicago State IL Zip Code 60679			
Purpose of Disbursement Credit Card Service Charges Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Antionette Coffen		Transaction ID: SB21B-79618 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address 459 Massachusettes Ave		Amount of Each Disbursement this Period 72.25	
City Washington State DC Zip Code 20001			
Purpose of Disbursement Temporary Help Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	405.11
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)

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<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)
EMILY's List

A. Kim Frazier Full Name (Last, First, Middle Initial) Mailing Address 306 S Street NE City Washington State DC Zip Code 20002 Purpose of Disbursement Temporary Help Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79619 Date of Disbursement 10 / 28 / 2005 Amount of Each Disbursement this Period 72.25 Category/Type
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B. Tammy Singleton Full Name (Last, First, Middle Initial) Mailing Address 306 S St NE City Washington State DC Zip Code 20002 Purpose of Disbursement Temporary Help Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79620 Date of Disbursement 10 / 28 / 2005 Amount of Each Disbursement this Period 72.25 Category/Type
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C. American Express Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 0001 City Chicago State IL Zip Code 60679 Purpose of Disbursement Credit Card Service Charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79740 Date of Disbursement 10 / 31 / 2005 Amount of Each Disbursement this Period 297.95 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	442.45
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)
EMILY's List

A. Paychex Full Name (Last, First, Middle Initial) Mailing Address 3060 Williams Drive #300 City Fairfax State VA Zip Code 22031 Purpose of Disbursement Taxes - Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79719 Date of Disbursement 10 / 31 / 2005 Amount of Each Disbursement this Period 12.41 Category/Type
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B. Staples Full Name (Last, First, Middle Initial) Mailing Address 1901 L Street NW City Washington State DC Zip Code 20036 Purpose of Disbursement Copying/Faxing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-78931-10000 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 20.10 Category/Type [MEMO ITEM]
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C. Mackeys Full Name (Last, First, Middle Initial) Mailing Address 1823 L St NW City Washington State DC Zip Code 20036 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-78959-10000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 56.80 Category/Type [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	12.41
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)

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<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)
EMILY's List

A. Borders Books Full Name (Last, First, Middle Initial) Mailing Address 1800 L Street NW City Washington State DC Zip Code 20036 Purpose of Disbursement Office Supplies Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-78960-10000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 22.10 [MEMO ITEM]
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B. Impact Resource Full Name (Last, First, Middle Initial) Mailing Address 3109 Clairmont Rd NE City Atlanta State GA Zip Code 30329 Purpose of Disbursement Publication & Dues Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-78970-10000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM]
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C. Sir Speedy Full Name (Last, First, Middle Initial) Mailing Address 1429 H Street NW City Washington State DC Zip Code 20015 Purpose of Disbursement Printing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-78990-10000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 500.96 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. US Airways		Transaction ID: SB21B-78991-10000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 2345 Crystal Drive		Amount of Each Disbursement this Period 126.90
City Arlington State VA Zip Code 22227	[MEMO ITEM]	
Purpose of Disbursement Travel/ Accommodations		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

Full Name (Last, First, Middle Initial) B. US Airways		Transaction ID: SB21B-78991-20000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 2345 Crystal Drive		Amount of Each Disbursement this Period 158.60
City Arlington State VA Zip Code 22227	[MEMO ITEM]	
Purpose of Disbursement Travel/ Accommodations		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Northwest Airlines		Transaction ID: SB21B-78991-30000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 7500 Airline Drive		Amount of Each Disbursement this Period 178.40
City Minneapolis State MN Zip Code 55450	[MEMO ITEM]	
Purpose of Disbursement Travel/ Accommodations		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Airlines		Transaction ID: SB21B-78991-40000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address PO Box 619612		Amount of Each Disbursement this Period 247.70 [MEMO ITEM]
City DFW Airport State TX Zip Code 75261		
Purpose of Disbursement Travel/ Accommodations Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Southwest Airlines		Transaction ID: SB21B-78991-50000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 2702 Love Field Drive		Amount of Each Disbursement this Period 250.40 [MEMO ITEM]
City Dallas State TX Zip Code 75235		
Purpose of Disbursement Travel/ Accommodations Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Northwest Airlines		Transaction ID: SB21B-78991-60000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 7500 Airline Drive		Amount of Each Disbursement this Period 119.20 [MEMO ITEM]
City Minneapolis State MN Zip Code 55450		
Purpose of Disbursement Travel/ Accommodations Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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)

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<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)
EMILY's List

<p>A. Northwest Airlines</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 7500 Airline Drive</p> <p>City Minneapolis State MN Zip Code 55450</p> <p>Purpose of Disbursement Travel/ Accommodations</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-78991-70000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="239.79"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/ Type</p>

<p>B. Orbitz</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 200 S Wacker</p> <p>City Chicago State IL Zip Code 60606</p> <p>Purpose of Disbursement Travel/ Accommodations</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-78991-80000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5.99"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/ Type</p>

<p>C. United Airlines</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 66100</p> <p>City Chicago State IL Zip Code 60666</p> <p>Purpose of Disbursement Travel/ Accommodations</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-78991-90000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="86.40"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/ Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="0.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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)

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<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)
EMILY's List

A. Expedia Full Name (Last, First, Middle Initial) Mailing Address 13810 SE Eastgate City Bellevue State WA Zip Code 98005 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-78991-100000 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 5.00 [MEMO ITEM]
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B. Wyndham City Center Full Name (Last, First, Middle Initial) Mailing Address 1143 New Hampshire Ave NW City Washington State DC Zip Code 20037 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-78992-10000 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 20.40 [MEMO ITEM]
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C. Amtrak Full Name (Last, First, Middle Initial) Mailing Address 60 Mass Ave NE City Washington State DC Zip Code 20001 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-78992-20000 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 160.00 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 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)
EMILY's List

A. Tortilla Coast Full Name (Last, First, Middle Initial) Mailing Address 400 1st St SE City Washington State DC Zip Code 20003 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-78992-30000 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 44.29 [MEMO ITEM]
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B. News World Full Name (Last, First, Middle Initial) Mailing Address National Airport City Washington State DC Zip Code 20001 Purpose of Disbursement Office Supplies Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-78993-10000 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 9.45 [MEMO ITEM]
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C. Jet Blue Full Name (Last, First, Middle Initial) Mailing Address PO Box 17435 City Salt Lake City State UT Zip Code 84117 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-78994-10000 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 204.20 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Jet Blue		Transaction ID: SB21B-78994-20000 Date of Disbursement 10 / 13 / 2005
Mailing Address PO Box 17435		Amount of Each Disbursement this Period 109.20 [MEMO ITEM]
City Salt Lake City	State UT Zip Code 84117	
Purpose of Disbursement Travel/ Accommodations		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Staples		Transaction ID: SB21B-78995-10000 Date of Disbursement 10 / 13 / 2005
Mailing Address 1901 M Street NW		Amount of Each Disbursement this Period 29.08 [MEMO ITEM]
City Washington	State DC Zip Code 20036	
Purpose of Disbursement Office Supplies Expenses		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Staples		Transaction ID: SB21B-78996-10000 Date of Disbursement 10 / 13 / 2005
Mailing Address 1901 L Street NW		Amount of Each Disbursement this Period 72.16 [MEMO ITEM]
City Washington	State DC Zip Code 20036	
Purpose of Disbursement Office Supplies Expenses		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

A. USPS Full Name (Last, First, Middle Initial) Mailing Address 1501 Conn Ave NW City Washington State DC Zip Code 20036 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-78997-10000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 296.23 [MEMO ITEM]
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B. Federal Express Full Name (Last, First, Middle Initial) Mailing Address 3610 HACKS CROSS ROAD City Memphis State TN Zip Code 38125 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-78997-20000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 14.06 [MEMO ITEM]
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C. USPS Full Name (Last, First, Middle Initial) Mailing Address 1501 Conn Ave NW City Washington State DC Zip Code 20036 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-78998-10000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 148.00 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Acme Made		Transaction ID: SB21B-78999-10000 Date of Disbursement 10 / 13 / 2005
Mailing Address 1806 SE Holgate Blvd		Amount of Each Disbursement this Period 184.51
City Portland State OR Zip Code 97202	Purpose of Disbursement Office Supplies Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Katespade.com		Transaction ID: SB21B-79000-10000 Date of Disbursement 10 / 13 / 2005
Mailing Address 7601 Trade Port Drive		Amount of Each Disbursement this Period 443.71
City Louisville State KY Zip Code 40258	Purpose of Disbursement Office Supplies Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Rosa Mexicano		Transaction ID: SB21B-79002-10000 Date of Disbursement 10 / 13 / 2005
Mailing Address 575 7th St NW		Amount of Each Disbursement this Period 147.00
City Washington State DC Zip Code 20004	Purpose of Disbursement Travel/Accommodation /Meals Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Rosa Mexicano		Transaction ID: SB21B-79002-20000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 575 7th St NW		Amount of Each Disbursement this Period 220.14
City Washington State DC Zip Code 20004	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Northwest Airlines		Transaction ID: SB21B-79003-10000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 7500 Airline Drive		Amount of Each Disbursement this Period 279.40
City Minneapolis State MN Zip Code 55450	[MEMO ITEM]	
Purpose of Disbursement Travel/ Accommodations		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Holiday Station		Transaction ID: SB21B-79003-20000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 1845 Robert St S		Amount of Each Disbursement this Period 31.40
City St Paul State MN Zip Code 55118	[MEMO ITEM]	
Purpose of Disbursement Travel/ Accommodations		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

<p>A. Delightful Deliveries</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 333 Jackson Ave</p> <p>City Yosset State NY Zip Code 11791</p> <p>Purpose of Disbursement Office Supplies Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-79008-10000</p> <p>Date of Disbursement</p> <p>10 / 13 / 2005</p> <p>Amount of Each Disbursement this Period</p> <p>76.90</p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>B. Amtrak</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 60 Mass Ave NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Travel/ Accommodations</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-79009-10000</p> <p>Date of Disbursement</p> <p>10 / 13 / 2005</p> <p>Amount of Each Disbursement this Period</p> <p>160.00</p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>C. Starbucks</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 1734 L Street NW</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement Travel/Accommodation /Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-79009-20000</p> <p>Date of Disbursement</p> <p>10 / 13 / 2005</p> <p>Amount of Each Disbursement this Period</p> <p>4.35</p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

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)

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

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

NAME OF COMMITTEE (In Full)
EMILY's List

A. Faber inc Full Name (Last, First, Middle Initial) Mailing Address 50 Massachusetts Ave NE City Washington State DC Zip Code 20002 Purpose of Disbursement Office Supplies Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79009-30000 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 2.76 [MEMO ITEM]
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B. Akwaaba Mansion Full Name (Last, First, Middle Initial) Mailing Address 347 Macdonough St City Brooklyn State NY Zip Code 11233 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79009-40000 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 86.24 [MEMO ITEM]
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C. Amtrak Full Name (Last, First, Middle Initial) Mailing Address 60 Mass Ave NE City Washington State DC Zip Code 20002 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79009-50000 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 7.25 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

A. Au Bon Pain Full Name (Last, First, Middle Initial) Mailing Address 1732 L Street NW City Washington State DC Zip Code 20036 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79009-60000 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 2.97 [MEMO ITEM]
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B. Sugarcane Full Name (Last, First, Middle Initial) Mailing Address 238 Flatbush Ave City Brooklyn State NY Zip Code 11217 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79009-70000 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 119.00 [MEMO ITEM]
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C. Akwaaba Mansion Full Name (Last, First, Middle Initial) Mailing Address 347 Macdonough St City Brooklyn State NY Zip Code 11233 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79009-80000 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 86.23 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Akwaaba Mansion		Transaction ID: SB21B-79009-90000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 347 Macdonough St		Amount of Each Disbursement this Period 192.47
City Brooklyn State NY Zip Code 11233	[MEMO ITEM]	
Purpose of Disbursement Travel/ Accommodations		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

Full Name (Last, First, Middle Initial) B. US Airways		Transaction ID: SB21B-79011-10000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 2345 Crystal Drive		Amount of Each Disbursement this Period 25.00
City Arlington State VA Zip Code 22227	[MEMO ITEM]	
Purpose of Disbursement Travel/ Accommodations		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

Full Name (Last, First, Middle Initial) C. United Airlines		Transaction ID: SB21B-79011-20000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address PO Box 66100		Amount of Each Disbursement this Period 391.90
City Chicago State IL Zip Code 60666	[MEMO ITEM]	
Purpose of Disbursement Travel/ Accommodations		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

A. Texaco Full Name (Last, First, Middle Initial) Mailing Address 648 White Plains City Trumbull State CT Zip Code 06611 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79011-30000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 9.85 [MEMO ITEM]
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B. Texaco Full Name (Last, First, Middle Initial) Mailing Address 648 White Plains City Trumbull State CT Zip Code 06611 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79011-40000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 34.00 [MEMO ITEM]
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C. US Airways Full Name (Last, First, Middle Initial) Mailing Address 2345 Crystal Drive City Arlington State VA Zip Code 22227 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79011-50000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 370.90 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

A. Midwest Airlines Full Name (Last, First, Middle Initial) Mailing Address 6744 South Howell Ave City Oak Creek State WI Zip Code 53154 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79011-60000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 314.80 [MEMO ITEM]
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B. Crowne Plaza Full Name (Last, First, Middle Initial) Mailing Address 1375 K St NW City Washington State DC Zip Code 20005 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79011-70000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 469.71 [MEMO ITEM]
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C. US Airways Full Name (Last, First, Middle Initial) Mailing Address 2345 Crystal Drive City Arlington State VA Zip Code 22227 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79011-80000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 370.90 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

A. Shell Full Name (Last, First, Middle Initial) Mailing Address 1530 Post Rd East City Westport State CT Zip Code 06880 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79011-90000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 40.00 [MEMO ITEM]
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B. Westport Inn Full Name (Last, First, Middle Initial) Mailing Address 1595 Post Rd E City Westport State CT Zip Code 06880 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79011-100000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 122.08 [MEMO ITEM]
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C. Port Full Name (Last, First, Middle Initial) Mailing Address Logan Airport City Boston State MA Zip Code 02128 Purpose of Disbursement Parking Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79011-110000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 22.00 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 294 / 1975

<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)
EMILY's List

A. US Airways Full Name (Last, First, Middle Initial) Mailing Address 2345 Crystal Drive City Arlington State VA Zip Code 22227 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79011-120000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 320.90 [MEMO ITEM]
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B. Avis Rent A Car Full Name (Last, First, Middle Initial) Mailing Address Piedmont Triad Inter City Greensboro State NC Zip Code 27401 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79012-10000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 128.07 [MEMO ITEM]
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C. TMobile Full Name (Last, First, Middle Initial) Mailing Address 12920 SE 38th St City Bellevue State WA Zip Code 98006 Purpose of Disbursement Telephone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79012-20000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 6.00 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

A. US Airways Full Name (Last, First, Middle Initial) Mailing Address 2345 Crystal Drive City Arlington State VA Zip Code 22227 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79012-30000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 276.90 [MEMO ITEM]
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B. Cassis Travel Services Full Name (Last, First, Middle Initial) Mailing Address 535 5th Ave City New York State NY Zip Code 10017 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79012-40000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 35.00 [MEMO ITEM]
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C. Hyatt Hotels Full Name (Last, First, Middle Initial) Mailing Address 109 E 42nd St City New York State NY Zip Code 10017 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79012-50000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 514.17 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

<p>A. Washington Parking</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 60 Mass Ave NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Parking Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-79012-60000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="18.00"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>B. Marriott</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 1331 Pennsylvania Ave NW</p> <p>City Washington State DC Zip Code 20004</p> <p>Purpose of Disbursement Travel/ Accommodations</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-79012-70000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="63.85"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>C. Amtrak</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 60 Mass Ave NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Travel/ Accommodations</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-79012-80000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="212.00"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="0.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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)

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<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)
EMILY's List

A. POD Full Name (Last, First, Middle Initial) Mailing Address 3636 Sansom St City Philadelphia State PA Zip Code 19104 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79012-90000 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 86.76 [MEMO ITEM]
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B. Dreamstime.com Full Name (Last, First, Middle Initial) Mailing Address 586 Strawberry Hill Rd City Centerville State MA Zip Code 02632 Purpose of Disbursement Office Supplies Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79019-10000 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 20.00 [MEMO ITEM]
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C. Priceline Hotel Full Name (Last, First, Middle Initial) Mailing Address 800 Connecticut Ave City Norwalk State CT Zip Code 06854 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79020-10000 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 92.19 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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)

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<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)
EMILY's List

A. Shell Full Name (Last, First, Middle Initial) Mailing Address 1002 N West Shore City Tampa State FL Zip Code 33612 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79020-20000 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 27.86 [MEMO ITEM]
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B. Budget Rent A Car Full Name (Last, First, Middle Initial) Mailing Address 6936 E Fowler Ave City Tampa State FL Zip Code 33617 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79020-30000 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 36.90 [MEMO ITEM]
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C. California Tortilla Full Name (Last, First, Middle Initial) Mailing Address BWI Airport City Baltimore State MD Zip Code 21240 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79020-40000 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 12.33 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Spain		Transaction ID: SB21B-79020-50000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 513 N Tampa St		Amount of Each Disbursement this Period 21.93
City Tampa State FL Zip Code 33602	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Palm Restaurant		Transaction ID: SB21B-79021-10000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 4425 Ponce de Leon Blvd		Amount of Each Disbursement this Period 23.71
City Coral Gables State FL Zip Code 33146	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Kinkos		Transaction ID: SB21B-79021-20000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 13901 SW 88TH St		Amount of Each Disbursement this Period 7.49
City Miami State FL Zip Code 33186	[MEMO ITEM]	
Purpose of Disbursement Printing		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. USPS		Transaction ID: SB21B-79021-30000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 251 Valencia Avenue		Amount of Each Disbursement this Period 5.35
City Miami State FL Zip Code 33134	[MEMO ITEM]	
Purpose of Disbursement Postage Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Blu Pizzeria		Transaction ID: SB21B-79021-40000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 5894 Sunset Drive		Amount of Each Disbursement this Period 16.46
City Miami State FL Zip Code 33143	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. USPS		Transaction ID: SB21B-79021-50000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 251 Valencia Avenue		Amount of Each Disbursement this Period 6.93
City Miami State FL Zip Code 33134	[MEMO ITEM]	
Purpose of Disbursement Postage Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

<p>A. Real.com</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 91123</p> <p>City Seattle State WA Zip Code 98111</p> <p>Purpose of Disbursement Office Supplies Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-79021-60000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="13.78"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>B. Cingular Wireless</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 5565 Glenridge Connector</p> <p>City Atlanta State GA Zip Code 30342</p> <p>Purpose of Disbursement Telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-79021-70000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="168.01"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>C. Sun Pass Operations</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 88029</p> <p>City Boca Raton State FL Zip Code 33488</p> <p>Purpose of Disbursement Travel/ Accommodations</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-79021-80000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="20.00"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="0.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Delta Airlines		Transaction ID: SB21B-79021-90000 Date of Disbursement 10 / 13 / 2005
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 313.40
City Atlanta State GA Zip Code 30320	Purpose of Disbursement Travel/ Accommodations Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Trattoria Sole		Transaction ID: SB21B-79021-100000 Date of Disbursement 10 / 13 / 2005
Mailing Address 5894 Sunset Drive		Amount of Each Disbursement this Period 18.66
City Miami State FL Zip Code 33143	Purpose of Disbursement Travel/Accommodation /Meals Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Orbitz		Transaction ID: SB21B-79021-110000 Date of Disbursement 10 / 13 / 2005
Mailing Address 200 S Wacker		Amount of Each Disbursement this Period 6.99
City Chicago State IL Zip Code 60606	Purpose of Disbursement Travel/ Accommodations Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. CVS Store		Transaction ID: SB21B-79021-120000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 3215 Grand Avenue		Amount of Each Disbursement this Period 18.64
City Miami State FL Zip Code 33133	[MEMO ITEM]	
Purpose of Disbursement Office Supplies Expenses Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. USPS		Transaction ID: SB21B-79021-130000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 251 Valencia Avenue		Amount of Each Disbursement this Period 3.85
City Miami State FL Zip Code 33134	[MEMO ITEM]	
Purpose of Disbursement Postage Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Factory Direct Cell		Transaction ID: SB21B-79021-140000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address		Amount of Each Disbursement this Period 30.95
City Beulah State MI Zip Code	[MEMO ITEM]	
Purpose of Disbursement Telephone Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Airlines		Transaction ID: SB21B-79021-150000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address PO Box 619612		Amount of Each Disbursement this Period 117.20
City DFW Airport State TX Zip Code 75261	[MEMO ITEM]	
Purpose of Disbursement Travel/ Accommodations Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Paypal		Transaction ID: SB21B-79021-160000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address PO Box 45950		Amount of Each Disbursement this Period 20.00
City Omaha State NE Zip Code 68145	[MEMO ITEM]	
Purpose of Disbursement Office Supplies Expenses Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Office Max		Transaction ID: SB21B-79021-170000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 915 N Homestead Blvd		Amount of Each Disbursement this Period 74.01
City Homestead State FL Zip Code 33030	[MEMO ITEM]	
Purpose of Disbursement Office Supplies Expenses Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Avis Rent A Car		Transaction ID: SB21B-79021-180000 Date of Disbursement																				
Mailing Address 3300 Capital Circle SW		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>5</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	5	
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		1	3		2	0	5														
City Tallahassee	State FL	Zip Code 32310																				
Purpose of Disbursement Travel/ Accommodations		Amount of Each Disbursement this Period																				
Candidate Name		<table border="1"><tr><td>66.85</td></tr></table>	66.85																			
66.85																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District:	Category/ Type																					

[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. HMS Host		Transaction ID: SB21B-79021-190000 Date of Disbursement																				
Mailing Address Miami International		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>5</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	5	
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		1	3		2	0	5														
City Miami	State FL	Zip Code 33125																				
Purpose of Disbursement Travel/Accommodation /Meals		Amount of Each Disbursement this Period																				
Candidate Name		<table border="1"><tr><td>9.39</td></tr></table>	9.39																			
9.39																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District:	Category/ Type																					

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Doubletree		Transaction ID: SB21B-79021-200000 Date of Disbursement																				
Mailing Address 101 S Adams St		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>5</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	5	
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		1	3		2	0	5														
City Tallahassee	State FL	Zip Code 32301																				
Purpose of Disbursement Travel/ Accommodations		Amount of Each Disbursement this Period																				
Candidate Name		<table border="1"><tr><td>159.23</td></tr></table>	159.23																			
159.23																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District:	Category/ Type																					

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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)

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<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)
EMILY's List

A. Doubletree Full Name (Last, First, Middle Initial) Mailing Address 101 S Adams St City Tallahassee State FL Zip Code 32301 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Transaction ID: SB21B-79021-210000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 137.52 [MEMO ITEM]
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/ Type

B. Paradies Full Name (Last, First, Middle Initial) Mailing Address 3300 Capital Cir SW City Tallahassee State FL Zip Code 32310 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Transaction ID: SB21B-79021-220000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 4.15 [MEMO ITEM]
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/ Type

C. HMS Host Full Name (Last, First, Middle Initial) Mailing Address Tampa Intern Airport City Tampa State FL Zip Code 33607 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Transaction ID: SB21B-79021-230000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 11.00 [MEMO ITEM]
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

A. Cingular Full Name (Last, First, Middle Initial) Mailing Address 5565 Glenridge Connector City Atlanta State GA Zip Code 30342 Purpose of Disbursement Telephone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79021-240000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 64.18 [MEMO ITEM]
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B. USPS Full Name (Last, First, Middle Initial) Mailing Address 1000 West Palm Drive City Homestead State FL Zip Code 33034 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79021-250000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 4.30 [MEMO ITEM]
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C. Cendant Full Name (Last, First, Middle Initial) Mailing Address 200 S Wacker City Chicago State IL Zip Code 60606 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79021-260000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 6.99 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 308 / 1975

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Airlines		Transaction ID: SB21B-79021-270000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address PO Box 619612		Amount of Each Disbursement this Period 321.10
City DFW Airport	State TX Zip Code 75261	
Purpose of Disbursement Travel/ Accommodations		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. USPS		Transaction ID: SB21B-79021-280000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 251 Valencia Avenue		Amount of Each Disbursement this Period 59.53
City Miami	State FL Zip Code 33134	
Purpose of Disbursement Postage		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Wyndham City Center		Transaction ID: SB21B-79022-10000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 1143 New Hampshire Ave NW		Amount of Each Disbursement this Period 13.00
City Washington	State DC Zip Code 20037	
Purpose of Disbursement Travel/ Accommodations		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 309 / 1975

<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)
EMILY's List

A. Southwest Airlines Full Name (Last, First, Middle Initial) Mailing Address 2702 Love Field Drive City Dallas State TX Zip Code 75235 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79023-10000 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 157.20 [MEMO ITEM]
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B. Eleven Eleven Full Name (Last, First, Middle Initial) Mailing Address 1111 Mississippi Ave City St Louis State MO Zip Code 63104 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79023-20000 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 35.00 [MEMO ITEM]
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C. Yellow Cab Full Name (Last, First, Middle Initial) Mailing Address 520 W Dyer Rd # A City SANTA ANA State CA Zip Code 92703 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79023-30000 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 24.00 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

A. Southwest Airlines Full Name (Last, First, Middle Initial) Mailing Address 2702 Love Field Drive City Dallas State TX Zip Code 75235 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79023-40000 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 191.90 [MEMO ITEM]
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B. Best Western Full Name (Last, First, Middle Initial) Mailing Address 4630 Lindell Blvd City St Louis State MO Zip Code 63108 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79023-50000 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 165.44 [MEMO ITEM]
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C. Best Western Full Name (Last, First, Middle Initial) Mailing Address 4630 Lindell Blvd City St Louis State MO Zip Code 63108 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79023-60000 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 24.12 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

A. Straubs Full Name (Last, First, Middle Initial) Mailing Address 302 N Kingshighway Blvd City St Louis State MO Zip Code 63108 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79023-70000 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 8.54 [MEMO ITEM]
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B. Cendant Full Name (Last, First, Middle Initial) Mailing Address 200 S Wacker Drive City Chicago State IL Zip Code 60606 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79023-80000 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 6.99 [MEMO ITEM]
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C. American Airlines Full Name (Last, First, Middle Initial) Mailing Address PO Box 619612 City DFW Airport State TX Zip Code 75261 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79023-90000 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 493.90 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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)

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<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)
EMILY's List

<p>A. Enterprise Rent A Car</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 10701 Lambert International Bl</p> <p>City St Louis State MO Zip Code 63145</p> <p>Purpose of Disbursement Travel/ Accommodations</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-79023-100000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="120.20"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/ Type</p>

<p>B. St Louis Bread</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 21 Allen Ave</p> <p>City Webster Groves State MO Zip Code 63119</p> <p>Purpose of Disbursement Travel/Accommodation /Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-79023-110000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="12.34"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/ Type</p>

<p>C. Kolache Factory</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 2604 South Brentwood</p> <p>City Brentwood State MO Zip Code 63144</p> <p>Purpose of Disbursement Travel/Accommodation /Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-79023-120000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="13.26"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/ Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="0.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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)

PAGE 313 / 1975

<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) QT 601		Transaction ID: SB21B-79023-130000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 8835 Natural Bridge Rd		Amount of Each Disbursement this Period 26.78
City Bel Ridge State MO Zip Code 63121	[MEMO ITEM]	
Purpose of Disbursement Travel/ Accommodations Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B. Full Name (Last, First, Middle Initial) Amtrak		Transaction ID: SB21B-79023-140000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 60 Mass Ave NE		Amount of Each Disbursement this Period 150.00
City Washington State DC Zip Code 20002	[MEMO ITEM]	
Purpose of Disbursement Travel/ Accommodations Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C. Full Name (Last, First, Middle Initial) Hotels.com		Transaction ID: SB21B-79023-150000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 8140 Walnut Hill Lane		Amount of Each Disbursement this Period 111.56
City Dallas State TX Zip Code 75231	[MEMO ITEM]	
Purpose of Disbursement Travel/ Accommodations Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 314 / 1975

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Wyndham City Center		Transaction ID: SB21B-79025-10000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 1143 New Hampshire Ave NW		Amount of Each Disbursement this Period 34.00
City Washington State DC Zip Code 20037	[MEMO ITEM]	
Purpose of Disbursement Travel/ Accommodations		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Mei Wah		Transaction ID: SB21B-79025-20000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 1200 New Hampshire Ave. NW		Amount of Each Disbursement this Period 28.00
City Washington State DC Zip Code 20037	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Wyndham City Center		Transaction ID: SB21B-79025-30000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 1143 New Hampshire Ave NW		Amount of Each Disbursement this Period 18.00
City Washington State DC Zip Code 20037	[MEMO ITEM]	
Purpose of Disbursement Travel/ Accommodations		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Northwest Airlines		Transaction ID: SB21B-79025-40000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 7500 Airline Dr		Amount of Each Disbursement this Period 5.00
City Minneapolis State MN Zip Code 55450	[MEMO ITEM]	
Purpose of Disbursement Travel/ Accommodations Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Northwest Airlines		Transaction ID: SB21B-79025-50000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 7500 Airline Dr		Amount of Each Disbursement this Period 839.78
City Minneapolis State MN Zip Code 55450	[MEMO ITEM]	
Purpose of Disbursement Travel/ Accommodations Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. The UPS Store		Transaction ID: SB21B-79025-60000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 439 Grand Dr		Amount of Each Disbursement this Period 17.71
City Big Fork State MT Zip Code 59911	[MEMO ITEM]	
Purpose of Disbursement Deliveries Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

A. Latin King Full Name (Last, First, Middle Initial) Mailing Address 2200 Hubbell Ave City Des Moines State IA Zip Code 50317 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79025-70000 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 50.00 [MEMO ITEM]
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B. Embassy Suites Full Name (Last, First, Middle Initial) Mailing Address 101 E Locust St City Des Moines State IA Zip Code 50309 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79025-80000 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 43.00 [MEMO ITEM]
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C. Renaissance Full Name (Last, First, Middle Initial) Mailing Address 401 Locust St City Des Moines State IA Zip Code 50309 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79025-90000 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 20.00 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
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<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)
EMILY's List

A. Renaissance Full Name (Last, First, Middle Initial) Renaissance Mailing Address 401 Locust St City Des Moines State IA Zip Code 50309 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79025-100000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 20.00 [MEMO ITEM]
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B. Firecreek Full Name (Last, First, Middle Initial) Firecreek Mailing Address 800 South 50th Street City West Des Moines State IA Zip Code 50266 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79025-110000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 68.00 [MEMO ITEM]
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C. Renaissance Full Name (Last, First, Middle Initial) Renaissance Mailing Address 401 Locust St City Des Moines State IA Zip Code 50309 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79025-120000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 199.36 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
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<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)
EMILY's List

A. Renaissance Full Name (Last, First, Middle Initial) Renaissance Mailing Address 401 Locust St City Des Moines State IA Zip Code 50309 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79025-130000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 18.97 [MEMO ITEM]
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B. Renaissance Full Name (Last, First, Middle Initial) Renaissance Mailing Address 401 Locust St City Des Moines State IA Zip Code 50309 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79025-140000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 24.49 [MEMO ITEM]
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C. Embassy Suites Full Name (Last, First, Middle Initial) Embassy Suites Mailing Address 101 E Locust St City Des Moines State IA Zip Code 50309 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79025-150000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 144.48 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
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<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)
EMILY's List

A. RPS Full Name (Last, First, Middle Initial) Mailing Address 128 W Main City Missoula State IA Zip Code 59802 Purpose of Disbursement Deliveries Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79025-160000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 26.00 [MEMO ITEM]
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B. Wyndham City Center Full Name (Last, First, Middle Initial) Mailing Address 1143 New Hampshire Ave NW City Washington State DC Zip Code 20037 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79027-10000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 16.00 [MEMO ITEM]
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C. Wayport Full Name (Last, First, Middle Initial) Mailing Address 4509 Freidrich Lane City Austin State TX Zip Code 78744 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79027-20000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 9.95 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ► 0.00

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 Page

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(check only one)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Wyndham City Center		Transaction ID: SB21B-79027-30000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 1143 New Hampshire Ave NW		Amount of Each Disbursement this Period 16.00
City Washington State DC Zip Code 20037	[MEMO ITEM]	
Purpose of Disbursement Travel/ Accommodations Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Dunkin Donuts		Transaction ID: SB21B-79027-40000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 9328 Georgia Ave		Amount of Each Disbursement this Period 9.43
City Silver Spring State MD Zip Code 20910	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Northwest Airlines		Transaction ID: SB21B-79027-50000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 7500 Airline Drive		Amount of Each Disbursement this Period 298.41
City Minneapolis State MN Zip Code 55450	[MEMO ITEM]	
Purpose of Disbursement Travel/ Accommodations Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
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<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)
EMILY's List

A. Amtrak Full Name (Last, First, Middle Initial) Mailing Address 60 Mass Ave NE City Washington State DC Zip Code 20002 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79027-70000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 166.00 [MEMO ITEM]
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B. Starbucks Full Name (Last, First, Middle Initial) Mailing Address 1734 L St NW City Washington State DC Zip Code 20036 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79027-80000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 6.60 [MEMO ITEM]
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C. Wayport Full Name (Last, First, Middle Initial) Mailing Address 4509 Freidrich Lane City Austin State TX Zip Code 78744 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79027-90000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 9.95 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Wyndham City Center		Transaction ID: SB21B-79027-100000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 1143 New Hampshire Ave NW		Amount of Each Disbursement this Period 16.00 [MEMO ITEM]
City Washington State DC Zip Code 20037		
Purpose of Disbursement Travel/ Accommodations Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Au Bon Pain		Transaction ID: SB21B-79027-110000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 1732 L Street NW		Amount of Each Disbursement this Period 14.45 [MEMO ITEM]
City Washington State DC Zip Code 20036		
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Au Bon Pain		Transaction ID: SB21B-79027-120000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 1732 L Street NW		Amount of Each Disbursement this Period 2.18 [MEMO ITEM]
City Washington State DC Zip Code 20036		
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Au Bon Pain		Transaction ID: SB21B-79027-130000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 1732 L Street NW		Amount of Each Disbursement this Period 4.78
City Washington State DC Zip Code 20036	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Au Bon Pain		Transaction ID: SB21B-79027-140000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 1732 L Street NW		Amount of Each Disbursement this Period 13.91
City Washington State DC Zip Code 20036	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Staples		Transaction ID: SB21B-79027-150000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address Potomac Yard		Amount of Each Disbursement this Period 48.66
City Alexandria State VA Zip Code 22303	[MEMO ITEM]	
Purpose of Disbursement Office Supplies Expenses Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<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)
EMILY's List

A. Borders Books Full Name (Last, First, Middle Initial) Mailing Address 1800 L Street NW City Washington State DC Zip Code 20036 Purpose of Disbursement Office Supplies Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79027-160000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 21.10 [MEMO ITEM]
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B. Daily Grill Full Name (Last, First, Middle Initial) Mailing Address 1200 18th St NW City Washington State DC Zip Code 20036 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79027-170000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 51.73 [MEMO ITEM]
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C. Cendant Full Name (Last, First, Middle Initial) Mailing Address 200 S Wacker Dr City Chicago State IL Zip Code 60606 Purpose of Disbursement Travel/ Accommodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79027-200000 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 5.99 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. La loma		Transaction ID: SB21B-79029-10000 Date of Disbursement 10 / 13 / 2005
Mailing Address 316 Massachusetts Ave NE		Amount of Each Disbursement this Period 44.70
City Washington State DC Zip Code 20002	Purpose of Disbursement Travel/Accommodation /Meals Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. National Press		Transaction ID: SB21B-79030-10000 Date of Disbursement 10 / 13 / 2005
Mailing Address 529 14th St NW # 13		Amount of Each Disbursement this Period 414.72
City Washington State DC Zip Code 20045	Purpose of Disbursement Catering/Facilities Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Wyndham City Center		Transaction ID: SB21B-79031-10000 Date of Disbursement 10 / 13 / 2005
Mailing Address 1143 New Hampshire Ave NW		Amount of Each Disbursement this Period 16.00
City Washington State DC Zip Code 20037	Purpose of Disbursement Catering/Facilities Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

<p>A. Costo Wholesale</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 1200 S Fern St</p> <p>City Arlington State VA Zip Code 22202</p> <p>Purpose of Disbursement Catering/Facilities</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-79031-20000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="75.26"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>B. Exxon Mobil</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 2410 Lee Hwy</p> <p>City Arlington State VA Zip Code 22211</p> <p>Purpose of Disbursement Travel/ Accommodations</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-79031-30000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="24.98"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>C. Wyndham City Center</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 1143 New Hampshire Ave NW</p> <p>City Washington State DC Zip Code 20037</p> <p>Purpose of Disbursement Travel/ Accommodations</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-79032-10000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="54.04"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="0.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mackeys		Transaction ID: SB21B-79032-20000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 1823 L Street NW		Amount of Each Disbursement this Period 134.42
City Washington State DC Zip Code 20036	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Cosi		Transaction ID: SB21B-79032-30000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 1875 K Street NW		Amount of Each Disbursement this Period 165.79
City Washington State DC Zip Code 20036	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Georgia Brown		Transaction ID: SB21B-79038-10000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 805 15th St NW		Amount of Each Disbursement this Period 87.15
City Washington State DC Zip Code 20005	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

A. Georgia Brown Full Name (Last, First, Middle Initial) Mailing Address 805 15th St NW City Washington State DC Zip Code 20005 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79038-20000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 9.98 [MEMO ITEM]
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B. Harris Teeter Full Name (Last, First, Middle Initial) Mailing Address 600 N Glebe Rd City Arlington State VA Zip Code 22203 Purpose of Disbursement Office Supplies Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79039-10000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 29.80 [MEMO ITEM]
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C. Borders Books Full Name (Last, First, Middle Initial) Mailing Address 1800 L Street NW City Washington State DC Zip Code 20036 Purpose of Disbursement Office Supplies Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-79040-10000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 27.38 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Stop & Shop		Transaction ID: SB21B-79041-10000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 1790 Post Rd E		Amount of Each Disbursement this Period 14.15
City Westport State CT Zip Code 06880	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Shaw's Market		Transaction ID: SB21B-79041-20000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 150 Whalley Ave		Amount of Each Disbursement this Period 30.05
City New Haven State CT Zip Code 06880	[MEMO ITEM]	
Purpose of Disbursement Office Supplies Expenses Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Westport Inn		Transaction ID: SB21B-79041-30000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 1595 Post Rd E		Amount of Each Disbursement this Period 200.48
City Westport State CT Zip Code 06880	[MEMO ITEM]	
Purpose of Disbursement Travel/ Accommodations Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 330 / 1975

<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)
EMILY's List

<p>A. Enterprise Rent A Car</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 12 Ella Grasso Tpke</p> <p>City Windsor Locks State CT Zip Code 06096</p> <p>Purpose of Disbursement Travel/ Accommodations</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-79041-40000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="231.73"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/ Type</p>

<p>B. La Piazza</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 65 Broadway</p> <p>City New Haven State CT Zip Code 06511</p> <p>Purpose of Disbursement Travel/Accommodation /Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-79041-50000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="24.00"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/ Type</p>

<p>C. Residence Inn</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 3 Long Wharf Dr</p> <p>City New Haven State CT Zip Code 06511</p> <p>Purpose of Disbursement Travel/ Accommodations</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-79041-60000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="221.76"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/ Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="0.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Surveymonkey.com		Transaction ID: SB21B-79048-10000 Date of Disbursement 10 / 13 / 2005
Mailing Address 125 N Hamilton		Amount of Each Disbursement this Period 19.95
City Madison State WI Zip Code 53703	Purpose of Disbursement Internet Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Surveymonkey.com		Transaction ID: SB21B-79048-20000 Date of Disbursement 10 / 13 / 2005
Mailing Address 125 N Hamilton		Amount of Each Disbursement this Period 119.20
City Madison State WI Zip Code 53703	Purpose of Disbursement Internet Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Network Solutions		Transaction ID: SB21B-79048-30000 Date of Disbursement 10 / 13 / 2005
Mailing Address 13200 Woodland Park		Amount of Each Disbursement this Period 54.99
City Herndon State VA Zip Code 20171	Purpose of Disbursement Internet Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 332 / 1975

<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)
EMILY's List

<p>A. America West</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 4000 Sky Harbor Drive</p> <p>City Phoenix State AZ Zip Code 85034</p> <p>Purpose of Disbursement Travel/ Accommodations</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-79048-70000</p> <p>Date of Disbursement</p> <p><input type="text" value="10"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="05"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="238.80"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>B. Google Adwords</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 2400 Bayshore Pkwy</p> <p>City Mountain View State CA Zip Code 94043</p> <p>Purpose of Disbursement Internet Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-79048-80000</p> <p>Date of Disbursement</p> <p><input type="text" value="10"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="05"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="162.52"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>C. Staples</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 300 California St</p> <p>City San Francisco State CA Zip Code 94104</p> <p>Purpose of Disbursement Office Supplies Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-79443-10000</p> <p>Date of Disbursement</p> <p><input type="text" value="10"/> <input type="text" value="20"/> / <input type="text" value="20"/> <input type="text" value="05"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="27.37"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="0.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**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)

PAGE 333 / 1975

<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
US Post Office

Mailing Address 150 Sutter Street

City San Francisco State CA Zip Code 94102

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB21B-79444-10000
Date of Disbursement

^M 1	^M 0	/	^D 2	^D 0	/	^Y 2	^Y 0	^Y 0	^Y 5
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Amount of Each Disbursement this Period

48.82

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

291785.63

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean for Congress		Transaction ID: SB23-79900 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address Otis Gray 392 Cecilia Drive		Amount of Each Disbursement this Period 200.00
City Memphis	State TN	
Zip Code 38117		Category/ Type
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. Melissa Bean for Congress		Transaction ID: SB23-79901 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address Edward Caress 6538 Bay Tree Ct		Amount of Each Disbursement this Period 50.00
City Falls Church	State VA	
Zip Code 22041		Category/ Type
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. Melissa Bean for Congress		Transaction ID: SB23-79902 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address Shirley Boscov PO Box 3725		Amount of Each Disbursement this Period 25.00
City Reading	State PA	
Zip Code 19606		Category/ Type
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶	275.00
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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean for Congress		Transaction ID: SB23-79903 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address Jaqueline Evangelista 7105 Bridlewood Drive		Amount of Each Disbursement this Period 50.00
City Painesville	State OH	
Zip Code 44077		Category/ Type
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. Melissa Bean for Congress		Transaction ID: SB23-79904 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address Nancy Little 1722 Makiki St Apt 102		Amount of Each Disbursement this Period 25.00
City Honolulu	State HI	
Zip Code 96822		Category/ Type
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. Melissa Bean for Congress		Transaction ID: SB23-79905 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address Carolyn Swift 50 Armstrong Avenue		Amount of Each Disbursement this Period 21.50
City Providence	State RI	
Zip Code 02903		Category/ Type
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶	96.50
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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean for Congress		Transaction ID: SB23-79906 Date of Disbursement 10 / 14 / 2005
Mailing Address Carol Gionti 1349 N. McLean Blvd.		Amount of Each Disbursement this Period 25.00
City Wichita State KS Zip Code 67203	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) B. Melissa Bean for Congress		Transaction ID: SB23-79907 Date of Disbursement 10 / 14 / 2005
Mailing Address Charles Braubern 1413 Forrester Drive		Amount of Each Disbursement this Period 10.00
City Oregon State OH Zip Code 43616	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) C. Kathy Castor for Congress		Transaction ID: SB23-79912 Date of Disbursement 10 / 14 / 2005
Mailing Address Shirley Boscov PO Box 3725		Amount of Each Disbursement this Period 25.00
City Reading State PA Zip Code 19606	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	60.00
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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor for Congress Full Name (Last, First, Middle Initial) Mailing Address: Carolyn Breaks 25303 Ludwell City: Chapel Hill State: NC Zip Code: 27517 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23-79913 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 25.00 Category/Type: _____
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B. Kathy Castor for Congress Full Name (Last, First, Middle Initial) Mailing Address: Polly Longworth PO Box 567 City: Athol State: MA Zip Code: 01331 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23-79914 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 100.00 Category/Type: _____
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C. Kathy Castor for Congress Full Name (Last, First, Middle Initial) Mailing Address: Leslie Lieberman 2853 Aloma Oaks Drive City: Oviedo State: FL Zip Code: 32765 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23-79915 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 25.00 Category/Type: _____
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor for Congress Full Name (Last, First, Middle Initial) Mailing Address: Linda MacCracken 7814 126th Avenue SE City: Renton State: WA Zip Code: 98056 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23-79916 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 250.00
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B. Kathy Castor for Congress Full Name (Last, First, Middle Initial) Mailing Address: Nancy Little 1722 Makiki St Apt 102 City: Honolulu State: HI Zip Code: 96822 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23-79917 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 25.00
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C. Kathy Castor for Congress Full Name (Last, First, Middle Initial) Mailing Address: Alice Darilek 8 Gavilan Road City: Santa Fe State: NM Zip Code: 87508 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23-79918 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 50.00
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SUBTOTAL of Disbursements This Page (optional) ▶	325.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Kathy Castor for Congress		Transaction ID: SB23-79919 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address Carolyn Swift 50 Armstrong Avenue		Amount of Each Disbursement this Period 21.50
City Providence	State RI	
Zip Code 02903		Category/ Type
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Kathy Castor for Congress		Transaction ID: SB23-79920 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address Julie Martinez 3211 Singinwood Drive		Amount of Each Disbursement this Period 40.00
City Torrance	State CA	
Zip Code 90505		Category/ Type
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Kathy Castor for Congress		Transaction ID: SB23-79921 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address Carol Gionti 1349 N. McLean Blvd.		Amount of Each Disbursement this Period 25.00
City Wichita	State KS	
Zip Code 67203		Category/ Type
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	86.50
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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Kathy Castor for Congress		Transaction ID: SB23-79922 Date of Disbursement 10 / 14 / 2005
Mailing Address Judith Rosenberg 26 Pine Cedar Drive		Amount of Each Disbursement this Period 25.00
City Palm Coast State FL Zip Code 32164	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Kathy Castor for Congress		Transaction ID: SB23-79923 Date of Disbursement 10 / 14 / 2005
Mailing Address Cappy Longstreth 7410 NW 131st Street Rockin Farms		Amount of Each Disbursement this Period 50.00
City Gainesville State FL Zip Code 32653	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Kathy Castor for Congress		Transaction ID: SB23-79924 Date of Disbursement 10 / 14 / 2005
Mailing Address Charles Braubern 1413 Forrester Drive		Amount of Each Disbursement this Period 10.00
City Oregon State OH Zip Code 43616	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	85.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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)

PAGE 341 / 1975

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Kathy Castor for Congress</p> <p>Full Name (Last, First, Middle Initial) Kathy Castor for Congress</p> <p>Mailing Address Elizabeth Jones 12269 Harbor Town Circle</p> <p>City State Zip Code Fairfax VA 22033</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p>Transaction ID: SB23-79925 Date of Disbursement 10 / 14 / 2005</p> <p>Amount of Each Disbursement this Period 25.00</p>
<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/ Type</p>

<p>B. Kathy Castor for Congress</p> <p>Full Name (Last, First, Middle Initial) Kathy Castor for Congress</p> <p>Mailing Address Regina Scheiding 1806 Cole Avenue, Apt. 4A</p> <p>City State Zip Code Walnut Creek CA 94596</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p>Transaction ID: SB23-79926 Date of Disbursement 10 / 14 / 2005</p> <p>Amount of Each Disbursement this Period 25.00</p>
<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/ Type</p>

<p>C. Cantwell 2006</p> <p>Full Name (Last, First, Middle Initial) Cantwell 2006</p> <p>Mailing Address Linda Agerter 51 Parkside Drive</p> <p>City State Zip Code Berkeley CA 94705</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p>Transaction ID: SB23-79927 Date of Disbursement 10 / 14 / 2005</p> <p>Amount of Each Disbursement this Period 200.00</p>
<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/ Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>250.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

**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 checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Cantwell 2006		Transaction ID: SB23-79928 Date of Disbursement 10 / 14 / 2005
Mailing Address Marion Buzzard 4076 Bernice Drive		Amount of Each Disbursement this Period 25.00
City San Diego	State CA	
Zip Code 92107		Category/ Type
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. Cantwell 2006		Transaction ID: SB23-79929 Date of Disbursement 10 / 14 / 2005
Mailing Address Rosalyne Reynolds 1460 Arona Dr		Amount of Each Disbursement this Period 50.00
City Sparks	State NV	
Zip Code 89434		Category/ Type
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. Cantwell 2006		Transaction ID: SB23-79930 Date of Disbursement 10 / 14 / 2005
Mailing Address Shirley Boscov PO Box 3725		Amount of Each Disbursement this Period 25.00
City Reading	State PA	
Zip Code 19606		Category/ Type
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶	100.00
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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Cantwell 2006		Transaction ID: SB23-79931 Date of Disbursement 10 / 14 / 2005
Mailing Address Polly Longworth PO Box 567		Amount of Each Disbursement this Period 100.00
City Athol State MA Zip Code 01331	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Cantwell 2006		Transaction ID: SB23-79932 Date of Disbursement 10 / 14 / 2005
Mailing Address David Hayden PO Box 478		Amount of Each Disbursement this Period 200.00
City Crosswicks State NJ Zip Code 08515	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Cantwell 2006		Transaction ID: SB23-79933 Date of Disbursement 10 / 14 / 2005
Mailing Address Jaqueline Evangelista 7105 Bridlewood Drive		Amount of Each Disbursement this Period 100.00
City Painesville State OH Zip Code 44077	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	400.00
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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Cantwell 2006		Transaction ID: SB23-79934 Date of Disbursement 10 / 14 / 2005
Mailing Address Astrida Onat 2001 E. Lynn Street		Amount of Each Disbursement this Period 50.00
City Seattle State WA Zip Code 98112	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Cantwell 2006		Transaction ID: SB23-79935 Date of Disbursement 10 / 14 / 2005
Mailing Address Jennifer Percy 4 Chase Street # 2		Amount of Each Disbursement this Period 25.00
City Salem State MA Zip Code 01970	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Cantwell 2006		Transaction ID: SB23-79936 Date of Disbursement 10 / 14 / 2005
Mailing Address Leslie Lieberman 2853 Aloma Oaks Drive		Amount of Each Disbursement this Period 10.00
City Oviedo State FL Zip Code 32765	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	85.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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 checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Cantwell 2006		Transaction ID: SB23-79937 Date of Disbursement 10 / 14 / 2005
Mailing Address Linda MacCracken 7814 126th Avenue SE		Amount of Each Disbursement this Period 250.00
City Renton	State WA	
Zip Code 98056		Category/ Type
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. Cantwell 2006		Transaction ID: SB23-79938 Date of Disbursement 10 / 14 / 2005
Mailing Address Nancy Little 1722 Makiki St Apt 102		Amount of Each Disbursement this Period 25.00
City Honolulu	State HI	
Zip Code 96822		Category/ Type
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. Cantwell 2006		Transaction ID: SB23-79939 Date of Disbursement 10 / 14 / 2005
Mailing Address Carolyn Swift 50 Armstrong Avenue		Amount of Each Disbursement this Period 21.50
City Providence	State RI	
Zip Code 02903		Category/ Type
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶	296.50
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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Cantwell 2006		Transaction ID: SB23-79940 Date of Disbursement 10 / 14 / 2005
Mailing Address Carol Gionti 1349 N. McLean Blvd.		Amount of Each Disbursement this Period 25.00
City Wichita State KS Zip Code 67203	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Cantwell 2006		Transaction ID: SB23-79941 Date of Disbursement 10 / 14 / 2005
Mailing Address Maria Geiselhart 137 Lakeshore Drive		Amount of Each Disbursement this Period 25.00
City Oakland State NJ Zip Code 07436	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Cantwell 2006		Transaction ID: SB23-79942 Date of Disbursement 10 / 14 / 2005
Mailing Address Sylvia Keating 14250 Woodcreek Road		Amount of Each Disbursement this Period 10.00
City Poway State CA Zip Code 92064	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	60.00
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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Cantwell 2006		Transaction ID: SB23-79943 Date of Disbursement 10 / 14 / 2005
Mailing Address Christina Keppel 5236 W Parkview Drive		Amount of Each Disbursement this Period 50.00
City Mequon	State WI	
Zip Code 53092		Category/ Type
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) B. Cantwell 2006		Transaction ID: SB23-79944 Date of Disbursement 10 / 14 / 2005
Mailing Address Lakshmi Mizin 120 Sirkler Pond Rd.		Amount of Each Disbursement this Period 50.00
City Jermyn	State PA	
Zip Code 18433		Category/ Type
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) C. Lois Murphy for Congress		Transaction ID: SB23-79945 Date of Disbursement 10 / 14 / 2005
Mailing Address Mary Hopkins 1 Towers Park Lane, Apt. 2016		Amount of Each Disbursement this Period 250.00
City San Antonio	State TX	
Zip Code 78209		Category/ Type
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	350.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Lois Murphy for Congress		Transaction ID: SB23-79946 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address Vera Williams 88 Jane Street		Amount of Each Disbursement this Period 50.00
City New York State NY Zip Code 10014	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Lois Murphy for Congress		Transaction ID: SB23-79947 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address Carolyn Breaks 25303 Ludwell		Amount of Each Disbursement this Period 25.00
City Chapel Hill State NC Zip Code 27517	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Lois Murphy for Congress		Transaction ID: SB23-79948 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address Polly Longworth PO Box 567		Amount of Each Disbursement this Period 100.00
City Athol State MA Zip Code 01331	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	175.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy for Congress		Transaction ID: SB23-79949 Date of Disbursement 10 / 14 / 2005
Mailing Address Barbara Shuta 210 Cavalier Drive		Amount of Each Disbursement this Period 50.00
City Dickson City	State PA	
Zip Code 18519		Category/ Type
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. Lois Murphy for Congress		Transaction ID: SB23-79950 Date of Disbursement 10 / 14 / 2005
Mailing Address Nancy Little 1722 Makiki St Apt 102		Amount of Each Disbursement this Period 25.00
City Honolulu	State HI	
Zip Code 96822		Category/ Type
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. Lois Murphy for Congress		Transaction ID: SB23-79951 Date of Disbursement 10 / 14 / 2005
Mailing Address Carolyn Swift 50 Armstrong Avenue		Amount of Each Disbursement this Period 21.50
City Providence	State RI	
Zip Code 02903		Category/ Type
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶	96.50
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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lois Murphy for Congress Full Name (Last, First, Middle Initial) Carol Gionti 1349 N. McLean Blvd. Mailing Address City: Wichita State: KS Zip Code: 67203 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____		Transaction ID: SB23-79952 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 25.00 Category/Type: _____
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B. Lois Murphy for Congress Full Name (Last, First, Middle Initial) Maria Geiselhart 137 Lakeshore Drive Mailing Address City: Oakland State: NJ Zip Code: 07436 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____		Transaction ID: SB23-79953 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 25.00 Category/Type: _____
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C. Lois Murphy for Congress Full Name (Last, First, Middle Initial) Charles Braubern 1413 Forrester Drive Mailing Address City: Oregon State: OH Zip Code: 43616 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____		Transaction ID: SB23-79954 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 10.00 Category/Type: _____
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SUBTOTAL of Disbursements This Page (optional) ▶	60.00
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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy for Congress		Transaction ID: SB23-79955 Date of Disbursement 10 / 14 / 2005
Mailing Address Lakshmi Mizin 120 Sirkler Pond Rd.		Amount of Each Disbursement this Period 50.00
City Jermyn State PA Zip Code 18433	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) B. Schwartz for Congress		Transaction ID: SB23-79956 Date of Disbursement 10 / 14 / 2005
Mailing Address Edward Caress 6538 Bay Tree Ct		Amount of Each Disbursement this Period 50.00
City Falls Church State VA Zip Code 22041	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) C. Woolsey for Congress		Transaction ID: SB23-79957 Date of Disbursement 10 / 14 / 2005
Mailing Address Marion Buzzard 4076 Bernice Drive		Amount of Each Disbursement this Period 25.00
City San Diego State CA Zip Code 92107	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	125.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Woolsey for Congress		Transaction ID: SB23-79958 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address Rosalyne Reynolds 1460 Arona Dr		Amount of Each Disbursement this Period 50.00
City Sparks State NV Zip Code 89434	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Woolsey for Congress		Transaction ID: SB23-79959 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address Vera Williams 88 Jane Street		Amount of Each Disbursement this Period 50.00
City New York State NY Zip Code 10014	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Woolsey for Congress		Transaction ID: SB23-79960 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address Shirley Boscov PO Box 3725		Amount of Each Disbursement this Period 25.00
City Reading State PA Zip Code 19606	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	125.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Woolsey for Congress		Transaction ID: SB23-79961 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address Nancy Little 1722 Makiki St Apt 102		Amount of Each Disbursement this Period 25.00
City Honolulu State HI Zip Code 96822	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Woolsey for Congress		Transaction ID: SB23-79962 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address Alice Darilek 8 Gavilan Road		Amount of Each Disbursement this Period 50.00
City Santa Fe State NM Zip Code 87508	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Woolsey for Congress		Transaction ID: SB23-79963 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address Carolyn Swift 50 Armstrong Avenue		Amount of Each Disbursement this Period 21.50
City Providence State RI Zip Code 02903	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	96.50
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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Woolsey for Congress		Transaction ID: SB23-79964 Date of Disbursement 10 / 14 / 2005
Mailing Address David Gill 7108 Larrlyn Drive		Amount of Each Disbursement this Period 50.00
City Springfield State VA Zip Code 22151	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Woolsey for Congress		Transaction ID: SB23-79965 Date of Disbursement 10 / 14 / 2005
Mailing Address Carol Gionti 1349 N. McLean Blvd.		Amount of Each Disbursement this Period 25.00
City Wichita State KS Zip Code 67203	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Woolsey for Congress		Transaction ID: SB23-79966 Date of Disbursement 10 / 14 / 2005
Mailing Address Alfred Zielske 2282 Via Espada		Amount of Each Disbursement this Period 100.00
City Pleasanton State CA Zip Code 94566	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	175.00
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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Woolsey for Congress		Transaction ID: SB23-79967 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address Charles Braubern 1413 Forrester Drive		Amount of Each Disbursement this Period 10.00
City Oregon State OH Zip Code 43616	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) B. Woolsey for Congress		Transaction ID: SB23-79968 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address Elizabeth Jones 12269 Harbor Town Circle		Amount of Each Disbursement this Period 25.00
City Fairfax State VA Zip Code 22033	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) C. Woolsey for Congress		Transaction ID: SB23-79969 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address Regina Scheiding 1806 Cole Avenue, Apt. 4A		Amount of Each Disbursement this Period 25.00
City Walnut Creek State CA Zip Code 94596	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	60.00
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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Annika Rosenblatt		Transaction ID: SB23-78946 Date of Disbursement 10 / 14 / 2005	
Mailing Address 20 Elton St		Amount of Each Disbursement this Period 1266.72	
City Providence State RI Zip Code 02906	Purpose of Disbursement In-Kind Campaign Consultants	Category/ Type	
Candidate Name RI Dem State Party	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Trevor Hanger		Transaction ID: SB23-78950 Date of Disbursement 10 / 14 / 2005	
Mailing Address 2323 N Field St #1647		Amount of Each Disbursement this Period 1266.72	
City Dallas State TX Zip Code 75201	Purpose of Disbursement In-Kind Campaign Consultants	Category/ Type	
Candidate Name Yvette Clark	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NY District: 11	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Annika Rosenblatt		Transaction ID: SB23-79445 Date of Disbursement 10 / 20 / 2005	
Mailing Address 20 Elton St		Amount of Each Disbursement this Period 82.00	
City Providence State RI Zip Code 02906	Purpose of Disbursement In-Kind Health Insurance	Category/ Type	
Candidate Name RI Dem State Party	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	2615.44
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean for Congress		Transaction ID: SB23-79908 Date of Disbursement 10 / 24 / 2005
Mailing Address Janet Dolan 82 Chestnut St.		Amount of Each Disbursement this Period 100.00
City Boston State MA Zip Code 02108	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Melissa Bean for Congress		Transaction ID: SB23-79909 Date of Disbursement 10 / 24 / 2005
Mailing Address Lois Self 252 Charles Street		Amount of Each Disbursement this Period 50.00
City Sycamore State IL Zip Code 60178	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Melissa Bean for Congress		Transaction ID: SB23-79910 Date of Disbursement 10 / 24 / 2005
Mailing Address Philip Itzkow 119 Eileen Street		Amount of Each Disbursement this Period 5.00
City Albany State NY Zip Code 12203	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	155.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean for Congress		Transaction ID: SB23-79911 Date of Disbursement 10 / 24 / 2005
Mailing Address Norborn Felton 1440 Bent Drive		Amount of Each Disbursement this Period 100.00
City Campbell State CA Zip Code 95008	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Kathy Castor for Congress		Transaction ID: SB23-79970 Date of Disbursement 10 / 24 / 2005
Mailing Address Catherine Claman 109 Glen Avenue		Amount of Each Disbursement this Period 25.00
City Millburn State NJ Zip Code 07041	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Kathy Castor for Congress		Transaction ID: SB23-79971 Date of Disbursement 10 / 24 / 2005
Mailing Address Ariens Grabbe 3879 Lurline Drive		Amount of Each Disbursement this Period 25.00
City Honolulu State HI Zip Code 96816	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor for Congress Full Name (Last, First, Middle Initial) Mailing Address Philip Itzkow 119 Eileen Street City Albany State NY Zip Code 12203 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: SB23-79972 Date of Disbursement 10 / 24 / 2005 Amount of Each Disbursement this Period 5.00 Category/Type
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B. Kathy Castor for Congress Full Name (Last, First, Middle Initial) Mailing Address Norborn Felton 1440 Bent Drive City Campbell State CA Zip Code 95008 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: SB23-79973 Date of Disbursement 10 / 24 / 2005 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Cantwell 2006 Full Name (Last, First, Middle Initial) Mailing Address Janet Dolan 82 Chestnut St. City Boston State MA Zip Code 02108 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: SB23-79974 Date of Disbursement 10 / 24 / 2005 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	205.00
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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Cantwell 2006		Transaction ID: SB23-79975 Date of Disbursement 10 / 24 / 2005
Mailing Address Jenny Gumpertz PO Box 1081		Amount of Each Disbursement this Period 10.00
City Palm Desert State CA Zip Code 92261	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Cantwell 2006		Transaction ID: SB23-79976 Date of Disbursement 10 / 24 / 2005
Mailing Address Sylvia Johnson 2111 Davis Drive		Amount of Each Disbursement this Period 100.00
City Burlingame State CA Zip Code 94010	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Cantwell 2006		Transaction ID: SB23-79977 Date of Disbursement 10 / 24 / 2005
Mailing Address Pamela Benson 5359 Nevada Avenue NW		Amount of Each Disbursement this Period 100.00
City Washington State DC Zip Code 20015	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	210.00
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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Cantwell 2006 Full Name (Last, First, Middle Initial) Mailing Address: Madeline Caton 5905D Clark Road, Apt. 174 City: Paradise State: CA Zip Code: 95969 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23-79978 Date of Disbursement 10 / 24 / 2005 Amount of Each Disbursement this Period 100.00
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B. Cantwell 2006 Full Name (Last, First, Middle Initial) Mailing Address: Lois Tarter 210 E. 39th Street City: New York State: NY Zip Code: 10016 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23-79979 Date of Disbursement 10 / 24 / 2005 Amount of Each Disbursement this Period 250.00
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C. Cantwell 2006 Full Name (Last, First, Middle Initial) Mailing Address: Philip Itzkow 119 Eileen Street City: Albany State: NY Zip Code: 12203 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23-79980 Date of Disbursement 10 / 24 / 2005 Amount of Each Disbursement this Period 5.00
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SUBTOTAL of Disbursements This Page (optional) ▶	355.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Cantwell 2006 Full Name (Last, First, Middle Initial) Mailing Address: Norborn Felton 1440 Bent Drive City: Campbell State: CA Zip Code: 95008 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23-79981 Date of Disbursement 10 / 24 / 2005 Amount of Each Disbursement this Period 100.00
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B. Cantwell 2006 Full Name (Last, First, Middle Initial) Mailing Address: Harriet Williams 2701 Pickett Road, Apt. 2007 City: Durham State: NC Zip Code: 27705 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23-79982 Date of Disbursement 10 / 24 / 2005 Amount of Each Disbursement this Period 100.00
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C. Cantwell 2006 Full Name (Last, First, Middle Initial) Mailing Address: Patricia Clark 4915 Whitfield Road City: Durham State: NC Zip Code: 27707 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23-79983 Date of Disbursement 10 / 24 / 2005 Amount of Each Disbursement this Period 50.00
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SUBTOTAL of Disbursements This Page (optional) ▶	250.00
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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Cantwell 2006		Transaction ID: SB23-79984 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 5
Mailing Address Kingsley Woodhead PO Box 31222		Amount of Each Disbursement this Period 50.00
City Seattle State WA Zip Code 98103	Category/ Type	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Cantwell 2006		Transaction ID: SB23-79985 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 5
Mailing Address Elysha Luken 820 Clark Road		Amount of Each Disbursement this Period 50.00
City Monticello State FL Zip Code 32344	Category/ Type	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Cantwell 2006		Transaction ID: SB23-79986 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 5
Mailing Address Chester Wisley PO Box 68		Amount of Each Disbursement this Period 10.00
City Forestville State NY Zip Code 14062	Category/ Type	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	110.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Cantwell 2006		Transaction ID: SB23-79987 Date of Disbursement 10 / 24 / 2005
Mailing Address Martha Dunn 1608 Kenzie Drive		Amount of Each Disbursement this Period 50.00
City Pittsburgh	State PA	
Zip Code 15205		Category/ Type
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. Cantwell 2006		Transaction ID: SB23-79988 Date of Disbursement 10 / 24 / 2005
Mailing Address Nancy Swartwout 350 Granby Road		Amount of Each Disbursement this Period 25.00
City South Hadley	State MA	
Zip Code 01075		Category/ Type
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. Cantwell 2006		Transaction ID: SB23-79989 Date of Disbursement 10 / 24 / 2005
Mailing Address Joanne Lonn 38312 83rd Avenue E.		Amount of Each Disbursement this Period 10.00
City Eatonville	State WA	
Zip Code 98328		Category/ Type
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶	85.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Lois Murphy for Congress		Transaction ID: SB23-79990 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 5
Mailing Address Janet Dolan 82 Chestnut St.		Amount of Each Disbursement this Period 100.00
City Boston State MA Zip Code 02108	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name <input type="checkbox"/> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Lois Murphy for Congress		Transaction ID: SB23-79991 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 5
Mailing Address Constance Dent 90 Smoketown Road		Amount of Each Disbursement this Period 100.00
City Mertztown State PA Zip Code 19539	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name <input type="checkbox"/> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Lois Murphy for Congress		Transaction ID: SB23-79992 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 5
Mailing Address Catherine Claman 109 Glen Avenue		Amount of Each Disbursement this Period 25.00
City Millburn State NJ Zip Code 07041	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name <input type="checkbox"/> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy for Congress		Transaction ID: SB23-79993 Date of Disbursement 10 / 24 / 2005
Mailing Address Philip Itzkow 119 Eileen Street		Amount of Each Disbursement this Period 5.00
City Albany State NY Zip Code 12203	Purpose of Disbursement Candidate Contrib Earmarked	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Lois Murphy for Congress		Transaction ID: SB23-79994 Date of Disbursement 10 / 24 / 2005
Mailing Address Norborn Felton 1440 Bent Drive		Amount of Each Disbursement this Period 100.00
City Campbell State CA Zip Code 95008	Purpose of Disbursement Candidate Contrib Earmarked	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Lois Murphy for Congress		Transaction ID: SB23-79995 Date of Disbursement 10 / 24 / 2005
Mailing Address Chester Wisley PO Box 68		Amount of Each Disbursement this Period 10.00
City Forestville State NY Zip Code 14062	Purpose of Disbursement Candidate Contrib Earmarked	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	115.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy for Congress		Transaction ID: SB23-79996 Date of Disbursement 10 / 24 / 2005
Mailing Address Martha Dunn 1608 Kenzie Drive		Amount of Each Disbursement this Period 50.00
City Pittsburgh State PA Zip Code 15205	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Woolsey for Congress		Transaction ID: SB23-79997 Date of Disbursement 10 / 24 / 2005
Mailing Address Alice Wilkerson 564 MacArthur Drive		Amount of Each Disbursement this Period 25.00
City Daly City State CA Zip Code 94015	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Woolsey for Congress		Transaction ID: SB23-79998 Date of Disbursement 10 / 24 / 2005
Mailing Address Arien Grabbe 3879 Lurline Drive		Amount of Each Disbursement this Period 25.00
City Honolulu State HI Zip Code 96816	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	100.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Woolsey for Congress		Transaction ID: SB23-79999 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 5
Mailing Address Philip Itzkow 119 Eileen Street		Amount of Each Disbursement this Period 5.00
City Albany State NY Zip Code 12203		
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Woolsey for Congress		Transaction ID: SB23-80000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 5
Mailing Address Norborn Felton 1440 Bent Drive		Amount of Each Disbursement this Period 100.00
City Campbell State CA Zip Code 95008		
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Allyson Schwartz Contributions		Transaction ID: 21835646 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address Andrew Carson PO Box 709		Amount of Each Disbursement this Period 25.00
City Wilson State WY Zip Code 83014		
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

[MEMO ITEM]
MEMO

SUBTOTAL of Disbursements This Page (optional) ▶

105.00

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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Allyson Schwartz Contributions		Transaction ID: 21835647 Date of Disbursement 10 / 31 / 2005
Mailing Address Joyce Waters 4046 Tenango Road		Amount of Each Disbursement this Period 100.00
City Claremont	State CA	
Zip Code 91711		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Allyson Schwartz Contributions		Transaction ID: 21835648 Date of Disbursement 10 / 14 / 2005
Mailing Address Mary Dimperio 4000 Cathedral Avenue NW		Amount of Each Disbursement this Period 100.00
City Washington	State DC	
Zip Code 20016		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Allyson Schwartz Contributions		Transaction ID: 21835649 Date of Disbursement 10 / 23 / 2005
Mailing Address Alicia Granor 1600 Hagys Ford Road, # 6F		Amount of Each Disbursement this Period 100.00
City Narberth	State PA	
Zip Code 19072		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Allyson Schwartz Contributions		Transaction ID: 21835650 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address Rhoda Weinstein 8060 E. Girard Avenue Apt. 709		Amount of Each Disbursement this Period 50.00
City Denver State CO Zip Code 80231	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Allyson Schwartz Contributions		Transaction ID: 21835651 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address Ruth Holland 24 Peacock Court		Amount of Each Disbursement this Period 500.00
City San Rafael State CA Zip Code 94901	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Allyson Schwartz Contributions		Transaction ID: 21835652 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address Valerie Block 50 Glenwood Rd		Amount of Each Disbursement this Period 250.00
City Montclair State NJ Zip Code 07043	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 371 / 1975

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Allyson Schwartz Contributions Full Name (Last, First, Middle Initial) Allyson Schwartz Contributions Mailing Address: Matthew Morris PO Box 9157 City: Aspen State: CO Zip Code: 81612 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835653 Date of Disbursement 10 / 28 / 2005 Amount of Each Disbursement this Period 5.00 [MEMO ITEM] MEMO
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B. Allyson Schwartz Contributions Full Name (Last, First, Middle Initial) Allyson Schwartz Contributions Mailing Address: Debra Metcalf 376 Farmhouse Ln City: Wind Gap State: PA Zip Code: 18091 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835654 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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C. Debbie Stabenow Contributions Full Name (Last, First, Middle Initial) Debbie Stabenow Contributions Mailing Address: Pamela Sutherland 2747 E. Third Street City: Tucson State: AZ Zip Code: 85716 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835655 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Debbie Stabenow Contributions Full Name (Last, First, Middle Initial) Mailing Address Jacqueline Spindler 1213 Q Street, NW City Washington State DC Zip Code 20009 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835656 Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Debbie Stabenow Contributions Full Name (Last, First, Middle Initial) Mailing Address Diane McCarthy 2831 Catalpa Circle City Ann Arbor State MI Zip Code 48108 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835657 Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Debbie Stabenow Contributions Full Name (Last, First, Middle Initial) Mailing Address Patricia Hoffman 202 Main Street City New Ipswich State NH Zip Code 03071 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835658 Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Debbie Stabenow Contributions Full Name (Last, First, Middle Initial) Debbie Stabenow Contributions Mailing Address Ruth Holland 24 Peacock Court City San Rafael State CA Zip Code 94901 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835659 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 500.00 [MEMO ITEM] MEMO
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B. Debbie Stabenow Contributions Full Name (Last, First, Middle Initial) Debbie Stabenow Contributions Mailing Address Barbara Berney 624 E 20th St Apt 1D City New York State NY Zip Code 10009 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835660 Date of Disbursement 10 / 05 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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C. Debbie Stabenow Contributions Full Name (Last, First, Middle Initial) Debbie Stabenow Contributions Mailing Address Terrence Tice 2488 S Columbine St City Denver State CO Zip Code 80210 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835661 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Debbie Stabenow Contributions Full Name (Last, First, Middle Initial) Mailing Address Carol Kuller 137 Great Barrington Road City West Stockbridge State MA Zip Code 01266 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835662 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Debbie Stabenow Contributions Full Name (Last, First, Middle Initial) Mailing Address Suzanne Sherman 3368 E Cook Road City Grand Blanc State MI Zip Code 48439 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835663 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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C. Debbie Stabenow Contributions Full Name (Last, First, Middle Initial) Mailing Address Andrew Carson PO Box 709 City Wilson State WY Zip Code 83014 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835664 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Debbie Stabenow Contributions Full Name (Last, First, Middle Initial) Mailing Address: Robert Brown 2315 Salem Village Road City: Parkville State: MD Zip Code: 21234 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835665 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5 Amount of Each Disbursement this Period 20.00 [MEMO ITEM] MEMO
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B. Debbie Stabenow Contributions Full Name (Last, First, Middle Initial) Mailing Address: Marilyn Reed 22501 130th Street City: Danville State: IA Zip Code: 52623 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835666 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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C. Debbie Stabenow Contributions Full Name (Last, First, Middle Initial) Mailing Address: Gustav Papanek 2 Mason Street City: Lexington State: MA Zip Code: 02421 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835667 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5 Amount of Each Disbursement this Period 200.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Debbie Stabenow Contributions		Transaction ID: 21835668 Date of Disbursement 10 / 12 / 2005
Mailing Address Adalyn Brugger 1973 Retreat Drive		Amount of Each Disbursement this Period 100.00
City Mechanicsville State VA Zip Code 23111	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Debbie Stabenow Contributions		Transaction ID: 21835669 Date of Disbursement 10 / 04 / 2005
Mailing Address M. Lannon 6728 Layton Court		Amount of Each Disbursement this Period 100.00
City Tallahassee State FL Zip Code 32317	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Debbie Stabenow Contributions		Transaction ID: 21835670 Date of Disbursement 10 / 14 / 2005
Mailing Address Edith Biondi 520 Haworth Avenue		Amount of Each Disbursement this Period 100.00
City Haworth State NJ Zip Code 07641	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Debbie Stabenow Contributions Full Name (Last, First, Middle Initial) Mailing Address: Marjorie Dearmont 101 Oak Crest Drive City: Bertram State: TX Zip Code: 78605 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835671 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Debbie Stabenow Contributions Full Name (Last, First, Middle Initial) Mailing Address: Claire Colman 2725 Endsleigh Drive City: Bloomfield State: MI Zip Code: 48301 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835672 Date of Disbursement 10 / 23 / 2005 Amount of Each Disbursement this Period 200.00 [MEMO ITEM] MEMO
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C. Debbie Stabenow Contributions Full Name (Last, First, Middle Initial) Mailing Address: Alice Armstrong 1002 140th Street E City: Tacoma State: WA Zip Code: 98445 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835673 Date of Disbursement 10 / 12 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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TOTAL This Period (last page this line number only) ▶	_____

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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Debbie Stabenow Contributions Full Name (Last, First, Middle Initial) Mailing Address Carol Oksala 5 Perth Place City Glenmoore State PA Zip Code 19343 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835674 Date of Disbursement 10 / 15 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Debbie Stabenow Contributions Full Name (Last, First, Middle Initial) Mailing Address Virginia King 1281 Bel Air Drive City Santa Barbara State CA Zip Code 93105 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835675 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Debbie Stabenow Contributions Full Name (Last, First, Middle Initial) Mailing Address Matthew Morris PO Box 9157 City Aspen State CO Zip Code 81612 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835676 Date of Disbursement 10 / 28 / 2005 Amount of Each Disbursement this Period 5.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Debbie Stabenow Contributions Full Name (Last, First, Middle Initial) Mailing Address: Elda Tate 814 W. College City: Marquette State: MI Zip Code: 49855 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835677 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Debbie Stabenow Contributions Full Name (Last, First, Middle Initial) Mailing Address: Adelle Lemon 1063 Cragmont City: Berkeley State: CA Zip Code: 94708 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835678 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address: Joan Kelley 720 NE 69th St Apt 17S City: Miami State: FL Zip Code: 33138 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835679 Date of Disbursement 10 / 25 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Thomas Leggat 81 Baker Bridge Road City Lincoln State MA Zip Code 01773 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835680 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Rhoda Weinstein 8060 E. Girard Avenue Apt. 709 City Denver State CO Zip Code 80231 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835681 Date of Disbursement 10 / 31 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Mary Nilsson 80 Woodbourne Lane City Ormond Beach State FL Zip Code 32174 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835682 Date of Disbursement 10 / 07 / 2005 Amount of Each Disbursement this Period 20.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address: Sheila Toabe Davis 7913 Vantage Avenue City: North Hollywood State: CA Zip Code: 91605 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835683 Date of Disbursement 10 / 25 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address: Joshua Rowan 3800 Lake Bayshore Dr Apt 101 City: Bradenton State: FL Zip Code: 34205 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835684 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address: Julie Peppard 1094 Palms Blvd City: Venice State: CA Zip Code: 90291 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835685 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Patricia Morton 266 Willowbrook Drive City North Brunswick State NJ Zip Code 08902 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835686 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Maggie Davidson 750 Pine Drive, Apt. 11 City Pompano Beach State FL Zip Code 33060 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835687 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Jane Curtis 7444 Spring Village Drive City Springfield State VA Zip Code 22150 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835688 Date of Disbursement 10 / 21 / 2005 Amount of Each Disbursement this Period 20.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions		Transaction ID: 21835689 Date of Disbursement 10 / 21 / 2005
Mailing Address: Renate Wasserman 102 Tonset Rd. City: Orleans State: MA Zip Code: 02653		Amount of Each Disbursement this Period 25.00
Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Category/Type: _____		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions		Transaction ID: 21835690 Date of Disbursement 10 / 05 / 2005
Mailing Address: Robbin Frazier 7345 France Avenue N. City: Minneapolis State: MN Zip Code: 55443		Amount of Each Disbursement this Period 50.00
Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Category/Type: _____		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions		Transaction ID: 21835691 Date of Disbursement 10 / 21 / 2005
Mailing Address: Jennifer Berlekamp 120 Hazel Lane City: Piedmont State: CA Zip Code: 94611		Amount of Each Disbursement this Period 500.00
Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Category/Type: _____		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions		Transaction ID: 21835692 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address Elizabeth Jackets 7306 Channel View Drive		Amount of Each Disbursement this Period 25.00
City Anacortes State WA Zip Code 98221	Purpose of Disbursement Candidate Contrib Earmarked	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions		Transaction ID: 21835693 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address Laurie Barenborg 4610 S. Bradford Street		Amount of Each Disbursement this Period 25.00
City Seattle State WA Zip Code 98118	Purpose of Disbursement Candidate Contrib Earmarked	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions		Transaction ID: 21835694 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address Sara Eoff 7205 NE 19th Avenue		Amount of Each Disbursement this Period 100.00
City Gainesville State FL Zip Code 32641	Purpose of Disbursement Candidate Contrib Earmarked	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Selene Levine 720 Milton Road City Rye State NY Zip Code 10580 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835695 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 15.00 [MEMO ITEM] MEMO
B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Barry Bennett 1521 W Fir Avenue City Fresno State CA Zip Code 93711 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835696 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Diane Farage 2541 Oakwood Dr. SE City East Grand Rapids State MI Zip Code 49506 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835697 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 200.00 [MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional)	0.00
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 Page

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address Yvette Rudnitzky 702 W. Matson Run Parkway City Wilmington State DE Zip Code 19802 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835698 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address Helen Rich 200 Leeder Hill Dr Apt 317 City Hamden State CT Zip Code 06517 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835699 Date of Disbursement 10 / 12 / 2005 Amount of Each Disbursement this Period 15.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address Carol McFall 6832 Mahoning Avenue NE City Alliance State OH Zip Code 44601 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835700 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Florence Slatkin 7400 NW 17th Street Apt. 108 City Plantation State FL Zip Code 33313 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835701 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Jeann Sing 68-1050 Maura Lane # D204 City Kanala State HI Zip Code 96743 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835702 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Pamela Moore 6768 Areca Blvd. City Sarasota State FL Zip Code 34241 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835703 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address M. Lannon 6728 Layton Court City Tallahassee State FL Zip Code 32317 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835704 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address Alexis Marmar 200 Locust Street City Philadelphia State PA Zip Code 19106 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835705 Date of Disbursement 10 / 17 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address Daniel Schlesinger 6633 Forest Avenue City Hammond State IN Zip Code 46324 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835706 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 40.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

**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)

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<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)
EMILY's List

<p>A. Kathy Castor Contributions</p> <p>Full Name (Last, First, Middle Initial) Kathy Castor Contributions</p>		<p>Transaction ID: 21835707 Date of Disbursement 10 / 07 / 2005</p>
<p>Mailing Address Robert Meagher 108 Curtis Street</p>		<p>Amount of Each Disbursement this Period 10.00</p>
<p>City Somerville State MA Zip Code 02144</p>	<p>Purpose of Disbursement Candidate Contrib Earmarked</p>	
<p>Candidate Name</p>		<p>[MEMO ITEM] MEMO</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>B. Kathy Castor Contributions</p> <p>Full Name (Last, First, Middle Initial) Kathy Castor Contributions</p>		<p>Transaction ID: 21835708 Date of Disbursement 10 / 12 / 2005</p>
<p>Mailing Address Hans Engelke 640 Weaver Avenue</p>		<p>Amount of Each Disbursement this Period 70.00</p>
<p>City Kalamazoo State MI Zip Code 49006</p>	<p>Purpose of Disbursement Candidate Contrib Earmarked</p>	
<p>Candidate Name</p>		<p>[MEMO ITEM] MEMO</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>C. Kathy Castor Contributions</p> <p>Full Name (Last, First, Middle Initial) Kathy Castor Contributions</p>		<p>Transaction ID: 21835709 Date of Disbursement 10 / 06 / 2005</p>
<p>Mailing Address Mary Hurtig 2353 Bryn Mawr Avenue</p>		<p>Amount of Each Disbursement this Period 50.00</p>
<p>City Philadelphia State PA Zip Code 19131</p>	<p>Purpose of Disbursement Candidate Contrib Earmarked</p>	
<p>Candidate Name</p>		<p>[MEMO ITEM] MEMO</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address Alan Solinger 1465 65th St Apt 253 City Emeryville State CA Zip Code 94608 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835710 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address Roberta Martin 6040 Pitch Lane City Boynton Beach State FL Zip Code 33437 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835711 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address Evelyn Haynes 2303 Owens Ave Unit 101 City Fort Collins State CO Zip Code 80528 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835712 Date of Disbursement 10 / 12 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Georgia Steiger 604 Fountainhead City Sebring State FL Zip Code 33870 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835713 Date of Disbursement 10 / 12 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Nancy Anderson 23 Teresa Road City Hopkinton State MA Zip Code 01748 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835714 Date of Disbursement 10 / 25 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Patricia Richard 6 Patton Street City Athens State OH Zip Code 45701 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835715 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address: Constance Greenfield 279 Sturges Highway City: Westport State: CT Zip Code: 06880 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____		Transaction ID: 21835716 Date of Disbursement: 10 / 27 / 2005 Amount of Each Disbursement this Period: 250.00 [MEMO ITEM] MEMO
B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address: Linda Cukurs 5940 N. Forest Glen Avenue City: Chicago State: IL Zip Code: 60646 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____		Transaction ID: 21835717 Date of Disbursement: 10 / 06 / 2005 Amount of Each Disbursement this Period: 50.00 [MEMO ITEM] MEMO
C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address: Sarah Nelson 5878 S. Dry Creek Court City: Greenwood Village State: CO Zip Code: 80121 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____		Transaction ID: 21835718 Date of Disbursement: 10 / 14 / 2005 Amount of Each Disbursement this Period: 250.00 [MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address: Jean Leiserson 5801 Crestridge Rd Apt C207 City: Rncho Pls Vrd State: CA Zip Code: 90275 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835719 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address: Gordon Gibson 821 Hiawatha Drive City: Elkhart State: IN Zip Code: 46517 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835720 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address: Joan Chrisler 116 5th Ave. City: Milford State: CT Zip Code: 06460 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835721 Date of Disbursement 10 / 21 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address Jane Murdock 14 Long Pond Avenue City Housatonic State MA Zip Code 01236 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835722 Date of Disbursement 10 / 25 / 2005 Amount of Each Disbursement this Period 200.00 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address Catherine Smith 85316 Coyote Creek Road City Veneta State OR Zip Code 97487 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835723 Date of Disbursement 10 / 17 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address Susi Westfall 525 Allendale Road City Miami State FL Zip Code 33149 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835724 Date of Disbursement 10 / 17 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address: Wyman Fowler 2107 Mallard Drive City: Lancaster State: PA Zip Code: 17601 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835725 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5 Amount of Each Disbursement this Period 1000.00 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address: Linda Alter 210 W Rittenhouse Square City: Philadelphia State: PA Zip Code: 19103 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835726 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5 Amount of Each Disbursement this Period 2100.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address: B. Ellen Fisher 5137 S. Kimbark Avenue City: Chicago State: IL Zip Code: 60615 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835727 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address: Kristin Olsson 11127 Midway Road City: Dallas State: TX Zip Code: 75229 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835728 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 5.00 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address: Adelle Lemon 1063 Cragmont City: Berkeley State: CA Zip Code: 94708 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835729 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address: Helen Johanson 505 Avenida Sevilla Unit C City: Laguna Hills State: CA Zip Code: 92637 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835730 Date of Disbursement 10 / 05 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions		Transaction ID: 21835731 Date of Disbursement 10 / 28 / 2005
Mailing Address: Matthew Morris PO Box 9157		Amount of Each Disbursement this Period 5.00
City: Aspen State: CO Zip Code: 81612	Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Category/Type: _____	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions		Transaction ID: 21835732 Date of Disbursement 10 / 12 / 2005
Mailing Address: Marcia Raeber-McClain 910 Holly Street		Amount of Each Disbursement this Period 100.00
City: Blytheville State: AR Zip Code: 72315	Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Category/Type: _____	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions		Transaction ID: 21835733 Date of Disbursement 10 / 25 / 2005
Mailing Address: Deborah Floyd 502 Lexington Lane		Amount of Each Disbursement this Period 100.00
City: Richardson State: TX Zip Code: 75080	Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Category/Type: _____	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address: Joan Norgren 501 E. Skyline Pkwy City: Duluth State: MN Zip Code: 55805 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835734 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 200.00 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address: Carol Kuller 137 Great Barrington Road City: West Stockbridge State: MA Zip Code: 01266 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835735 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address: Jape Taylor 500 N.W. 80th Boulevard City: Gainesville State: FL Zip Code: 32607 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835736 Date of Disbursement 10 / 05 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Kathy Castor Contributions</p> <p>Full Name (Last, First, Middle Initial) Kathy Castor Contributions</p>		<p>Transaction ID: 21835737</p> <p>Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	0	2	/	2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0	/	0	2	/	2	0	0	5													
<p>Mailing Address: Carol Leibman 100 Diplomat Drive, # 6F</p>		<p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>25.00</td> </tr> </table> </p>	25.00																			
25.00																						
<p>City: Mt. Kisco State: NY Zip Code: 10549</p>																						
<p>Purpose of Disbursement: Candidate Contrib Earmarked</p>		<p>[MEMO ITEM] MEMO</p>																				
<p>Candidate Name: _____</p>																						
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																					
<p>State: _____ District: _____</p>																						

<p>B. Kathy Castor Contributions</p> <p>Full Name (Last, First, Middle Initial) Kathy Castor Contributions</p>		<p>Transaction ID: 21835738</p> <p>Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>2</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	1	/	2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0	/	2	1	/	2	0	0	5													
<p>Mailing Address: Christopher Maurer 205 N3 Carpenter Road SE</p>		<p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>25.00</td> </tr> </table> </p>	25.00																			
25.00																						
<p>City: Lacey State: WA Zip Code: 98503</p>																						
<p>Purpose of Disbursement: Candidate Contrib Earmarked</p>		<p>[MEMO ITEM] MEMO</p>																				
<p>Candidate Name: _____</p>																						
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																					
<p>State: _____ District: _____</p>																						

<p>C. Kathy Castor Contributions</p> <p>Full Name (Last, First, Middle Initial) Kathy Castor Contributions</p>		<p>Transaction ID: 21835739</p> <p>Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>0</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	0	3	/	2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0	/	0	3	/	2	0	0	5													
<p>Mailing Address: Estelle Dashman 11 Riverview Farm Road</p>		<p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>50.00</td> </tr> </table> </p>	50.00																			
50.00																						
<p>City: Ossining State: NY Zip Code: 10562</p>																						
<p>Purpose of Disbursement: Candidate Contrib Earmarked</p>		<p>[MEMO ITEM] MEMO</p>																				
<p>Candidate Name: _____</p>																						
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																					
<p>State: _____ District: _____</p>																						

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<table border="1"> <tr> <td>0.00</td> </tr> </table>	0.00
0.00		
<p>TOTAL This Period (last page this line number only)</p>	<table border="1"> <tr> <td> </td> </tr> </table>	

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Kathy Castor Contributions</p> <p>Full Name (Last, First, Middle Initial) Kathy Castor Contributions</p>		<p>Transaction ID: 21835740 Date of Disbursement 10 / 12 / 2005</p>
<p>Mailing Address Nancy Gold 4876 Peregrine Point Cir N</p>		<p>Amount of Each Disbursement this Period 50.00</p>
<p>City Sarasota State FL Zip Code 34231</p>	<p>Purpose of Disbursement Candidate Contrib Earmarked</p>	
<p>Candidate Name</p>		<p>Category/ Type</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>[MEMO ITEM] MEMO</p>
<p>State: District:</p>		

<p>B. Kathy Castor Contributions</p> <p>Full Name (Last, First, Middle Initial) Kathy Castor Contributions</p>		<p>Transaction ID: 21835741 Date of Disbursement 10 / 14 / 2005</p>
<p>Mailing Address Doris Coster 135 Valentine Road</p>		<p>Amount of Each Disbursement this Period 100.00</p>
<p>City Pomfret Ctr State CT Zip Code 06259</p>	<p>Purpose of Disbursement Candidate Contrib Earmarked</p>	
<p>Candidate Name</p>		<p>Category/ Type</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>[MEMO ITEM] MEMO</p>
<p>State: District:</p>		

<p>C. Kathy Castor Contributions</p> <p>Full Name (Last, First, Middle Initial) Kathy Castor Contributions</p>		<p>Transaction ID: 21835742 Date of Disbursement 10 / 05 / 2005</p>
<p>Mailing Address Francesca Benson 30 Bainbridge</p>		<p>Amount of Each Disbursement this Period 100.00</p>
<p>City Princeton State NJ Zip Code 08540</p>	<p>Purpose of Disbursement Candidate Contrib Earmarked</p>	
<p>Candidate Name</p>		<p>Category/ Type</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>[MEMO ITEM] MEMO</p>
<p>State: District:</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions		Transaction ID: 21835743 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address: Geneva Loveland 4801 Connecticut Ave. NW		Amount of Each Disbursement this Period 25.00
City: Washington State: DC Zip Code: 20008	[MEMO ITEM] MEMO	
Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name:		Category/Type:
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions		Transaction ID: 21835744 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address: Barbara Malcolm 4775 S Harbor Dr Apt 101		Amount of Each Disbursement this Period 250.00
City: Vero Beach State: FL Zip Code: 32967	[MEMO ITEM] MEMO	
Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name:		Category/Type:
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions		Transaction ID: 21835745 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address: Della Huber 5308 Boyd Ave # B		Amount of Each Disbursement this Period 100.00
City: Oakland State: CA Zip Code: 94618	[MEMO ITEM] MEMO	
Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name:		Category/Type:
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Linda Wise 4749 Old Post Ct City Boulder State CO Zip Code 80301 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835746 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Allison Brower 4745 Espana Court City Carmichael State CA Zip Code 95608 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835747 Date of Disbursement 10 / 27 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address John Poplawski 4726 San Feliciano Drive City Woodland Hills State CA Zip Code 91364 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835748 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions		Transaction ID: 21835749 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 5
Mailing Address Phebe Bederman 4720 NE 3rd Avenue		Amount of Each Disbursement this Period 15.00
City Ft. Lauderdale State FL Zip Code 33334	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions		Transaction ID: 21835750 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address Susan McGannon 3002 Bowers Lane		Amount of Each Disbursement this Period 50.00
City Murfreesboro State TN Zip Code 37129	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions		Transaction ID: 21835751 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address Alwyn Johnson 4601 Rue Belle Mer		Amount of Each Disbursement this Period 100.00
City Sanibel State FL Zip Code 33957	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address: Gustav Papanek 2 Mason Street City: Lexington State: MA Zip Code: 02421 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835752 Date of Disbursement 10 / 19 / 2005 Amount of Each Disbursement this Period 75.00 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address: Charlotte Moss 134 E 71st St City: New York State: NY Zip Code: 10021 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835753 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address: Phyllis Levinson 5262 Boca Marina Circle S. City: Boca Raton State: FL Zip Code: 33487 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835754 Date of Disbursement 10 / 17 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Ann Friend 4414 Durant Street, # 111 City Deer Park State TX Zip Code 77536 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835755 Date of Disbursement 10 / 17 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Alice Armstrong 1002 140th Street E City Tacoma State WA Zip Code 98445 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835756 Date of Disbursement 10 / 12 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Steve Schwartz 425 S. Chickasaw Trail #348 City Orlando State FL Zip Code 32825 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835757 Date of Disbursement 10 / 15 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Mary Ittner Bob Rutemoeller City Gualala State CA Zip Code 95445 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835758 Date of Disbursement 10 / 12 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Rosemary Vimont 1922 Oregon Street City Berkeley State CA Zip Code 94703 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835759 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Kathleen Commons 5849 Garden Park Court City Carmichael State CA Zip Code 95608 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835760 Date of Disbursement 10 / 25 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Fred Golding 1113 Emeral Bay City Laguna Beach State CA Zip Code 92655 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835761 Date of Disbursement 10 / 27 / 2005 Amount of Each Disbursement this Period 60.00 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Gloria Deison 1311 Peacefield Place City Tallahassee State FL Zip Code 32308 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835762 Date of Disbursement 10 / 12 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Robin Hanes 191 Lynn Cove Road City Asheville State NC Zip Code 28804 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835763 Date of Disbursement 10 / 27 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions		Transaction ID: 21835764 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address: Annabelle Cloner 1909 Skycrest Dr. #11		Amount of Each Disbursement this Period 250.00
City: Walnut Creek State: CA Zip Code: 94595	[MEMO ITEM] MEMO	
Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Category/Type: _____		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions		Transaction ID: 21835765 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5
Mailing Address: Geraldine Herbert 400 North Hulen Way		Amount of Each Disbursement this Period 100.00
City: Ketchum State: ID Zip Code: 83340	[MEMO ITEM] MEMO	
Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Category/Type: _____		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions		Transaction ID: 21835766 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address: Sheila Smith 4 Vestry Lane		Amount of Each Disbursement this Period 50.00
City: Savannah State: GA Zip Code: 31411	[MEMO ITEM] MEMO	
Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Category/Type: _____		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Julie Winterbottom 142 Underhill Avenue, # 1 City Brooklyn State NY Zip Code 11238 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835767 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Geri Loe 5961 Canon Court City Ventura State CA Zip Code 93003 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835768 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 200.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Audrey Miller P.O. Box 888 City Ferndale State CA Zip Code 95536 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835769 Date of Disbursement 10 / 17 / 2005 Amount of Each Disbursement this Period 60.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Dorothy Whitmore 1309 N. Clayton Street City Wilmington State DE Zip Code 19806 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835770 Date of Disbursement 10 / 12 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Shirley Gleich 8116 Pine Circle City Tamarac State FL Zip Code 33321 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835771 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Era Moorer 18890 Lake Worth Blvd City Port Charlotte State FL Zip Code 33948 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835772 Date of Disbursement 10 / 01 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address: Greta Newman 39 Steppingstone Lane City: Great Neck State: NY Zip Code: 11024 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835773 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address: Victoria Lowell 188 Sippewissett Road City: Falmouth State: MA Zip Code: 02540 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835774 Date of Disbursement 10 / 28 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address: Jennifer Whitaker 39 5th Avenue City: New York State: NY Zip Code: 10003 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835775 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address Jacqueline Franco 18616 N. 99th Avenue City Sun City State AZ Zip Code 85373 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835776 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address Frances Lax 185 Medford Leas City Medford State NJ Zip Code 08055 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835777 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address Samona Sheppard 1301 N Tamiami Trl Apt 713 City Sarasota State FL Zip Code 34236 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835778 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 413 / 1975

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Kathy Castor Contributions</p> <p>Full Name (Last, First, Middle Initial) Kathy Castor Contributions</p> <p>Mailing Address Eugenie Suter 3100 NE 48th Street, Apt. 513</p> <p>City Fort Lauderdale State FL Zip Code 33308</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21835779 Date of Disbursement 10 / 20 / 2005</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Kathy Castor Contributions</p> <p>Full Name (Last, First, Middle Initial) Kathy Castor Contributions</p> <p>Mailing Address Hugh Jackson 6035 W Mansfield Ave Unit 247</p> <p>City Denver State CO Zip Code 80235</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21835780 Date of Disbursement 10 / 31 / 2005</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Kathy Castor Contributions</p> <p>Full Name (Last, First, Middle Initial) Kathy Castor Contributions</p> <p>Mailing Address Melinda Reed 3671 Ward Road</p> <p>City Wheat Ridge State CO Zip Code 80033</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21835781 Date of Disbursement 10 / 13 / 2005</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Elizabeth Whittall 2300 Indian Creek Boulevard City Vero Beach State FL Zip Code 32966 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835782 Date of Disbursement 10 / 17 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Karlene Bergold 1811 Sheridan Avenue City San Diego State CA Zip Code 92103 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835783 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address John Wolf PO Box 1429 City Sanibel State FL Zip Code 33957 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835784 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Sharon Stein 1035 Leonello Avenue City Los Altos State CA Zip Code 94024 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835785 Date of Disbursement 10 / 01 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Rosamond Douglass 1106 Catalina Road W City Jacksonville State FL Zip Code 32216 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835786 Date of Disbursement 10 / 21 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Howard Kaufman 130 Sunrise Avenue Apt. 505 City Palm Beach State FL Zip Code 33480 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835787 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address: Catherine Gerhold 1804 Wightman Street City: Pittsburgh State: PA Zip Code: 15217 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835788 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 200.00 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address: Leal Abbott 359 Quail Drive City: Woodland State: CA Zip Code: 95695 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835789 Date of Disbursement 10 / 27 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address: Libby Tanner 1800 Sunset Harbour Drive City: Miami State: FL Zip Code: 33139 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835790 Date of Disbursement 10 / 28 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Roxane Bleiweis PO Box 561 City McIntosh State FL Zip Code 32664 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835791 Date of Disbursement 10 / 12 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Richard Foust 180 N. 4th Street, Apt. 607 City San Jose State CA Zip Code 95112 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835792 Date of Disbursement 10 / 25 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Barbara Eidem 3496 Winding Trail Circle City Virginia Beach State VA Zip Code 23456 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835793 Date of Disbursement 10 / 21 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Katherine Simpson 1001 Spring Street, Apt. 805 City: Silver Spring State: MD Zip Code: 20910 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835794 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Suzanne Leagjeld 34146 Old County Road 16 City: Pequot Lakes State: MN Zip Code: 56472 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835795 Date of Disbursement 10 / 21 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Catherine Fiore 18 Battle Green Road City: Lexington State: MA Zip Code: 02421 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835796 Date of Disbursement 10 / 27 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address: Gerrish Milliken PO Box 1880 City: Oroville State: WA Zip Code: 98844 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835797 Date of Disbursement: 10 / 25 / 2005 Amount of Each Disbursement this Period: 500.00 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address: Mary Favaro 626 14th Ave East City: Seattle State: WA Zip Code: 98112 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835798 Date of Disbursement: 10 / 16 / 2005 Amount of Each Disbursement this Period: 100.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address: Dorothy Flaster 1760 East Valley Road City: Montecito State: CA Zip Code: 93108 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835799 Date of Disbursement: 10 / 20 / 2005 Amount of Each Disbursement this Period: 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions

Full Name (Last, First, Middle Initial)
Kathy Castor Contributions

Mailing Address Robert Hartmann
335 Via Concha

City Aptos State CA Zip Code 95003

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2006
 Primary General
 Other (specify) ▼

Transaction ID: 21835800
Date of Disbursement
10 / 07 / 2005

Amount of Each Disbursement this Period
250.00

[MEMO ITEM]
MEMO

B. Kathy Castor Contributions

Full Name (Last, First, Middle Initial)
Kathy Castor Contributions

Mailing Address Laura Avery
6309 Cocoa Lane

City Apollo Beach State FL Zip Code 33572

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2006
 Primary General
 Other (specify) ▼

Transaction ID: 21835801
Date of Disbursement
10 / 05 / 2005

Amount of Each Disbursement this Period
50.00

[MEMO ITEM]
MEMO

C. Kathy Castor Contributions

Full Name (Last, First, Middle Initial)
Kathy Castor Contributions

Mailing Address Marie Blount
35 Young Avenue

City Croton Hdsn State NY Zip Code 10520

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2006
 Primary General
 Other (specify) ▼

Transaction ID: 21835802
Date of Disbursement
10 / 31 / 2005

Amount of Each Disbursement this Period
100.00

[MEMO ITEM]
MEMO

SUBTOTAL of Disbursements This Page (optional) ► 0.00

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

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

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FOR LINE NUMBER:
(check only one)

PAGE 421 / 1975

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Craig Bartelt 1751 Buckingham Road City Los Angeles State CA Zip Code 90019 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835803 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Joan Steele 332 Glenn Street City Ashland State OR Zip Code 97520 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835804 Date of Disbursement 10 / 15 / 2005 Amount of Each Disbursement this Period 10.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Andrew Carson PO Box 709 City Wilson State WY Zip Code 83014 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835805 Date of Disbursement 10 / 01 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address Margaret Poole 33 Sunset Road City Wayland State MA Zip Code 01778 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835806 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address Rhoda Honigman PO Box 294 City Oilville State VA Zip Code 23129 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835807 Date of Disbursement 10 / 07 / 2005 Amount of Each Disbursement this Period 300.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address Cynthia Kayser PO Box 48 City Fairfax State CA Zip Code 94978 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835808 Date of Disbursement 10 / 17 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address Alice Schoen 6419 Cavalier Corridor City Falls Church State VA Zip Code 22044 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835809 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address Robert Lande 325 Central Park W. City New York State NY Zip Code 10025 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835810 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address Lynette Reilly 12516 Davan Drive City Silver Spring State MD Zip Code 20904 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835811 Date of Disbursement 10 / 25 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address S. C. Reichel-Cook PO Box 257 City Ross State CA Zip Code 94957 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835812 Date of Disbursement 10 / 28 / 2005 Amount of Each Disbursement this Period 20.06 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Richard Toole PO Box 256 City Oak Bluffs State MA Zip Code 02557 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835813 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Elaine Togneri 33 Middlesex Blvd City Monroe Twp State NJ Zip Code 08831 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835814 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Betsy Oakman 2429 Duncan Street City Columbia State SC Zip Code 29205 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835815 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Lois Jolley 6605 100th Avenue City Pinellas Park State FL Zip Code 33782 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835816 Date of Disbursement 10 / 21 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Shirley Baer 6621 SE Harbor Circle City Stuart State FL Zip Code 34996 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835817 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address: Margaret Solomon P.O. Box 3303 City: Incline Village State: NV Zip Code: 89450 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835818 Date of Disbursement 10 / 28 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address: Andrew Carson PO Box 709 City: Wilson State: WY Zip Code: 83014 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835819 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Mailing Address: Sheila Gershen PO Box 292 City: Santa Fe State: NM Zip Code: 87504 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835820 Date of Disbursement 10 / 28 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Anita DeVine 988 Blvd of the Arts #1210 City Sarasota State FL Zip Code 34236 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835821 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Joel Ginzberg PO Box 873 City Stone Ridge State NY Zip Code 12484 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835822 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions Mailing Address Beatriz Clewell-Romero 1621 13th Street, N.W. City Washington State DC Zip Code 20009 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835823 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions		Transaction ID: 21835824 Date of Disbursement 10 / 14 / 2005
Mailing Address Margret Jacoby 912 Blossom Drive		Amount of Each Disbursement this Period 100.00
City Santa Clara State CA Zip Code 95050	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions		Transaction ID: 21835825 Date of Disbursement 10 / 02 / 2005
Mailing Address Julia Malakoff 9103 SW 96 Avenue		Amount of Each Disbursement this Period 25.00
City Miami State FL Zip Code 33176	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathy Castor Contributions		Transaction ID: 21835826 Date of Disbursement 10 / 14 / 2005
Mailing Address Karen Keefer 705 Chesapeake Avenue		Amount of Each Disbursement this Period 50.00
City Silver Spring State MD Zip Code 20910	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Kathy Castor Contributions		Transaction ID: 21835827 Date of Disbursement 10 / 03 / 2005
Mailing Address Leslie Sternlieb 90 Edgewater Drive, Apt. 1101		Amount of Each Disbursement this Period 100.00
City Coral Gables	State FL	
Zip Code 33133	Purpose of Disbursement Candidate Contrib Earmarked	[MEMO ITEM] MEMO
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Kathy Castor Contributions		Transaction ID: 21835828 Date of Disbursement 10 / 13 / 2005
Mailing Address Judy Dorn 708 14th Avenue S.		Amount of Each Disbursement this Period 30.00
City Saint Cloud	State MN	
Zip Code 56301	Purpose of Disbursement Candidate Contrib Earmarked	[MEMO ITEM] MEMO
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Kathy Castor Contributions		Transaction ID: 21835829 Date of Disbursement 10 / 03 / 2005
Mailing Address Doris Marsh 254 East Tall Oaks Circle		Amount of Each Disbursement this Period 100.00
City Palm Beach Gardens	State FL	
Zip Code 33410	Purpose of Disbursement Candidate Contrib Earmarked	[MEMO ITEM] MEMO
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Kathryn Kami Mailing Address: 2880 NE 14th Street, Apt. 405 City: Pompano Beach State: FL Zip Code: 33062 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835830 Date of Disbursement 10 / 05 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Patricia Wallace Mailing Address: 831 Moonlight Drive City: York State: PA Zip Code: 17402 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835831 Date of Disbursement 10 / 17 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Kathy Castor Contributions Full Name (Last, First, Middle Initial) Nancy Sherman Mailing Address: 8240 Desmond Dr City: Boynton Beach State: FL Zip Code: 33437 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835832 Date of Disbursement 10 / 25 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21835833 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address Constance Greenfield 279 Sturges Highway		Amount of Each Disbursement this Period 250.00
City Westport State CT Zip Code 06880	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21835834 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address Ina Ayliffe 15905 Bent Tree Cr. #1025		Amount of Each Disbursement this Period 25.00
City Dallas State TX Zip Code 75248	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21835835 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address Anne Patterson 80 Buckingham St		Amount of Each Disbursement this Period 100.00
City Cambridge State MA Zip Code 02138	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address Anne Tiracchia 725 Scott Street City Stroudsburg State PA Zip Code 18360 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835836 Date of Disbursement 10 / 28 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address Marc Collin 2692 Landon Road City Shaker Heights State OH Zip Code 44122 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835837 Date of Disbursement 10 / 25 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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C. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address Jennifer Berlekamp 120 Hazel Lane City Piedmont State CA Zip Code 94611 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835838 Date of Disbursement 10 / 21 / 2005 Amount of Each Disbursement this Period 500.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21835839 Date of Disbursement 10 / 31 / 2005
Mailing Address Barbara Poppe 7356 Magnolia Drive		Amount of Each Disbursement this Period 50.00
City Nederland	State CO	
Zip Code 80466		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21835840 Date of Disbursement 10 / 06 / 2005
Mailing Address Elizabeth Jackets 7306 Channel View Drive		Amount of Each Disbursement this Period 10.00
City Anacortes	State WA	
Zip Code 98221		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21835841 Date of Disbursement 10 / 06 / 2005
Mailing Address Bonnie Morse 729 Woodland Road		Amount of Each Disbursement this Period 50.00
City Bradfordwoods	State PA	
Zip Code 15015		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

SUBTOTAL of Disbursements This Page (optional)	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address Jay Paul 109 Scott Street City San Francisco State CA Zip Code 94117 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835842 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address Mary Allen 719 Lincoln Street City Sayre State PA Zip Code 18840 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835843 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address Georgia Locker 713 Duke Square City Fort Collins State CO Zip Code 80525 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835844 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 20.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21835845 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address Margaret Hauck 12 Running Brook Road		Amount of Each Disbursement this Period 100.00
City Bridgewater State NJ Zip Code 08807	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21835846 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address Susan Selbin 1520 San Carlos Road SW		Amount of Each Disbursement this Period 20.00
City Albuquerque State NM Zip Code 87104	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21835847 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5
Mailing Address James Beck 4714 Windsor Avenue		Amount of Each Disbursement this Period 250.00
City Philadelphia State PA Zip Code 19143	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Lois Murphy Contributions</p> <p>Full Name (Last, First, Middle Initial) Lois Murphy Contributions</p> <p>Mailing Address Linda Murnik 263 Camino Los Abuelos</p> <p>City Santa Fe State NM Zip Code 87508</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21835848 Date of Disbursement 10 / 12 / 2005</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Lois Murphy Contributions</p> <p>Full Name (Last, First, Middle Initial) Lois Murphy Contributions</p> <p>Mailing Address Patricia Ness 2515 Caminito Muirfield</p> <p>City La Jolla State CA Zip Code 92037</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21835849 Date of Disbursement 10 / 06 / 2005</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Lois Murphy Contributions</p> <p>Full Name (Last, First, Middle Initial) Lois Murphy Contributions</p> <p>Mailing Address Gail Winnell 7024 El Torro St</p> <p>City Zephyrhills State FL Zip Code 33541</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21835850 Date of Disbursement 10 / 05 / 2005</p> <p>Amount of Each Disbursement this Period 10.00</p> <p>[MEMO ITEM] MEMO</p>
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SUBTOTAL of Disbursements This Page (optional)	0.00
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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21835851 Date of Disbursement 10 / 21 / 2005
Mailing Address: Barbara Haack 102 Main Street		Amount of Each Disbursement this Period 35.00
City: West Newbury State: MA Zip Code: 01985	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21835852 Date of Disbursement 10 / 03 / 2005
Mailing Address: Yvette Rudnitzky 702 W. Matson Run Parkway		Amount of Each Disbursement this Period 100.00
City: Wilmington State: DE Zip Code: 19802	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21835853 Date of Disbursement 10 / 03 / 2005
Mailing Address: Mary Mettler 15091 Ford Road, Apt. 116		Amount of Each Disbursement this Period 25.00
City: Dearborn State: MI Zip Code: 48126	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Lois Murphy Contributions</p> <p>Full Name (Last, First, Middle Initial) Lois Murphy Contributions</p>		<p>Transaction ID: 21835854 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		1	3		2	0	0	5													
<p>Mailing Address Carol McFall 6832 Mahoning Avenue NE</p>		<p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>50.00</td> </tr> </table> </p>	50.00																			
50.00																						
<p>City Alliance State OH Zip Code 44601</p>																						
<p>Purpose of Disbursement Candidate Contrib Earmarked</p>		<p>[MEMO ITEM] MEMO</p>																				
<p>Candidate Name</p>																						
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																					
<p>State: District:</p>																						

<p>B. Lois Murphy Contributions</p> <p>Full Name (Last, First, Middle Initial) Lois Murphy Contributions</p>		<p>Transaction ID: 21835855 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	4		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		1	4		2	0	0	5													
<p>Mailing Address Jeann Sing 68-1050 Maura Lane # D204</p>		<p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>50.00</td> </tr> </table> </p>	50.00																			
50.00																						
<p>City Kanula State HI Zip Code 96743</p>																						
<p>Purpose of Disbursement Candidate Contrib Earmarked</p>		<p>[MEMO ITEM] MEMO</p>																				
<p>Candidate Name</p>																						
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																					
<p>State: District:</p>																						

<p>C. Lois Murphy Contributions</p> <p>Full Name (Last, First, Middle Initial) Lois Murphy Contributions</p>		<p>Transaction ID: 21835856 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		3	1		2	0	0	5													
<p>Mailing Address Robert Piper 76 Hillman Street</p>		<p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> </p>	100.00																			
100.00																						
<p>City New Bedford State MA Zip Code 02740</p>																						
<p>Purpose of Disbursement Candidate Contrib Earmarked</p>		<p>[MEMO ITEM] MEMO</p>																				
<p>Candidate Name</p>																						
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																					
<p>State: District:</p>																						

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<table border="1"> <tr> <td>0.00</td> </tr> </table>	0.00
0.00		
<p>TOTAL This Period (last page this line number only)</p>	<table border="1"> <tr> <td></td> </tr> </table>	

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Victoria Watkins 244 Madison Avenue, # 14E City: New York State: NY Zip Code: 10016 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835857 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 110.00 [MEMO ITEM] MEMO
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B. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Shirley Baer 6621 SE Harbor Circle City: Stuart State: FL Zip Code: 34996 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835858 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Mary Kelman 1500 Sawyer Ave City: Manasquan State: NJ Zip Code: 08736 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835859 Date of Disbursement 10 / 30 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21835860 Date of Disbursement 10 / 07 / 2005
Mailing Address Gene Wilson 7730 Tecumseh Trail		Amount of Each Disbursement this Period 100.00
City Cincinnati State OH Zip Code 45243	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21835861 Date of Disbursement 10 / 31 / 2005
Mailing Address Morton Zivan 2401 Pennsylvania Avenue		Amount of Each Disbursement this Period 100.00
City Philadelphia State PA Zip Code 19130	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21835862 Date of Disbursement 10 / 20 / 2005
Mailing Address Louise Wellborn 2400 Rio Grande Blvd NW		Amount of Each Disbursement this Period 100.00
City Albuquerque State NM Zip Code 87104	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21835863 Date of Disbursement 10 / 11 / 2005
Mailing Address Eileen Herrin 6424 Almond Avenue		Amount of Each Disbursement this Period 40.00
City Organgevale State CA Zip Code 95662	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21835864 Date of Disbursement 10 / 11 / 2005
Mailing Address Julie Peppard 1094 Palms Blvd		Amount of Each Disbursement this Period 50.00
City Venice State CA Zip Code 90291	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21835865 Date of Disbursement 10 / 03 / 2005
Mailing Address Margret Trotzky 27 Saxham Way		Amount of Each Disbursement this Period 100.00
City Wynnewood State PA Zip Code 19096	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21835866 Date of Disbursement 10 / 17 / 2005
Mailing Address Roberta Martini 1175 York Avenue		Amount of Each Disbursement this Period 100.00
City New York State NY Zip Code 10021	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21835867 Date of Disbursement 10 / 03 / 2005
Mailing Address Alice Schoen 6419 Cavalier Corridor		Amount of Each Disbursement this Period 100.00
City Falls Church State VA Zip Code 22044	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21835868 Date of Disbursement 10 / 12 / 2005
Mailing Address Irving Schulman 1483 Sutter Street, Apt. 1707		Amount of Each Disbursement this Period 25.00
City San Francisco State CA Zip Code 94109	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21835869 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address L Erlenmeyer-Kimling 1 Briarwood Lane		Amount of Each Disbursement this Period 200.00
City Stamford State CT Zip Code 06903	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21835870 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address Marilyn Henry 7823 Calverton Square		Amount of Each Disbursement this Period 100.00
City New Albany State OH Zip Code 43054	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21835871 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 5
Mailing Address Jesse Kehres 8 Classic Cir		Amount of Each Disbursement this Period 100.00
City Madison State WI Zip Code 53719	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Lois Murphy Contributions</p> <p>Full Name (Last, First, Middle Initial) Lois Murphy Contributions</p> <p>Mailing Address: Gail Chester 24 Mill Road</p> <p>City: Matawan State: NJ Zip Code: 07747</p> <p>Purpose of Disbursement: Candidate Contrib Earmarked</p> <p>Candidate Name: _____</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21835872 Date of Disbursement: 10 / 25 / 2005</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Lois Murphy Contributions</p> <p>Full Name (Last, First, Middle Initial) Lois Murphy Contributions</p> <p>Mailing Address: Mary Hurtig 2353 Bryn Mawr Avenue</p> <p>City: Philadelphia State: PA Zip Code: 19131</p> <p>Purpose of Disbursement: Candidate Contrib Earmarked</p> <p>Candidate Name: _____</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21835873 Date of Disbursement: 10 / 06 / 2005</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Lois Murphy Contributions</p> <p>Full Name (Last, First, Middle Initial) Lois Murphy Contributions</p> <p>Mailing Address: Ralph Horrell 624 Pickering Road</p> <p>City: Southampton State: PA Zip Code: 18966</p> <p>Purpose of Disbursement: Candidate Contrib Earmarked</p> <p>Candidate Name: _____</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21835874 Date of Disbursement: 10 / 04 / 2005</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p> <p>TOTAL This Period (last page this line number only)</p>	<p>0.00</p>
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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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Nancy Madsen 2340 S 2300 E City: Salt Lake Cty State: UT Zip Code: 84109 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835875 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 20.00 [MEMO ITEM] MEMO
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B. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Alan Solinger 1465 65th St Apt 253 City: Emeryville State: CA Zip Code: 94608 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835876 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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C. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Roberta Martin 6040 Pitch Lane City: Boynton Beach State: FL Zip Code: 33437 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835877 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21835878 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address Patricia Kinsman 11671 N. Europa Place		Amount of Each Disbursement this Period 25.00
City Tucson State AZ Zip Code 85737	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21835879 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address Analine Hicks 2280 Cayuga Rd		Amount of Each Disbursement this Period 50.00
City Schenectady State NY Zip Code 12309	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21835880 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address Julie Winterbottom 142 Underhill Avenue, # 1		Amount of Each Disbursement this Period 25.00
City Brooklyn State NY Zip Code 11238	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Judith Wolfe 11644 Harborview City: Cleveland State: OH Zip Code: 44102 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835881 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Linda Cukurs 5940 N. Forest Glen Avenue City: Chicago State: IL Zip Code: 60646 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835882 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Anne Vawser 22608 Melia Road City: Gretna State: NE Zip Code: 68028 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835883 Date of Disbursement 10 / 28 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address Shirley Gleich 8116 Pine Circle City Tamarac State FL Zip Code 33321 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835884 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address Phyllis Farley 580 Park Avenue City New York State NY Zip Code 10021 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835885 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address Mary Brucklacher 560 Deer Lake Dr City Findlay State OH Zip Code 45840 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835886 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Bronwyn Nelson 5567 Mesa Verde Court City: Fairfield State: OH Zip Code: 45014 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835887 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
--	--	---

B. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Polly Victor 5543 N. Fresno, # D City: Fresno State: CA Zip Code: 93710 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835888 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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C. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Norma Reinhard 216 N Madison Avenue City: Grove City State: PA Zip Code: 16127 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835889 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21835890 Date of Disbursement 10 / 25 / 2005
Mailing Address Jane Murdock 14 Long Pond Avenue		Amount of Each Disbursement this Period 200.00
City Housatonic State MA Zip Code 01236	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21835891 Date of Disbursement 10 / 03 / 2005
Mailing Address Linda Hengst 533 W. Market Street		Amount of Each Disbursement this Period 50.00
City York State PA Zip Code 17404	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21835892 Date of Disbursement 10 / 05 / 2005
Mailing Address Della Huber 5308 Boyd Ave # B		Amount of Each Disbursement this Period 100.00
City Oakland State CA Zip Code 94618	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21835893 Date of Disbursement 10 / 03 / 2005
Mailing Address James Langland 1014 Oakland Park Road		Amount of Each Disbursement this Period 50.00
City Thief River Falls State MN Zip Code 56701	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21835894 Date of Disbursement 10 / 05 / 2005
Mailing Address Linda Popkin-Paine 2121 Goldsmith		Amount of Each Disbursement this Period 100.00
City Houston State TX Zip Code 77030	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21835895 Date of Disbursement 10 / 06 / 2005
Mailing Address Adelle Lemon 1063 Cragmont		Amount of Each Disbursement this Period 100.00
City Berkeley State CA Zip Code 94708	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21835896 Date of Disbursement 10 / 07 / 2005
Mailing Address Deborah McCarter 211 W. Waverly Road		Amount of Each Disbursement this Period 50.00
City Glenside State PA Zip Code 19038	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21835897 Date of Disbursement 10 / 04 / 2005
Mailing Address Janet Smarr 1397 Caminito Halago		Amount of Each Disbursement this Period 25.00
City La Jolla State CA Zip Code 92037	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21835898 Date of Disbursement 10 / 02 / 2005
Mailing Address Carol Leibman 100 Diplomat Drive, # 6F		Amount of Each Disbursement this Period 25.00
City Mt. Kisco State NY Zip Code 10549	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21835899 Date of Disbursement 10 / 17 / 2005
Mailing Address Nancy Hall 210 Zellej Avenue		Amount of Each Disbursement this Period 250.00
City Moorestown State NJ Zip Code 08057	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21835900 Date of Disbursement 10 / 28 / 2005
Mailing Address Mary Lou Parker 516 Westminster Avenue		Amount of Each Disbursement this Period 50.00
City Swarthmore State PA Zip Code 19081	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21835901 Date of Disbursement 10 / 04 / 2005
Mailing Address Mary Kaufman 210 Villard Avenue		Amount of Each Disbursement this Period 35.00
City Hastings Hdsn. State NY Zip Code 10706	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Lois Murphy Contributions</p> <p>Full Name (Last, First, Middle Initial) Lois Murphy Contributions</p>		<p>Transaction ID: 21835902 Date of Disbursement 10 / 21 / 2005</p>
<p>Mailing Address: Helen Long 2904 Via Chiquita</p>		<p>Amount of Each Disbursement this Period 50.00</p>
<p>City: Santa Fe State: NM Zip Code: 87505</p>		
<p>Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____</p>		<p>[MEMO ITEM] MEMO</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____</p>		
<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>B. Lois Murphy Contributions</p> <p>Full Name (Last, First, Middle Initial) Lois Murphy Contributions</p>		<p>Transaction ID: 21835903 Date of Disbursement 10 / 11 / 2005</p>
<p>Mailing Address: Jane Moser 21 Stuyvesant Oval, Apt. 9F</p>		<p>Amount of Each Disbursement this Period 50.00</p>
<p>City: New York State: NY Zip Code: 10009</p>		
<p>Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____</p>		<p>[MEMO ITEM] MEMO</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____</p>		
<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>C. Lois Murphy Contributions</p> <p>Full Name (Last, First, Middle Initial) Lois Murphy Contributions</p>		<p>Transaction ID: 21835904 Date of Disbursement 10 / 27 / 2005</p>
<p>Mailing Address: Louise Hendrickson 1382 Newtown Langhorne Rd.</p>		<p>Amount of Each Disbursement this Period 100.00</p>
<p>City: Newtown State: PA Zip Code: 18940</p>		
<p>Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____</p>		<p>[MEMO ITEM] MEMO</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____</p>		
<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p> </p>

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Gerald George 51 Ashbury Terrace City: San Francisco State: CA Zip Code: 94117 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835905 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Karen Sundback 21 Kenmore Road City: Bloomfield State: CT Zip Code: 06002 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835906 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5 Amount of Each Disbursement this Period 200.00 [MEMO ITEM] MEMO
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C. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Marsha Richins 508 S Glenwood Ave City: Columbia State: MO Zip Code: 65203 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835907 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

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

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21835908 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address Helen Johanson 505 Avenida Sevilla Unit C		Amount of Each Disbursement this Period 100.00
City Laguna Hills State CA Zip Code 92637	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21835909 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address Jo Whetzel 5036 Castleman Street		Amount of Each Disbursement this Period 200.00
City Pittsburgh State PA Zip Code 15232	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21835910 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address Deborah Floyd 502 Lexington Lane		Amount of Each Disbursement this Period 100.00
City Richardson State TX Zip Code 75080	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21835911 Date of Disbursement 10 / 31 / 2005
Mailing Address James Donnell 207 Norman Drive		Amount of Each Disbursement this Period 250.00
City Cranberry Twp State PA Zip Code 16066	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21835912 Date of Disbursement 10 / 21 / 2005
Mailing Address Christopher Maurer 205 N3 Carpenter Road SE		Amount of Each Disbursement this Period 25.00
City Lacey State WA Zip Code 98503	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21835913 Date of Disbursement 10 / 31 / 2005
Mailing Address Valerie Block 50 Glenwood Rd		Amount of Each Disbursement this Period 250.00
City Montclair State NJ Zip Code 07043	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21835914 Date of Disbursement 10 / 13 / 2005
Mailing Address Bonnie Morgan 205 East Joppa Road		Amount of Each Disbursement this Period 50.00
City Towson	State MD	
Zip Code 21286		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21835915 Date of Disbursement 10 / 15 / 2005
Mailing Address Carol Oksala 5 Perth Place		Amount of Each Disbursement this Period 50.00
City Glenmoore	State PA	
Zip Code 19343		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21835916 Date of Disbursement 10 / 11 / 2005
Mailing Address Eleanor Endsley 4970 Boardwalk PI		Amount of Each Disbursement this Period 100.00
City Indianapolis	State IN	
Zip Code 46220		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21835917 Date of Disbursement 10 / 14 / 2005
Mailing Address Doris Coster 135 Valentine Road		Amount of Each Disbursement this Period 100.00
City Pomfret Ctr State CT Zip Code 06259	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21835918 Date of Disbursement 10 / 20 / 2005
Mailing Address Barbara Reid 201 W. Evergreen Avenue		Amount of Each Disbursement this Period 100.00
City Philadelphia State PA Zip Code 19118	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21835919 Date of Disbursement 10 / 27 / 2005
Mailing Address Eva Apfelbaum 92 Foster Street		Amount of Each Disbursement this Period 20.00
City Littelton State MA Zip Code 01460	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Lois Murphy Contributions</p> <p>Full Name (Last, First, Middle Initial) Lois Murphy Contributions</p> <p>Mailing Address Alexis Marmar 200 Locust Street</p> <p>City Philadelphia State PA Zip Code 19106</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21835920 Date of Disbursement 10 / 17 / 2005</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Lois Murphy Contributions</p> <p>Full Name (Last, First, Middle Initial) Lois Murphy Contributions</p> <p>Mailing Address Linda Wise 4749 Old Post Ct</p> <p>City Boulder State CO Zip Code 80301</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21835921 Date of Disbursement 10 / 14 / 2005</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Lois Murphy Contributions</p> <p>Full Name (Last, First, Middle Initial) Lois Murphy Contributions</p> <p>Mailing Address Allison Brower 4745 Espana Court</p> <p>City Carmichael State CA Zip Code 95608</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21835922 Date of Disbursement 10 / 27 / 2005</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

**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 checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21835923 Date of Disbursement 10 / 21 / 2005
Mailing Address Linda White 1120 E. Balboa Boulevard		Amount of Each Disbursement this Period 200.00
City Balboa State CA Zip Code 92661	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21835924 Date of Disbursement 10 / 13 / 2005
Mailing Address Jeanne Snodgrass 10501 Lagrima De Oro NE		Amount of Each Disbursement this Period 100.00
City Albuquerque State NM Zip Code 87111	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21835925 Date of Disbursement 10 / 03 / 2005
Mailing Address John Poplawski 4726 San Feliciano Drive		Amount of Each Disbursement this Period 50.00
City Woodland Hills State CA Zip Code 91364	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21835926 Date of Disbursement 10 / 09 / 2005
Mailing Address Sandra Laurenson 937 Trimble Place		Amount of Each Disbursement this Period 50.00
City Sagamore Hills State OH Zip Code 44067	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21835927 Date of Disbursement 10 / 04 / 2005
Mailing Address Marcia Rider 20 Acacia Way		Amount of Each Disbursement this Period 100.00
City Santa Cruz State CA Zip Code 95062	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21835928 Date of Disbursement 10 / 17 / 2005
Mailing Address Joan Silva-Kniseley 1118 West Outer Drive		Amount of Each Disbursement this Period 100.00
City Oak Ridge State TN Zip Code 37830	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Laurie Barenborg Mailing Address Laurie Barenborg 4610 S. Bradford Street City Seattle State WA Zip Code 98118 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835929 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Gustav Papanek Mailing Address Gustav Papanek 2 Mason Street City Lexington State MA Zip Code 02421 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835930 Date of Disbursement 10 / 19 / 2005 Amount of Each Disbursement this Period 75.00 [MEMO ITEM] MEMO
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C. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Charlotte Moss Mailing Address Charlotte Moss 134 E 71st St City New York State NY Zip Code 10021 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835931 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Joan Martini 2 Caryl Lane City: Philadelphia State: PA Zip Code: 19118 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835932 Date of Disbursement 10 / 17 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Ann Friend 4414 Durant Street, # 111 City: Deer Park State: TX Zip Code: 77536 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835933 Date of Disbursement 10 / 17 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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C. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Adalyn Brugger 1973 Retreat Drive City: Mechanicsville State: VA Zip Code: 23111 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835934 Date of Disbursement 10 / 12 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21835935 Date of Disbursement 10 / 15 / 2005
Mailing Address Steve Schwartz 425 S. Chickasaw Trail #348		Amount of Each Disbursement this Period 50.00
City Orlando State FL Zip Code 32825	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21835936 Date of Disbursement 10 / 03 / 2005
Mailing Address Mignon Adams 1922 Pemberton Street		Amount of Each Disbursement this Period 50.00
City Philadelphia State PA Zip Code 19146	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21835937 Date of Disbursement 10 / 14 / 2005
Mailing Address Rosemary Vimont 1922 Oregon Street		Amount of Each Disbursement this Period 50.00
City Berkeley State CA Zip Code 94703	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address Fred Golding 1113 Emeral Bay City Laguna Beach State CA Zip Code 92655 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835938 Date of Disbursement 10 / 27 / 2005 Amount of Each Disbursement this Period 60.00 [MEMO ITEM] MEMO
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B. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address Jonathan Salomon 192 Waterman St # 3 City Providence State RI Zip Code 02906 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835939 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address Susan Borke 4102 38th St NW City Washington State DC Zip Code 20016 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835940 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21835941 Date of Disbursement 10 / 28 / 2005
Mailing Address Lisa Arbeiter P.O. Box 311		Amount of Each Disbursement this Period 25.00
City Metuchen State NJ Zip Code 08840	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21835942 Date of Disbursement 10 / 12 / 2005
Mailing Address Gloria Deison 1311 Peacefield Place		Amount of Each Disbursement this Period 100.00
City Tallahassee State FL Zip Code 32308	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21835943 Date of Disbursement 10 / 27 / 2005
Mailing Address Robin Hanes 191 Lynn Cove Road		Amount of Each Disbursement this Period 250.00
City Asheville State NC Zip Code 28804	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Janice Doxtator 1909 Plover Street City: Stevens Point State: WI Zip Code: 54481 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835944 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Amicie Zimmerman 40 Wooldtown Road City: Wernersville State: PA Zip Code: 19565 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835945 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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C. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Susan Fisher 40 Woodside Avenue City: Westport State: CT Zip Code: 06880 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835946 Date of Disbursement 10 / 28 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21835947 Date of Disbursement 10 / 11 / 2005
Mailing Address Margaret Davey 4 Woodland Crescent		Amount of Each Disbursement this Period 25.00
City South Orange State NJ Zip Code 07079	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21835948 Date of Disbursement 10 / 06 / 2005
Mailing Address Beatrice Nold 5954-3B Autumnwood Drive		Amount of Each Disbursement this Period 100.00
City Walnut Creek State CA Zip Code 94595	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21835949 Date of Disbursement 10 / 03 / 2005
Mailing Address Kristin Olsson 11127 Midway Road		Amount of Each Disbursement this Period 5.00
City Dallas State TX Zip Code 75229	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21835950 Date of Disbursement 10 / 12 / 2005
Mailing Address Dorothy Whitmore 1309 N. Clayton Street		Amount of Each Disbursement this Period 250.00
City Wilmington State DE Zip Code 19806	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21835951 Date of Disbursement 10 / 11 / 2005
Mailing Address Roberta Ballard PO Box 1022		Amount of Each Disbursement this Period 250.00
City Bodega Bay State CA Zip Code 94923	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21835952 Date of Disbursement 10 / 20 / 2005
Mailing Address Elinor Finkelstein 1307 Stotesbury Avenue		Amount of Each Disbursement this Period 25.00
City Wyndmoor State PA Zip Code 19038	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21835953 Date of Disbursement 10 / 28 / 2005
Mailing Address Victoria Lowell 188 Sippewissett Road		Amount of Each Disbursement this Period 100.00
City Falmouth	State MA	
Zip Code 02540		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21835954 Date of Disbursement 10 / 03 / 2005
Mailing Address Jennifer Whitaker 39 5th Avenue		Amount of Each Disbursement this Period 100.00
City New York	State NY	
Zip Code 10003		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21835955 Date of Disbursement 10 / 04 / 2005
Mailing Address Clair Sharpless 1 Drumlin Road		Amount of Each Disbursement this Period 100.00
City West Simsbury	State CT	
Zip Code 06092		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21835956 Date of Disbursement 10 / 03 / 2005
Mailing Address Barbara Lawrence 383 South Middlebush Road		Amount of Each Disbursement this Period 100.00
City Somerset	State NJ	
Zip Code 08873		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21835957 Date of Disbursement 10 / 04 / 2005
Mailing Address Arlene Popkin 307 Knollwood Road Ext		Amount of Each Disbursement this Period 50.00
City Elmsford	State NY	
Zip Code 10523		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21835958 Date of Disbursement 10 / 28 / 2005
Mailing Address Clark Simms 1 Breezy Hill Road		Amount of Each Disbursement this Period 25.00
City Copake Falls	State NY	
Zip Code 12517		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21835959 Date of Disbursement 10 / 17 / 2005
Mailing Address Frances Lax 185 Medford Leas		Amount of Each Disbursement this Period 100.00
City Medford State NJ Zip Code 08055	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21835960 Date of Disbursement 10 / 25 / 2005
Mailing Address Samona Sheppard 1301 N Tamiami Trl Apt 713		Amount of Each Disbursement this Period 25.00
City Sarasota State FL Zip Code 34236	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21835961 Date of Disbursement 10 / 05 / 2005
Mailing Address Patricia Miller 6015 Wellesley Avenue		Amount of Each Disbursement this Period 100.00
City Pittsburgh State PA Zip Code 15206	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21835962 Date of Disbursement 10 / 01 / 2005
Mailing Address Sharon Stein 1035 Leonello Avenue		Amount of Each Disbursement this Period 25.00
City Los Altos State CA Zip Code 94024	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21835963 Date of Disbursement 10 / 25 / 2005
Mailing Address Nancy Anderson 23 Teresa Road		Amount of Each Disbursement this Period 50.00
City Hopkinton State MA Zip Code 01748	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21835964 Date of Disbursement 10 / 31 / 2005
Mailing Address Joan Wendling 11089 VanKal Ave.		Amount of Each Disbursement this Period 50.00
City Lawton State MI Zip Code 49065	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21835965 Date of Disbursement																				
Mailing Address Susanna Davison 1301 Irving Avenue		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>0</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	0	3	/	2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0	/	0	3	/	2	0	0	5													
City Wheaton	State IL	Zip Code 60187																				
Purpose of Disbursement Candidate Contrib Earmarked		Amount of Each Disbursement this Period <table border="1"><tr><td>50.00</td></tr></table>	50.00																			
50.00																						
Candidate Name		Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO																				
State: District:																						

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21835966 Date of Disbursement																				
Mailing Address Jeannine Koessel 18064 N. Somerset Drive		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>0</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	0	4	/	2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0	/	0	4	/	2	0	0	5													
City Surprise	State AZ	Zip Code 85374																				
Purpose of Disbursement Candidate Contrib Earmarked		Amount of Each Disbursement this Period <table border="1"><tr><td>25.00</td></tr></table>	25.00																			
25.00																						
Candidate Name		Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO																				
State: District:																						

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21835967 Date of Disbursement																				
Mailing Address Katherine Simpson 1001 Spring Street, Apt. 805		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>1</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	4	/	2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0	/	1	4	/	2	0	0	5													
City Silver Spring	State MD	Zip Code 20910																				
Purpose of Disbursement Candidate Contrib Earmarked		Amount of Each Disbursement this Period <table border="1"><tr><td>25.00</td></tr></table>	25.00																			
25.00																						
Candidate Name		Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO																				
State: District:																						

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Suzanne Seubert PO Box 174 City: Wilmington State: DE Zip Code: 19899 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835968 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Catherine Gerhold 1804 Wightman Street City: Pittsburgh State: PA Zip Code: 15217 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835969 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 200.00 [MEMO ITEM] MEMO
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C. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: John O'Toole 3601 Connecticut Avenue NW City: Washington State: DC Zip Code: 20008 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835970 Date of Disbursement 10 / 27 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21835971 Date of Disbursement 10 / 14 / 2005
Mailing Address Virginia Mattson 3517 17th Way SE		Amount of Each Disbursement this Period 100.00
City Olympia State WA Zip Code 98501	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21835972 Date of Disbursement 10 / 30 / 2005
Mailing Address Sally Kuder 10 Elmwood Ave		Amount of Each Disbursement this Period 100.00
City Narberth State PA Zip Code 19072	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21835973 Date of Disbursement 10 / 31 / 2005
Mailing Address Marie Blount 35 Young Avenue		Amount of Each Disbursement this Period 100.00
City Croton Hdsn State NY Zip Code 10520	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21835974 Date of Disbursement 10 / 25 / 2005
Mailing Address Richard Foust 180 N. 4th Street, Apt. 607		Amount of Each Disbursement this Period 50.00
City San Jose State CA Zip Code 95112	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21835975 Date of Disbursement 10 / 09 / 2005
Mailing Address Kenneth Salinger 18 Putnam Road		Amount of Each Disbursement this Period 100.00
City Arlington State MA Zip Code 02474	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21835976 Date of Disbursement 10 / 06 / 2005
Mailing Address Laura Watson 6144 Fremont Circle		Amount of Each Disbursement this Period 50.00
City Camarillo State CA Zip Code 93012	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Lois Murphy Contributions</p> <p>Full Name (Last, First, Middle Initial) Lois Murphy Contributions</p> <p>Mailing Address Ann Hamory 18 Erin Drive</p> <p>City Danville State PA Zip Code 17821</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p>Transaction ID: 21835977</p> <p>Date of Disbursement 10 / 04 / 2005</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/ Type</p>

<p>B. Lois Murphy Contributions</p> <p>Full Name (Last, First, Middle Initial) Lois Murphy Contributions</p> <p>Mailing Address Alice Burks 3445 Vintage Valley Road</p> <p>City Ann Arbor State MI Zip Code 48105</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p>Transaction ID: 21835978</p> <p>Date of Disbursement 10 / 11 / 2005</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/ Type</p>

<p>C. Lois Murphy Contributions</p> <p>Full Name (Last, First, Middle Initial) Lois Murphy Contributions</p> <p>Mailing Address Gerrish Milliken PO Box 1880</p> <p>City Oroville State WA Zip Code 98844</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p>Transaction ID: 21835979</p> <p>Date of Disbursement 10 / 25 / 2005</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/ Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Estelle Meislich 338 Lacey Drive City: New Milford State: NJ Zip Code: 07646 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835980 Date of Disbursement 10 / 12 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Roy Ickes 1274 Overlook Drive City: Washington State: PA Zip Code: 15301 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835981 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Barbara Berney 624 E 20th St Apt 1D City: New York State: NY Zip Code: 10009 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835982 Date of Disbursement 10 / 05 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address Mary Zeis 335 Whispering Pines City Loveland State OH Zip Code 45140 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835983 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address Robert Hartmann 335 Via Concha City Aptos State CA Zip Code 95003 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835984 Date of Disbursement 10 / 07 / 2005 Amount of Each Disbursement this Period 500.00 [MEMO ITEM] MEMO
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C. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address Richard Toole PO Box 256 City Oak Bluffs State MA Zip Code 02557 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21835985 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Joel Ginzberg PO Box 873 City: Stone Ridge State: NY Zip Code: 12484 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835986 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Ruth Gottlieb 3300 Darby Rd Apt 5213 City: Haverford State: PA Zip Code: 19041 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835987 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Ruth Hailperin 175 W. North Street, Apt. 234C City: Nazaret State: PA Zip Code: 18064 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835988 Date of Disbursement 10 / 21 / 2005 Amount of Each Disbursement this Period 75.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Mary Favaro 626 14th Ave East City: Seattle State: WA Zip Code: 98112 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835989 Date of Disbursement 10 / 16 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Margaret Poole 33 Sunset Road City: Wayland State: MA Zip Code: 01778 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835990 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Elaine Togneri 33 Middlesex Blvd City: Monroe Twp State: NJ Zip Code: 08831 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835991 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address Rhoda Honigman PO Box 294 City Oilville State VA Zip Code 23129 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835992 Date of Disbursement 10 / 07 / 2005 Amount of Each Disbursement this Period 300.00 [MEMO ITEM] MEMO
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B. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address Bernice Weissbourd PO Box 410 City Winnetka State IL Zip Code 60093 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835993 Date of Disbursement 10 / 05 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address Charles Waldren 644 Spindlewood City Pittsboro State NC Zip Code 27312 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835994 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(check only one)

PAGE 485 / 1975

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Lynette Reilly 12516 Davan Drive City: Silver Spring State: MD Zip Code: 20904 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835995 Date of Disbursement 10 / 25 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Robert Lande 325 Central Park W. City: New York State: NY Zip Code: 10025 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835996 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Arthur Lazarus 3201 Fessenden Street, N.W. City: Washington State: DC Zip Code: 20008 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21835997 Date of Disbursement 10 / 21 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

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

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21835998 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address Louise McCagg 32 Washington Square West		Amount of Each Disbursement this Period 500.00
City New York State NY Zip Code 10011	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21835999 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address Robert Meagher 108 Curtis Street		Amount of Each Disbursement this Period 10.00
City Somerville State MA Zip Code 02144	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21836000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address Lorette Zirker PO Box 249		Amount of Each Disbursement this Period 100.00
City High Rolls State NM Zip Code 88325	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21836001 Date of Disbursement 10 / 28 / 2005
Mailing Address Sheila Gershen PO Box 292		Amount of Each Disbursement this Period 25.00
City Santa Fe	State NM	
Zip Code 87504		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21836002 Date of Disbursement 10 / 27 / 2005
Mailing Address Cynthia Schmidt 329 S Shelley Lake Ln		Amount of Each Disbursement this Period 100.00
City Spokane Valley	State WA	
Zip Code 99037		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21836003 Date of Disbursement 10 / 05 / 2005
Mailing Address Gretchen Keiser PO Box 21883		Amount of Each Disbursement this Period 25.00
City Juneau	State AK	
Zip Code 99802		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21836004 Date of Disbursement 10 / 03 / 2005
Mailing Address Katha Pollitt 317 West 93rd Street, #4A		Amount of Each Disbursement this Period 100.00
City New York	State NY	
Zip Code 10025		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21836005 Date of Disbursement 10 / 07 / 2005
Mailing Address Dennis White PO Box 540127		Amount of Each Disbursement this Period 100.00
City Dallas	State TX	
Zip Code 75354		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21836006 Date of Disbursement 10 / 02 / 2005
Mailing Address Diane Grotz 1241 Huron Road		Amount of Each Disbursement this Period 25.00
City North Brunswick	State NJ	
Zip Code 08902		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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Detailed Summary Page

FOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address John Wolf PO Box 1429 City Sanibel State FL Zip Code 33957 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836007 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address Carol Nechemias 314 Oak Hill Drive City Middletown State PA Zip Code 17057 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836008 Date of Disbursement 10 / 28 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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C. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address Barbara Matthews PO Box 10553 City Fairbanks State AK Zip Code 99710 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836009 Date of Disbursement 10 / 05 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Sheridan Harvey 110 6th Street SE # 303 City: Washington State: DC Zip Code: 20003 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836010 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Audrey Miller P.O. Box 888 City: Ferndale State: CA Zip Code: 95536 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836011 Date of Disbursement 10 / 17 / 2005 Amount of Each Disbursement this Period 60.00 [MEMO ITEM] MEMO
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C. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Andrew Carson PO Box 709 City: Wilson State: WY Zip Code: 83014 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836012 Date of Disbursement 10 / 01 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21836013 Date of Disbursement 10 / 31 / 2005
Mailing Address Rosemary Rowan 666 Upas Street Unit 404		Amount of Each Disbursement this Period 100.00
City San Diego	State CA	
Zip Code 92103		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21836014 Date of Disbursement 10 / 11 / 2005
Mailing Address Barbara Adelman P.O. Box 225		Amount of Each Disbursement this Period 500.00
City Moro	State IL	
Zip Code 62067		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21836015 Date of Disbursement 10 / 20 / 2005
Mailing Address Patsy Rogers PO Box 616		Amount of Each Disbursement this Period 250.00
City New Suffolk	State NY	
Zip Code 11956		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21836016 Date of Disbursement 10 / 14 / 2005
Mailing Address Ingrid Heide 305 E. 24th Street		Amount of Each Disbursement this Period 15.00
City New York State NY Zip Code 10010	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21836017 Date of Disbursement 10 / 05 / 2005
Mailing Address Patti Kile E3412 Bunker Road		Amount of Each Disbursement this Period 100.00
City Waupaca State WI Zip Code 54981	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21836018 Date of Disbursement 10 / 12 / 2005
Mailing Address Mary Ittner Bob Rutemoeller		Amount of Each Disbursement this Period 50.00
City Gualala State CA Zip Code 95445	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

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<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)
EMILY's List

A. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address Penelope Taylor 1643 Seacayne Blvd. City Aptos State CA Zip Code 95003 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836019 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address Sharon Jenkins 301 Coronado Dr Apt 1004 City Denton State TX Zip Code 76209 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836020 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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C. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address Sue Hansen 6927 Fairmount Avenue City El Cerrito State CA Zip Code 94530 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836021 Date of Disbursement 10 / 28 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address Paul Petrich 945 Ward Drive City Santa Barbara State CA Zip Code 93111 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836022 Date of Disbursement 10 / 25 / 2005 Amount of Each Disbursement this Period 500.00 [MEMO ITEM] MEMO
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B. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address Barbara Corwin 1230 Winding Ridge Terrace City Colorado Springs State CO Zip Code 80919 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836023 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 200.00 [MEMO ITEM] MEMO
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C. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address Susan Thomas 1622 Locust Street City Philadelphia State PA Zip Code 19103 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836024 Date of Disbursement 10 / 12 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address Peter Politzer 701 Kettner Blvd. #53 City San Diego State CA Zip Code 92101 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836025 Date of Disbursement 10 / 07 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address Nancy Driscoll 1620 Lombardi Rd City Mount Shasta State CA Zip Code 96067 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836026 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address Margret Jacoby 912 Blossom Drive City Santa Clara State CA Zip Code 95050 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836027 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Craig Bartelt 1751 Buckingham Road City: Los Angeles State: CA Zip Code: 90019 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836028 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Matthew Morris PO Box 9157 City: Aspen State: CO Zip Code: 81612 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836029 Date of Disbursement 10 / 28 / 2005 Amount of Each Disbursement this Period 5.00 [MEMO ITEM] MEMO
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C. Lois Murphy Contributions Full Name (Last, First, Middle Initial) Mailing Address: Karen Keefer 705 Chesapeake Avenue City: Silver Spring State: MD Zip Code: 20910 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836030 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21836031 Date of Disbursement 10 / 20 / 2005
Mailing Address Dorothy Flaster 1760 East Valley Road		Amount of Each Disbursement this Period 50.00
City Montecito State CA Zip Code 93108	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21836032 Date of Disbursement 10 / 21 / 2005
Mailing Address Janet Krack 8774 Laurel Drive		Amount of Each Disbursement this Period 100.00
City Erie State PA Zip Code 16509	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21836033 Date of Disbursement 10 / 12 / 2005
Mailing Address Ann Maddox 289 Deer Path Ln		Amount of Each Disbursement this Period 100.00
City Battle Creek State MI Zip Code 49015	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21836034 Date of Disbursement 10 / 17 / 2005
Mailing Address Catherine Smith 85316 Coyote Creek Road		Amount of Each Disbursement this Period 250.00
City Veneta State OR Zip Code 97487	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21836035 Date of Disbursement 10 / 23 / 2005
Mailing Address Alicia Granor 1600 Hagys Ford Road, # 6F		Amount of Each Disbursement this Period 100.00
City Narberth State PA Zip Code 19072	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21836036 Date of Disbursement 10 / 17 / 2005
Mailing Address Patricia Wallace 831 Moonlight Drive		Amount of Each Disbursement this Period 50.00
City York State PA Zip Code 17402	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21836037 Date of Disbursement 10 / 15 / 2005
Mailing Address Joan Steele 332 Glenn Street		Amount of Each Disbursement this Period 10.00
City Ashland	State OR	
Zip Code 97520		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. Lois Murphy Contributions		Transaction ID: 21836038 Date of Disbursement 10 / 14 / 2005
Mailing Address Gordon Gibson 821 Hiawatha Drive		Amount of Each Disbursement this Period 25.00
City Elkhart	State IN	
Zip Code 46517		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. Lois Murphy Contributions		Transaction ID: 21836039 Date of Disbursement 10 / 31 / 2005
Mailing Address George Sodowick 28 Mountain Ridge Drive		Amount of Each Disbursement this Period 100.00
City Livingston	State NJ	
Zip Code 07039		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy Contributions		Transaction ID: 21836040 Date of Disbursement 10 / 03 / 2005
Mailing Address Andrew Carson PO Box 709		Amount of Each Disbursement this Period 25.00
City Wilson State WY Zip Code 83014	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Lynn Woolsey Contribution		Transaction ID: 21836041 Date of Disbursement 10 / 27 / 2005
Mailing Address Constance Greenfield 279 Sturges Highway		Amount of Each Disbursement this Period 250.00
City Westport State CT Zip Code 06880	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Lynn Woolsey Contribution		Transaction ID: 21836042 Date of Disbursement 10 / 11 / 2005
Mailing Address Julie Peppard 1094 Palms Blvd		Amount of Each Disbursement this Period 50.00
City Venice State CA Zip Code 90291	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836043 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address Jennifer Berlekamp 120 Hazel Lane		Amount of Each Disbursement this Period 500.00
City Piedmont State CA Zip Code 94611	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836044 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address Garry Cox 2620 California Avenue		Amount of Each Disbursement this Period 200.00
City Carmichael State CA Zip Code 95608	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836045 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address Elizabeth Jackets 7306 Channel View Drive		Amount of Each Disbursement this Period 10.00
City Anacortes State WA Zip Code 98221	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution Mailing Address Anne Tiracchia 725 Scott Street City Stroudsburg State PA Zip Code 18360 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836046 Date of Disbursement 10 / 28 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution Mailing Address Lou Bell 7214 Corregidor Road City Vancouver State WA Zip Code 98664 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836047 Date of Disbursement 10 / 31 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution Mailing Address Barbara Bayless 71 Faculty Place City Wilmington State OH Zip Code 45177 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836048 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution Mailing Address Judy Dorn 708 14th Avenue S. City Saint Cloud State MN Zip Code 56301 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836049 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 30.00 [MEMO ITEM] MEMO
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B. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution Mailing Address Karen Keefer 705 Chesapeake Avenue City Silver Spring State MD Zip Code 20910 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836050 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution Mailing Address Katherine Read 75 Nehoiden Road City Waban State MA Zip Code 02468 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836051 Date of Disbursement 10 / 28 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lynn Woolsey Contribution		Transaction ID: 21836052 Date of Disbursement 10 / 28 / 2005
Mailing Address Sue Hansen 6927 Fairmount Avenue		Amount of Each Disbursement this Period 100.00
City El Cerrito State CA Zip Code 94530	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Lynn Woolsey Contribution		Transaction ID: 21836053 Date of Disbursement 10 / 04 / 2005
Mailing Address Anita Wornick 765 Market Street		Amount of Each Disbursement this Period 25.00
City San Francisco State CA Zip Code 94103	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Lynn Woolsey Contribution		Transaction ID: 21836054 Date of Disbursement 10 / 11 / 2005
Mailing Address Daniel Schlesinger 6633 Forest Avenue		Amount of Each Disbursement this Period 40.00
City Hammond State IN Zip Code 46324	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836055 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address Robert Meagher 108 Curtis Street		Amount of Each Disbursement this Period 10.00
City Somerville State MA Zip Code 02144	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

B. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836056 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address Alice Katzung 65 Knoll Road		Amount of Each Disbursement this Period 100.00
City San Rafael State CA Zip Code 94901	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

C. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836057 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5
Mailing Address Irving Schulman 1483 Sutter Street, Apt. 1707		Amount of Each Disbursement this Period 25.00
City San Francisco State CA Zip Code 94109	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836058 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address Ruth Fink-Winter 24 5th Avenue NE		Amount of Each Disbursement this Period 10.00
City Le Mars State IA Zip Code 51031	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836059 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address Alan Solinger 1465 65th St Apt 253		Amount of Each Disbursement this Period 25.00
City Emeryville State CA Zip Code 94608	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836060 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address Jerrilyn Kaplan 271 Oyster Pond Road		Amount of Each Disbursement this Period 25.00
City Alameda State CA Zip Code 94502	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836061 Date of Disbursement 10 / 11 / 2005
Mailing Address: Jilma Marshall 608 Steiner Street		Amount of Each Disbursement this Period 10.00
City: San Francisco State: CA Zip Code: 94117	Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Category/Type: _____	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

B. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836062 Date of Disbursement 10 / 12 / 2005
Mailing Address: Evelyn Haynes 2303 Owens Ave Unit 101		Amount of Each Disbursement this Period 25.00
City: Fort Collins State: CO Zip Code: 80528	Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Category/Type: _____	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

C. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836063 Date of Disbursement 10 / 31 / 2005
Mailing Address: Hugh Jackson 6035 W Mansfield Ave Unit 247		Amount of Each Disbursement this Period 25.00
City: Denver State: CO Zip Code: 80235	Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Category/Type: _____	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Lynn Woolsey Contribution</p> <p>Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution</p>		<p>Transaction ID: 21836064 Date of Disbursement 10 / 25 / 2005</p>
<p>Mailing Address: Sheila Toabe Davis 7913 Vantage Avenue</p>		<p>Amount of Each Disbursement this Period 50.00</p>
<p>City: North Hollywood State: CA Zip Code: 91605</p>	<p>[MEMO ITEM] MEMO</p>	
<p>Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Category/Type: _____</p>		<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____</p>

<p>B. Lynn Woolsey Contribution</p> <p>Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution</p>		<p>Transaction ID: 21836065 Date of Disbursement 10 / 03 / 2005</p>
<p>Mailing Address: Grace Radin 107 River Road</p>		<p>Amount of Each Disbursement this Period 50.00</p>
<p>City: Nyack State: NY Zip Code: 10960</p>	<p>[MEMO ITEM] MEMO</p>	
<p>Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Category/Type: _____</p>		<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____</p>

<p>C. Lynn Woolsey Contribution</p> <p>Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution</p>		<p>Transaction ID: 21836066 Date of Disbursement 10 / 11 / 2005</p>
<p>Mailing Address: Shirley Gleich 8116 Pine Circle</p>		<p>Amount of Each Disbursement this Period 50.00</p>
<p>City: Tamarac State: FL Zip Code: 33321</p>	<p>[MEMO ITEM] MEMO</p>	
<p>Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Category/Type: _____</p>		<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p>_____</p>

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Mailing Address Kathleen Commons 5849 Garden Park Court City Carmichael State CA Zip Code 95608 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836067 Date of Disbursement 10 / 25 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Mailing Address Joan Green 555 Laurel Street City San Francisco State CA Zip Code 94118 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836068 Date of Disbursement 10 / 08 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Mailing Address Carol Leibman 100 Diplomat Drive, # 6F City Mt. Kisco State NY Zip Code 10549 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836069 Date of Disbursement 10 / 02 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Lynn Woolsey Contribution</p> <p>Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution</p>		<p>Transaction ID: 21836070 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	6		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		0	6		2	0	0	5													
<p>Mailing Address: Mary Frankel 1 Rochdale Way</p>		<p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> </p>	100.00																			
100.00																						
<p>City: Berkeley State: CA Zip Code: 94708</p>																						
<p>Purpose of Disbursement: Candidate Contrib Earmarked</p>		<p>[MEMO ITEM] MEMO</p>																				
<p>Candidate Name: _____</p>																						
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																					
<p>State: _____ District: _____</p>																						

<p>B. Lynn Woolsey Contribution</p> <p>Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution</p>		<p>Transaction ID: 21836071 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	3		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		0	3		2	0	0	5													
<p>Mailing Address: Shelley Carroll 219 Brannan Street</p>		<p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>25.00</td> </tr> </table> </p>	25.00																			
25.00																						
<p>City: San Francisco State: CA Zip Code: 94107</p>																						
<p>Purpose of Disbursement: Candidate Contrib Earmarked</p>		<p>[MEMO ITEM] MEMO</p>																				
<p>Candidate Name: _____</p>																						
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																					
<p>State: _____ District: _____</p>																						

<p>C. Lynn Woolsey Contribution</p> <p>Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution</p>		<p>Transaction ID: 21836072 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	7		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		1	7		2	0	0	5													
<p>Mailing Address: Claire Amendola 527 Fulton Lane</p>		<p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>25.00</td> </tr> </table> </p>	25.00																			
25.00																						
<p>City: Saint Helena State: CA Zip Code: 94574</p>																						
<p>Purpose of Disbursement: Candidate Contrib Earmarked</p>		<p>[MEMO ITEM] MEMO</p>																				
<p>Candidate Name: _____</p>																						
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																					
<p>State: _____ District: _____</p>																						

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<table border="1"> <tr> <td>0.00</td> </tr> </table>	0.00
0.00		
<p>TOTAL This Period (last page this line number only)</p>	<table border="1"> <tr> <td> </td> </tr> </table>	

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836073 Date of Disbursement 10 / 11 / 2005
Mailing Address Sadie Taylor 115 Kendal Drive		Amount of Each Disbursement this Period 100.00
City Oberlin State OH Zip Code 44074	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836074 Date of Disbursement 10 / 11 / 2005
Mailing Address Mary Field 515 N. Fifth		Amount of Each Disbursement this Period 50.00
City Wilmington State NC Zip Code 28401	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836075 Date of Disbursement 10 / 05 / 2005
Mailing Address Linda Alter 210 W Rittenhouse Square		Amount of Each Disbursement this Period 2100.00
City Philadelphia State PA Zip Code 19103	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836076 Date of Disbursement 10 / 25 / 2005
Mailing Address: Joan Laskoff 515 E 89th Street		Amount of Each Disbursement this Period 100.00
City: New York State: NY Zip Code: 10128	Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Category/Type: _____	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

B. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836077 Date of Disbursement 10 / 13 / 2005
Mailing Address: Ann Wansley 51 Chula Lane		Amount of Each Disbursement this Period 50.00
City: San Francisco State: CA Zip Code: 94114	Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Category/Type: _____	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

C. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836078 Date of Disbursement 10 / 05 / 2005
Mailing Address: Margaret Goodman 51 Broomall Lane		Amount of Each Disbursement this Period 100.00
City: Glen Mills State: PA Zip Code: 19342	Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Category/Type: _____	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Mailing Address: Karen Sundback 21 Kenmore Road City: Bloomfield State: CT Zip Code: 06002 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836079 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 200.00 [MEMO ITEM] MEMO
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B. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Mailing Address: Marsha Richins 508 S Glenwood Ave City: Columbia State: MO Zip Code: 65203 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836080 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Mailing Address: Debora Kailing 505 Cypress Ave City: Ukiah State: CA Zip Code: 95482 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836081 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution Mailing Address Carol Kuller 137 Great Barrington Road City West Stockbridge State MA Zip Code 01266 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836082 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution Mailing Address Ida Braun 1 Baldwin Avenue, Apt. 709 City San Mateo State CA Zip Code 94401 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836083 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 1000.00 [MEMO ITEM] MEMO
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C. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution Mailing Address Jape Taylor 500 N.W. 80th Boulevard City Gainesville State FL Zip Code 32607 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836084 Date of Disbursement 10 / 05 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(check only one)

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<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)
EMILY's List

A. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836085 Date of Disbursement 10 / 21 / 2005
Mailing Address Christopher Maurer 205 N3 Carpenter Road SE		Amount of Each Disbursement this Period 25.00
City Lacey State WA Zip Code 98503	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836086 Date of Disbursement 10 / 06 / 2005
Mailing Address Donald Johnson 5 W. Oak Street		Amount of Each Disbursement this Period 50.00
City Ramsey State NJ Zip Code 07446	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836087 Date of Disbursement 10 / 14 / 2005
Mailing Address Doris Coster 135 Valentine Road		Amount of Each Disbursement this Period 100.00
City Pomfret Ctr State CT Zip Code 06259	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836088 Date of Disbursement 10 / 04 / 2005
Mailing Address: Barbara Woodward 10559 Bragg Avenue		Amount of Each Disbursement this Period 50.00
City: Grass Valley State: CA Zip Code: 95945	Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Category/Type: _____	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

B. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836089 Date of Disbursement 10 / 06 / 2005
Mailing Address: Geneva Loveland 4801 Connecticut Ave. NW		Amount of Each Disbursement this Period 35.00
City: Washington State: DC Zip Code: 20008	Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Category/Type: _____	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

C. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836090 Date of Disbursement 10 / 27 / 2005
Mailing Address: Marc Helgenberger 200 Park Avenue South		Amount of Each Disbursement this Period 100.00
City: New York State: NY Zip Code: 10003	Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Category/Type: _____	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Lynn Woolsey Contribution</p> <p>Full Name (Last, First, Middle Initial) Lynn Woolsey</p> <p>Mailing Address Linda Wise 4749 Old Post Ct</p> <p>City Boulder State CO Zip Code 80301</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836091 Date of Disbursement 10 / 14 / 2005</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Lynn Woolsey Contribution</p> <p>Full Name (Last, First, Middle Initial) Lynn Woolsey</p> <p>Mailing Address Bill Ritchey 47479 Marrakesh Drive</p> <p>City Palm Desert State CA Zip Code 92260</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836092 Date of Disbursement 10 / 31 / 2005</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Lynn Woolsey Contribution</p> <p>Full Name (Last, First, Middle Initial) Lynn Woolsey</p> <p>Mailing Address Helen Rich 200 Leeder Hill Dr Apt 317</p> <p>City Hamden State CT Zip Code 06517</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836093 Date of Disbursement 10 / 12 / 2005</p> <p>Amount of Each Disbursement this Period 15.00</p> <p>[MEMO ITEM] MEMO</p>
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SUBTOTAL of Disbursements This Page (optional)	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Lynn Woolsey Contribution</p> <p>Full Name (Last, First, Middle Initial) Lynn Woolsey</p>		<p>Transaction ID: 21836094 Date of Disbursement 10 / 27 / 2005</p>
<p>Mailing Address Allison Brower 4745 Espana Court</p>		<p>Amount of Each Disbursement this Period 50.00</p>
<p>City Carmichael State CA Zip Code 95608</p>	<p>Category/Type</p>	
<p>Purpose of Disbursement Candidate Contrib Earmarked</p>		<p>[MEMO ITEM] MEMO</p>
<p>Candidate Name</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>B. Lynn Woolsey Contribution</p> <p>Full Name (Last, First, Middle Initial) Lynn Woolsey</p>		<p>Transaction ID: 21836095 Date of Disbursement 10 / 03 / 2005</p>
<p>Mailing Address John Poplawski 4726 San Feliciano Drive</p>		<p>Amount of Each Disbursement this Period 50.00</p>
<p>City Woodland Hills State CA Zip Code 91364</p>	<p>Category/Type</p>	
<p>Purpose of Disbursement Candidate Contrib Earmarked</p>		<p>[MEMO ITEM] MEMO</p>
<p>Candidate Name</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>C. Lynn Woolsey Contribution</p> <p>Full Name (Last, First, Middle Initial) Lynn Woolsey</p>		<p>Transaction ID: 21836096 Date of Disbursement 10 / 04 / 2005</p>
<p>Mailing Address Marguerite Jehle 4717 Collinos Way</p>		<p>Amount of Each Disbursement this Period 100.00</p>
<p>City Oceanside State CA Zip Code 92056</p>	<p>Category/Type</p>	
<p>Purpose of Disbursement Candidate Contrib Earmarked</p>		<p>[MEMO ITEM] MEMO</p>
<p>Candidate Name</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution Mailing Address Marcia Rider 20 Acacia Way City Santa Cruz State CA Zip Code 95062 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836097 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution Mailing Address Annetta Dillon 4652 North Ila Avenue City Fresno State CA Zip Code 93705 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836098 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution Mailing Address Linda Wise 4614 W. Feemster Avenue City Visalia State CA Zip Code 93277 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836099 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Mailing Address: Laurie Barenborg 4610 S. Bradford Street City: Seattle State: WA Zip Code: 98118 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836100 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Mailing Address: Charlotte Moss 134 E 71st St City: New York State: NY Zip Code: 10021 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836101 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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C. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Mailing Address: Gustav Papanek 2 Mason Street City: Lexington State: MA Zip Code: 02421 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836102 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5 Amount of Each Disbursement this Period 75.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836103 Date of Disbursement 10 / 14 / 2005
Mailing Address: Joan Werner 4594 Euclid Avenue		Amount of Each Disbursement this Period 20.00
City: San Diego State: CA Zip Code: 92115		
Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____		[MEMO ITEM] MEMO
Office Sought: <input type="checkbox"/> House Disbursement For: 2006 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____		

B. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836104 Date of Disbursement 10 / 11 / 2005
Mailing Address: Vivian Lamb 13382 Fairmont Way		Amount of Each Disbursement this Period 100.00
City: Santa Ana State: CA Zip Code: 92705		
Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____		[MEMO ITEM] MEMO
Office Sought: <input type="checkbox"/> House Disbursement For: 2006 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____		

C. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836105 Date of Disbursement 10 / 25 / 2005
Mailing Address: Dolores Andrus 1975 Bacon Avenue		Amount of Each Disbursement this Period 50.00
City: Berkley State: MI Zip Code: 48072		
Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____		[MEMO ITEM] MEMO
Office Sought: <input type="checkbox"/> House Disbursement For: 2006 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____		

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836106 Date of Disbursement 10 / 17 / 2005
Mailing Address Ann Friend 4414 Durant Street, # 111		Amount of Each Disbursement this Period 25.00
City Deer Park State TX Zip Code 77536	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836107 Date of Disbursement 10 / 15 / 2005
Mailing Address Steve Schwartz 425 S. Chickasaw Trail #348		Amount of Each Disbursement this Period 50.00
City Orlando State FL Zip Code 32825	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836108 Date of Disbursement 10 / 03 / 2005
Mailing Address Joan Hull 193 San Andreas Drive		Amount of Each Disbursement this Period 50.00
City Novato State CA Zip Code 94945	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836109 Date of Disbursement 10 / 04 / 2005
Mailing Address Alice Littlefield 13151 E. Isthmus		Amount of Each Disbursement this Period 50.00
City Omena State MI Zip Code 49674	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836110 Date of Disbursement 10 / 13 / 2005
Mailing Address Susan Morrison 4205 Ramsey Avenue		Amount of Each Disbursement this Period 25.00
City Austin State TX Zip Code 78756	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836111 Date of Disbursement 10 / 27 / 2005
Mailing Address Fred Golding 1113 Emeral Bay		Amount of Each Disbursement this Period 60.00
City Laguna Beach State CA Zip Code 92655	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Mailing Address: Suzanne Angevine 4160 26th Street City: Boulder State: CO Zip Code: 80304 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836112 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period _____ 50.00 [MEMO ITEM] MEMO
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B. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Mailing Address: Charles Goan 191 Saint Francis Blvd City: Daly City State: CA Zip Code: 94015 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836113 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5 Amount of Each Disbursement this Period _____ 25.00 [MEMO ITEM] MEMO
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C. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Mailing Address: Gloria Deison 1311 Peacefield Place City: Tallahassee State: FL Zip Code: 32308 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836114 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5 Amount of Each Disbursement this Period _____ 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	_____ 0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution Mailing Address Robin Hanes 191 Lynn Cove Road City Asheville State NC Zip Code 28804 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836115 Date of Disbursement 10 / 27 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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B. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution Mailing Address Annabelle Cloner 1909 Skycrest Dr. #11 City Walnut Creek State CA Zip Code 94595 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836116 Date of Disbursement 10 / 28 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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C. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution Mailing Address Mary Dimperio 4000 Cathedral Avenue NW City Washington State DC Zip Code 20016 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836117 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Lynn Woolsey Contribution</p> <p>Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution</p>		<p>Transaction ID: 21836118 Date of Disbursement 10 / 03 / 2005</p>
<p>Mailing Address Kristin Olsson 11127 Midway Road</p>		<p>Amount of Each Disbursement this Period 5.00</p>
<p>City Dallas State TX Zip Code 75229</p>	<p>[MEMO ITEM] MEMO</p>	
<p>Purpose of Disbursement Candidate Contrib Earmarked Candidate Name</p>		<p>Category/Type</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	

<p>B. Lynn Woolsey Contribution</p> <p>Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution</p>		<p>Transaction ID: 21836119 Date of Disbursement 10 / 21 / 2005</p>
<p>Mailing Address Jean Wilcox 1900 Vallejo No. 402</p>		<p>Amount of Each Disbursement this Period 100.00</p>
<p>City San Francisco State CA Zip Code 94123</p>	<p>[MEMO ITEM] MEMO</p>	
<p>Purpose of Disbursement Candidate Contrib Earmarked Candidate Name</p>		<p>Category/Type</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	

<p>C. Lynn Woolsey Contribution</p> <p>Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution</p>		<p>Transaction ID: 21836120 Date of Disbursement 10 / 31 / 2005</p>
<p>Mailing Address Patricia Kenney 40 Camino Alto, # 15109</p>		<p>Amount of Each Disbursement this Period 100.00</p>
<p>City Mill Valley State CA Zip Code 94941</p>	<p>[MEMO ITEM] MEMO</p>	
<p>Purpose of Disbursement Candidate Contrib Earmarked Candidate Name</p>		<p>Category/Type</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836121 Date of Disbursement 10 / 12 / 2005
Mailing Address Dorothy Whitmore 1309 N. Clayton Street		Amount of Each Disbursement this Period 250.00
City Wilmington State DE Zip Code 19806	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836122 Date of Disbursement 10 / 13 / 2005
Mailing Address Arlene Webber 4 Surrey Court		Amount of Each Disbursement this Period 100.00
City Rancho Mirage State CA Zip Code 92270	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836123 Date of Disbursement 10 / 13 / 2005
Mailing Address Linda Farley 2299 Spring Rose Rd.		Amount of Each Disbursement this Period 100.00
City Verona State WI Zip Code 53593	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lynn Woolsey Contribution		Transaction ID: 21836124 Date of Disbursement 10 / 05 / 2005
Mailing Address Sally French 18776 Jayhawk Drive		Amount of Each Disbursement this Period 25.00
City Penn Valley State CA Zip Code 95946	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Lynn Woolsey Contribution		Transaction ID: 21836125 Date of Disbursement 10 / 12 / 2005
Mailing Address Peter Zeffel 3840 Elliot Ave. S.		Amount of Each Disbursement this Period 25.00
City Minneapolis State MN Zip Code 55407	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Lynn Woolsey Contribution		Transaction ID: 21836126 Date of Disbursement 10 / 20 / 2005
Mailing Address Janet Gilkeson 18755 W. Bernardo Drive		Amount of Each Disbursement this Period 50.00
City San Diego State CA Zip Code 92127	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lynn Woolsey Contribution		Transaction ID: 21836127 Date of Disbursement 10 / 05 / 2005
Mailing Address Jacqueline Franco 18616 N. 99th Avenue		Amount of Each Disbursement this Period 50.00
City Sun City	State AZ	
Zip Code 85373		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Lynn Woolsey Contribution		Transaction ID: 21836128 Date of Disbursement 10 / 11 / 2005
Mailing Address Jerilyn Gelt 1860 Jackson Street Apt. 502		Amount of Each Disbursement this Period 100.00
City San Francisco	State CA	
Zip Code 94109		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Lynn Woolsey Contribution		Transaction ID: 21836129 Date of Disbursement 10 / 25 / 2005
Mailing Address Samona Sheppard 1301 N Tamiami Trl Apt 713		Amount of Each Disbursement this Period 25.00
City Sarasota	State FL	
Zip Code 34236		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836130 Date of Disbursement 10 / 01 / 2005
Mailing Address Sharon Stein 1035 Leonello Avenue		Amount of Each Disbursement this Period 25.00
City Los Altos State CA Zip Code 94024	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836131 Date of Disbursement 10 / 04 / 2005
Mailing Address Joshua Rowan 3800 Lake Bayshore Dr Apt 101		Amount of Each Disbursement this Period 25.00
City Bradenton State FL Zip Code 34205	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836132 Date of Disbursement 10 / 14 / 2005
Mailing Address Katherine Simpson 1001 Spring Street, Apt. 805		Amount of Each Disbursement this Period 25.00
City Silver Spring State MD Zip Code 20910	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution Mailing Address Linda Manry 18179 Bancroft Avenue City Monte Sereno State CA Zip Code 95030 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836133 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution Mailing Address Nancy Anderson 23 Teresa Road City Hopkinton State MA Zip Code 01748 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836134 Date of Disbursement 10 / 25 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution Mailing Address Eugenia Durdall 1812 Edgewood Lane City Menlo Park State CA Zip Code 94025 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836135 Date of Disbursement 10 / 21 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution Mailing Address Karlene Bergold 1811 Sheridan Avenue City San Diego State CA Zip Code 92103 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836136 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution Mailing Address Catherine Gerhold 1804 Wightman Street City Pittsburgh State PA Zip Code 15217 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836137 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 200.00 [MEMO ITEM] MEMO
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C. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution Mailing Address Leal Abbott 359 Quail Drive City Woodland State CA Zip Code 95695 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836138 Date of Disbursement 10 / 27 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

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

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Detailed Summary Page

FOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lynn Woolsey Contribution

Full Name (Last, First, Middle Initial)
Lynn Woolsey

Mailing Address Edith Mendez
1168 Santa Cruz Way

City Rohnert Park State CA Zip Code 94928

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2006
 Primary General
 Other (specify) ▼

Transaction ID: 21836139

Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]
MEMO

B. Lynn Woolsey Contribution

Full Name (Last, First, Middle Initial)
Lynn Woolsey

Mailing Address Richard Foust
180 N. 4th Street, Apt. 607

City San Jose State CA Zip Code 95112

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2006
 Primary General
 Other (specify) ▼

Transaction ID: 21836140

Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]
MEMO

C. Lynn Woolsey Contribution

Full Name (Last, First, Middle Initial)
Lynn Woolsey

Mailing Address Barbara Berney
624 E 20th St Apt 1D

City New York State NY Zip Code 10009

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2006
 Primary General
 Other (specify) ▼

Transaction ID: 21836141

Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]
MEMO

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution Mailing Address Shelley Carton 3373 W. Millwheel Lane City Tucson State AZ Zip Code 85741 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836142 Date of Disbursement 10 / 21 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution Mailing Address Robert Hartmann 335 Via Concha City Aptos State CA Zip Code 95003 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836143 Date of Disbursement 10 / 07 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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C. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution Mailing Address Matthew Morris PO Box 9157 City Aspen State CO Zip Code 81612 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836144 Date of Disbursement 10 / 28 / 2005 Amount of Each Disbursement this Period 5.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836145 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address: Joel Ginzberg PO Box 873		Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
City: Stone Ridge State: NY Zip Code: 12484	Category/ Type	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836146 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address: Andrew Carson PO Box 709		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
City: Wilson State: WY Zip Code: 83014	Category/ Type	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836147 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 5
Mailing Address: Andrew Carson PO Box 709		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
City: Wilson State: WY Zip Code: 83014	Category/ Type	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 536 / 1975

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lynn Woolsey Contribution		Transaction ID: 21836148 Date of Disbursement 10 / 13 / 2005
Mailing Address Rebecca Grothaus 1 W. Franklin Street, Apt. 302		Amount of Each Disbursement this Period 50.00
City Troy	State OH	
Zip Code 45373		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. Lynn Woolsey Contribution		Transaction ID: 21836149 Date of Disbursement 10 / 03 / 2005
Mailing Address Margaret Poole 33 Sunset Road		Amount of Each Disbursement this Period 50.00
City Wayland	State MA	
Zip Code 01778		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. Lynn Woolsey Contribution		Transaction ID: 21836150 Date of Disbursement 10 / 05 / 2005
Mailing Address Bernice Weissbourd PO Box 410		Amount of Each Disbursement this Period 100.00
City Winnetka	State IL	
Zip Code 60093		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836151 Date of Disbursement 10 / 07 / 2005
Mailing Address Rhoda Honigman PO Box 294		Amount of Each Disbursement this Period 300.00
City Oilville State VA Zip Code 23129	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836152 Date of Disbursement 10 / 20 / 2005
Mailing Address Robert Lande 325 Central Park W.		Amount of Each Disbursement this Period 50.00
City New York State NY Zip Code 10025	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836153 Date of Disbursement 10 / 28 / 2005
Mailing Address Sheila Gershen PO Box 292		Amount of Each Disbursement this Period 25.00
City Santa Fe State NM Zip Code 87504	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution Mailing Address S. C. Reichel-Cook PO Box 257 City Ross State CA Zip Code 94957 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836154 Date of Disbursement 10 / 28 / 2005 Amount of Each Disbursement this Period 20.06 [MEMO ITEM] MEMO
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B. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution Mailing Address Richard Toole PO Box 256 City Oak Bluffs State MA Zip Code 02557 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836155 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution Mailing Address June Zeitlin 320 Hicks Street City Brooklyn State NY Zip Code 11201 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836156 Date of Disbursement 10 / 17 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution Mailing Address: Gerrish Milliken PO Box 1880 City: Oroville State: WA Zip Code: 98844 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836157 Date of Disbursement: 10 / 25 / 2005 Amount of Each Disbursement this Period: 500.00 [MEMO ITEM] MEMO
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B. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution Mailing Address: Diane Grotz 1241 Huron Road City: North Brunswick State: NJ Zip Code: 08902 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836158 Date of Disbursement: 10 / 02 / 2005 Amount of Each Disbursement this Period: 25.00 [MEMO ITEM] MEMO
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C. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution Mailing Address: John Wolf PO Box 1429 City: Sanibel State: FL Zip Code: 33957 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836159 Date of Disbursement: 10 / 04 / 2005 Amount of Each Disbursement this Period: 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Mailing Address: Sheridan Harvey 110 6th Street SE # 303 City: Washington State: DC Zip Code: 20003 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836160 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Mailing Address: Angelina Erbes PO Box 1149 City: Whitefish State: MT Zip Code: 59937 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836161 Date of Disbursement 10 / 25 / 2005 Amount of Each Disbursement this Period 20.00 [MEMO ITEM] MEMO
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C. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Mailing Address: Julie Monson PO Box 1029 City: Point Reyes Sta. State: CA Zip Code: 94956 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836162 Date of Disbursement 10 / 21 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836163 Date of Disbursement 10 / 17 / 2005
Mailing Address: Audrey Miller P.O. Box 888		Amount of Each Disbursement this Period 100.00
City: Ferndale State: CA Zip Code: 95536	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____		
Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]
MEMO

B. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836164 Date of Disbursement 10 / 09 / 2005
Mailing Address: Judy Bertelsen P.O. Box 2774		Amount of Each Disbursement this Period 100.00
City: Berkeley State: CA Zip Code: 94702	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____		
Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]
MEMO

C. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836165 Date of Disbursement 10 / 12 / 2005
Mailing Address: Mary Ittner Bob Rutemoeller		Amount of Each Disbursement this Period 50.00
City: Gualala State: CA Zip Code: 95445	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____		
Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]
MEMO

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836166 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address Debbie Linthorst 7 Rumson Court		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
City Pennington State NJ Zip Code 08534		
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836167 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address Margaret Johnson 9190 Brier Rd.		Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
City La Mesa State CA Zip Code 91942		
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836168 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address Maurine Behrens 12222 Orange Drive		Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
City Whittier State CA Zip Code 90601		
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Lynn Woolsey Contribution</p> <p>Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution</p>		<p>Transaction ID: 21836169 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	4		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		1	4		2	0	0	5													
<p>Mailing Address Margret Jacoby 912 Blossom Drive</p>		<p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> </p>	100.00																			
100.00																						
<p>City Santa Clara State CA Zip Code 95050</p>																						
<p>Purpose of Disbursement Candidate Contrib Earmarked</p>		<p>[MEMO ITEM] MEMO</p>																				
<p>Candidate Name</p>																						
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																					
<p>State: District:</p>																						

<p>B. Lynn Woolsey Contribution</p> <p>Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution</p>		<p>Transaction ID: 21836170 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	3		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		0	3		2	0	0	5													
<p>Mailing Address Leslie Sternlieb 90 Edgewater Drive, Apt. 1101</p>		<p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> </p>	100.00																			
100.00																						
<p>City Coral Gables State FL Zip Code 33133</p>																						
<p>Purpose of Disbursement Candidate Contrib Earmarked</p>		<p>[MEMO ITEM] MEMO</p>																				
<p>Candidate Name</p>																						
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																					
<p>State: District:</p>																						

<p>C. Lynn Woolsey Contribution</p> <p>Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution</p>		<p>Transaction ID: 21836171 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		1	3		2	0	0	5													
<p>Mailing Address Janet Randall 862 Jonive Rd</p>		<p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> </p>	100.00																			
100.00																						
<p>City santa rosa State CA Zip Code 95472</p>																						
<p>Purpose of Disbursement Candidate Contrib Earmarked</p>		<p>[MEMO ITEM] MEMO</p>																				
<p>Candidate Name</p>																						
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																					
<p>State: District:</p>																						

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Mailing Address Catherine Smith 85316 Coyote Creek Road City Veneta State OR Zip Code 97487 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836172 Date of Disbursement 10 / 17 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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B. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Mailing Address Lynn Seaman 3324 Vernal Avenue City Merced State CA Zip Code 95340 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836173 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Mailing Address Dorothy Flaster 1760 East Valley Road City Montecito State CA Zip Code 93108 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836174 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Lynn Woolsey Contribution Full Name (Last, First, Middle Initial) Lynn Woolsey Contribution		Transaction ID: 21836175 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address L Erlenmeyer-Kimling 1 Briarwood Lane		Amount of Each Disbursement this Period 200.00
City Stamford State CT Zip Code 06903	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions		Transaction ID: 21836176 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address Dorothy Scheppke 815 216th Street, #41		Amount of Each Disbursement this Period 50.00
City Des Moines State WA Zip Code 98198	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions		Transaction ID: 21836177 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5
Mailing Address Julie Peppard 1094 Palms Blvd		Amount of Each Disbursement this Period 50.00
City Venice State CA Zip Code 90291	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Sheila Olsen 1594 Rose Lane City: Placerville State: CA Zip Code: 95667 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836178 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Thomas Leggat 81 Baker Bridge Road City: Lincoln State: MA Zip Code: 01773 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836179 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Anne Elliott 2775 Main Street City: Lawrenceville State: NJ Zip Code: 08648 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836180 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836181 Date of Disbursement 10 / 20 / 2005
Mailing Address Ginger Metcalf 807 West 7th Avenue		Amount of Each Disbursement this Period 50.00
City Spokane	State WA	
Zip Code 99204		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836182 Date of Disbursement 10 / 31 / 2005
Mailing Address Rhoda Weinstein 8060 E. Girard Avenue Apt. 709		Amount of Each Disbursement this Period 50.00
City Denver	State CO	
Zip Code 80231		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836183 Date of Disbursement 10 / 28 / 2005
Mailing Address Ina Ayliffe 15905 Bent Tree Cr. #1025		Amount of Each Disbursement this Period 25.00
City Dallas	State TX	
Zip Code 75248		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<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)
EMILY's List

<p>A. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address: Rosemary Daub 158 Roxborough Avenue</p> <p>City: Philadelphia State: PA Zip Code: 19127</p> <p>Purpose of Disbursement: Candidate Contrib Earmarked</p> <p>Candidate Name: _____</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836184 Date of Disbursement: 10 / 20 / 2005</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address: Robert Wright 274 Oakland Drive</p> <p>City: East Lansing State: MI Zip Code: 48823</p> <p>Purpose of Disbursement: Candidate Contrib Earmarked</p> <p>Candidate Name: _____</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836185 Date of Disbursement: 10 / 04 / 2005</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address: Lois Gullerud 1208 W. Daniel Street</p> <p>City: Champaign State: IL Zip Code: 61821</p> <p>Purpose of Disbursement: Candidate Contrib Earmarked</p> <p>Candidate Name: _____</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836186 Date of Disbursement: 10 / 04 / 2005</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p> </p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Jesse Kehres 8 Classic Cir City Madison State WI Zip Code 53719 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836187 Date of Disbursement 10 / 01 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Jerrilyn Kaplan 271 Oyster Pond Road City Alameda State CA Zip Code 94502 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836188 Date of Disbursement 10 / 17 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Esther Rosenbloom 725 Mount Wilson Lane City Pikesville State MD Zip Code 21208 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836189 Date of Disbursement 10 / 05 / 2005 Amount of Each Disbursement this Period 150.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address Sheila Toabe Davis 7913 Vantage Avenue</p> <p>City North Hollywood State CA Zip Code 91605</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836190 Date of Disbursement 10 / 25 / 2005</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address Marti Barody 1559 Cole Street</p> <p>City San Francisco State CA Zip Code 94117</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836191 Date of Disbursement 10 / 06 / 2005</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address Marilyn Henry 7823 Calverton Square</p> <p>City New Albany State OH Zip Code 43054</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836192 Date of Disbursement 10 / 25 / 2005</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

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ITEMIZED DISBURSEMENTS**

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836193 Date of Disbursement 10 / 14 / 2005	
Mailing Address Lori Shore 73 Ellensue Dr		Amount of Each Disbursement this Period 99.00	
City Deer Park	State NY		Purpose of Disbursement Candidate Contrib Earmarked Candidate Name
Zip Code 11729			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		[MEMO ITEM] MEMO	
State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836194 Date of Disbursement 10 / 07 / 2005	
Mailing Address Kathleen Green 7625 242nd Street SW		Amount of Each Disbursement this Period 50.00	
City Edmonds	State WA		Purpose of Disbursement Candidate Contrib Earmarked Candidate Name
Zip Code 98026			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		[MEMO ITEM] MEMO	
State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836195 Date of Disbursement 10 / 25 / 2005	
Mailing Address Marc Collin 2692 Landon Road		Amount of Each Disbursement this Period 25.00	
City Shaker Heights	State OH		Purpose of Disbursement Candidate Contrib Earmarked Candidate Name
Zip Code 44122			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		[MEMO ITEM] MEMO	
State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address Diane Parish 154 Santa Rosa Avenue</p> <p>City Sausalito State CA Zip Code 94965</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836196 Date of Disbursement 10 / 11 / 2005</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address Patricia Morton 266 Willowbrook Drive</p> <p>City North Brunswick State NJ Zip Code 08902</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836197 Date of Disbursement 10 / 14 / 2005</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address Juliane McAdam 7556 Cowan Avenue</p> <p>City Los Angeles State CA Zip Code 90045</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836198 Date of Disbursement 10 / 31 / 2005</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Jennifer Berlekamp 120 Hazel Lane City Piedmont State CA Zip Code 94611 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836199 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5 Amount of Each Disbursement this Period 500.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Dell Rhodes 75 El Camino Real City White Salmon State WA Zip Code 98672 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836200 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Amy Monk 7476 Kekaa St City Honolulu State HI Zip Code 96825 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836201 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(check only one)

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<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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Lynne Emery 1535 Bellford Avenue City: Pasadena State: CA Zip Code: 91104 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836202 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Linda Murnik 263 Camino Los Abuelos City: Santa Fe State: NM Zip Code: 87508 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836203 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Jane Curtis 7444 Spring Village Drive City: Springfield State: VA Zip Code: 22150 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836204 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5 Amount of Each Disbursement this Period 20.00 [MEMO ITEM] MEMO
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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)

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<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)
EMILY's List

<p>A. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address Robbin Frazier 7345 France Avenue N.</p> <p>City Minneapolis State MN Zip Code 55443</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836205 Date of Disbursement 10 / 05 / 2005</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address Elizabeth Jackets 7306 Channel View Drive</p> <p>City Anacortes State WA Zip Code 98221</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836206 Date of Disbursement 10 / 06 / 2005</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address Lael Braymer 2604 123rd Avenue SE</p> <p>City Bellevue State WA Zip Code 98005</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836207 Date of Disbursement 10 / 13 / 2005</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p> <p>TOTAL This Period (last page this line number only)</p>	<p>0.00</p>
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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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address: Helen Cahn 730 Camino Mirada</p> <p>City: Santa Fe State: NM Zip Code: 87505</p> <p>Purpose of Disbursement: Candidate Contrib Earmarked</p> <p>Candidate Name: _____</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836208</p> <p>Date of Disbursement: 10 / 12 / 2005</p> <p>Amount of Each Disbursement this Period: 150.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address: Bonnie Morse 729 Woodland Road</p> <p>City: Bradfordwoods State: PA Zip Code: 15015</p> <p>Purpose of Disbursement: Candidate Contrib Earmarked</p> <p>Candidate Name: _____</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836209</p> <p>Date of Disbursement: 10 / 06 / 2005</p> <p>Amount of Each Disbursement this Period: 50.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address: Emma Robbins 26 10th Street West</p> <p>City: St. Paul State: MN Zip Code: 55102</p> <p>Purpose of Disbursement: Candidate Contrib Earmarked</p> <p>Candidate Name: _____</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836210</p> <p>Date of Disbursement: 10 / 20 / 2005</p> <p>Amount of Each Disbursement this Period: 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p> </p>

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Lynette Sahnou 15230 Southwest 141st Ave. City Tigard State OR Zip Code 97224 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836211 Date of Disbursement 10 / 25 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Jay Paul 109 Scott Street City San Francisco State CA Zip Code 94117 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836212 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Constance McKenna 2576 Nicky Lane City Alexandria State VA Zip Code 22311 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836213 Date of Disbursement 10 / 07 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Lilian Masters 257 Hawks Hill Road City Scotts Valley State CA Zip Code 95066 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836214 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Dot Furness 120 Borden Road City Middletown State NJ Zip Code 07748 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836215 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Joan Kelley 720 NE 69th St Apt 17S City Miami State FL Zip Code 33138 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836216 Date of Disbursement 10 / 25 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Patricia Perry 257 Bartram Road City Riverside State IL Zip Code 60546 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836217 Date of Disbursement 10 / 12 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Selene Levine 720 Milton Road City Rye State NY Zip Code 10580 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836218 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Catherine Sichenze 256 Tichenor Avenue City South Orange State NJ Zip Code 07079 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836219 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Barry Bennett 1521 W Fir Avenue City Fresno State CA Zip Code 93711 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836220 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Margaret Pinto 255 W 84th St Apt 11C City New York State NY Zip Code 10024 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836221 Date of Disbursement 10 / 21 / 2005 Amount of Each Disbursement this Period 75.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Jane Walsh 2545 Dorset Road City Columbus State OH Zip Code 43221 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836222 Date of Disbursement 10 / 05 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Doris Marsh 254 East Tall Oaks Circle City Palm Beach Gardens State FL Zip Code 33410 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836223 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Susan Selbin 1520 San Carlos Road SW City Albuquerque State NM Zip Code 87104 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836224 Date of Disbursement 10 / 28 / 2005 Amount of Each Disbursement this Period 20.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Chris Harrington 7095 SW Newton Place City Portland State OR Zip Code 97225 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836225 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Karen Keefer 705 Chesapeake Avenue City Silver Spring State MD Zip Code 20910 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836226 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Alice Allhoff 25312 Ursuline Street City Saint Claire Shore State MI Zip Code 48081 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836227 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Lana Touchstone 252 Grapewood Street City Vallejo State CA Zip Code 94591 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836228 Date of Disbursement 10 / 28 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836229 Date of Disbursement 10 / 06 / 2005
Mailing Address Patricia Ness 2515 Caminito Muirfield		Amount of Each Disbursement this Period 100.00
City La Jolla State CA Zip Code 92037	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836230 Date of Disbursement 10 / 05 / 2005
Mailing Address Gail Winnell 7024 El Torro St		Amount of Each Disbursement this Period 10.00
City Zephyrhills State FL Zip Code 33541	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836231 Date of Disbursement 10 / 04 / 2005
Mailing Address Ellen Chu 7012 Marbury Road		Amount of Each Disbursement this Period 30.00
City Bethesda State MD Zip Code 20817	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Mary Mettler 15091 Ford Road, Apt. 116 City Dearborn State MI Zip Code 48126 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836232 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Corinne McTaggart 119 White Fir Way City Roseburg State OR Zip Code 97470 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836233 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Kathryn Lamka 250 Maple Lane City Port Ludlow State WA Zip Code 98365 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836234 Date of Disbursement 10 / 01 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Kay Bergin 25 Steuben Street City Waterbury State CT Zip Code 06708 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836235 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Carol Louchheim 7 Brent Court City Menlo Park State CA Zip Code 94025 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836236 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Jane Cahn 695 Fairfax Street City Denver State CO Zip Code 80220 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836237 Date of Disbursement 10 / 31 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Mailing Address: Josephine Vaara 6932 W. Church Street City: Clarkston State: MI Zip Code: 48346 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836238 Date of Disbursement 10 / 05 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Mailing Address: Sue Hansen 6927 Fairmount Avenue City: El Cerrito State: CA Zip Code: 94530 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836239 Date of Disbursement 10 / 28 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Mailing Address: Terrence Tice 2488 S Columbine St City: Denver State: CO Zip Code: 80210 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836240 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836241 Date of Disbursement 10 / 25 / 2005
Mailing Address Suzanne Sinke 6854 Hanging Vine Way		Amount of Each Disbursement this Period 50.00
City Tallahassee State FL Zip Code 32317	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836242 Date of Disbursement 10 / 14 / 2005
Mailing Address Margaret Bisberg 1506 S. Courtland Avenue		Amount of Each Disbursement this Period 100.00
City Park Ridge State IL Zip Code 60068	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836243 Date of Disbursement 10 / 14 / 2005
Mailing Address Jeann Sing 68-1050 Maura Lane # D204		Amount of Each Disbursement this Period 50.00
City Kanula State HI Zip Code 96743	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Janet Boe 24798 470th Street City Laporte State MN Zip Code 56461 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836244 Date of Disbursement 10 / 27 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Susan Hoffman 1505 Firethorne Lane City Wyndmoor State PA Zip Code 19038 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836245 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Beverly Deshler 6762 McCormick Woods Dr SW City Port Orchard State WA Zip Code 98367 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836246 Date of Disbursement 10 / 12 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Barbara Seiler 119 Laurel Hollow Way City: Saluda State: NC Zip Code: 28773 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____		Transaction ID: 21836247 Date of Disbursement: 10 / 27 / 2005 Amount of Each Disbursement this Period: 250.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Victoria Watkins 244 Madison Avenue, # 14E City: New York State: NY Zip Code: 10016 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____		Transaction ID: 21836248 Date of Disbursement: 10 / 04 / 2005 Amount of Each Disbursement this Period: 110.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Robert Meagher 108 Curtis Street City: Somerville State: MA Zip Code: 02144 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____		Transaction ID: 21836249 Date of Disbursement: 10 / 07 / 2005 Amount of Each Disbursement this Period: 10.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address Evelyn Dolven 663 Vincente Avenue</p> <p>City Berkeley State CA Zip Code 94707</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836250 Date of Disbursement 10 / 11 / 2005</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address Mary Kelman 1500 Sawyer Ave</p> <p>City Manasquan State NJ Zip Code 08736</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836251 Date of Disbursement 10 / 30 / 2005</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address Marjorie Elder 1181 Cork Road</p> <p>City Victor State NY Zip Code 14564</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836252 Date of Disbursement 10 / 03 / 2005</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836253 Date of Disbursement 10 / 27 / 2005
Mailing Address David Warren 661 Catherine Street SW		Amount of Each Disbursement this Period 25.00
City Atlanta State GA Zip Code 30310	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836254 Date of Disbursement 10 / 21 / 2005
Mailing Address Lois Jolley 6605 100th Avenue		Amount of Each Disbursement this Period 50.00
City Pinellas Park State FL Zip Code 33782	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836255 Date of Disbursement 10 / 13 / 2005
Mailing Address Susan Francis 1018 Yorkshire Road		Amount of Each Disbursement this Period 50.00
City Grosse Pointe State MI Zip Code 48230	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836256 Date of Disbursement 10 / 27 / 2005
Mailing Address Ira Thompson 655 Providence Avenue		Amount of Each Disbursement this Period 100.00
City Columbus	State OH	
Zip Code 43214		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836257 Date of Disbursement 10 / 12 / 2005
Mailing Address Marg Helgenberger 242 24th St		Amount of Each Disbursement this Period 100.00
City Santa Monica	State CA	
Zip Code 90402		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836258 Date of Disbursement 10 / 04 / 2005
Mailing Address Phyllis Campbell 15 Piper Road # J322		Amount of Each Disbursement this Period 25.00
City Scarborough	State ME	
Zip Code 04074		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836259 Date of Disbursement 10 / 14 / 2005
Mailing Address Rosemary Smith 653 Ravel Court		Amount of Each Disbursement this Period 100.00
City Las Vegas	State NV	
Zip Code 89145		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836260 Date of Disbursement 10 / 06 / 2005
Mailing Address Helen Dudley 652 Chaparral Street		Amount of Each Disbursement this Period 100.00
City Wickenburg	State AZ	
Zip Code 85390		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836261 Date of Disbursement 10 / 03 / 2005
Mailing Address Margret Trotzky 27 Saxham Way		Amount of Each Disbursement this Period 100.00
City Wynnewood	State PA	
Zip Code 19096		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p>		<p>Transaction ID: 21836262</p> <p>Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	4		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		1	4		2	0	0	5													
<p>Mailing Address: Suzanne Krause 15 Jutland Road</p>		<p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> </p>	100.00																			
100.00																						
<p>City: Binghamton State: NY Zip Code: 13903</p> <p>Purpose of Disbursement: Candidate Contrib Earmarked</p> <p>Candidate Name: _____</p> <p>Category/Type: _____</p>																						
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p>		<p>[MEMO ITEM] MEMO</p>																				
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>																						

<p>B. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p>		<p>Transaction ID: 21836263</p> <p>Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	7		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		0	7		2	0	0	5													
<p>Mailing Address: Gene Wilson 7730 Tecumseh Trail</p>		<p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> </p>	100.00																			
100.00																						
<p>City: Cincinnati State: OH Zip Code: 45243</p> <p>Purpose of Disbursement: Candidate Contrib Earmarked</p> <p>Candidate Name: _____</p> <p>Category/Type: _____</p>																						
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p>		<p>[MEMO ITEM] MEMO</p>																				
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>																						

<p>C. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p>		<p>Transaction ID: 21836264</p> <p>Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	5		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		2	5		2	0	0	5													
<p>Mailing Address: Kay Cooper 6501 Meadow View Road</p>		<p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>50.00</td> </tr> </table> </p>	50.00																			
50.00																						
<p>City: Hillsborough State: NC Zip Code: 27278</p> <p>Purpose of Disbursement: Candidate Contrib Earmarked</p> <p>Candidate Name: _____</p> <p>Category/Type: _____</p>																						
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p>		<p>[MEMO ITEM] MEMO</p>																				
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>																						

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p>_____</p>

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions		Transaction ID: 21836265 Date of Disbursement 10 / 31 / 2005
Mailing Address: Morton Zivan 2401 Pennsylvania Avenue City: Philadelphia State: PA Zip Code: 19130		Amount of Each Disbursement this Period 100.00
Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Category/Type: _____		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions		Transaction ID: 21836266 Date of Disbursement 10 / 17 / 2005
Mailing Address: Kate Stillman 65 Paces West Ct NW City: Atlanta State: GA Zip Code: 30327		Amount of Each Disbursement this Period 100.00
Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Category/Type: _____		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions		Transaction ID: 21836267 Date of Disbursement 10 / 04 / 2005
Mailing Address: Gail Eisenberger 240 Kala Heights Drive City: Port Townsend State: WA Zip Code: 98368		Amount of Each Disbursement this Period 500.00
Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Category/Type: _____		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Alice Schoen 6419 Cavalier Corridor City Falls Church State VA Zip Code 22044 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836268 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Arnold Wajenberg 240 Donald Drive City Goffstown State NH Zip Code 03045 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836269 Date of Disbursement 10 / 05 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
--	--	--

C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Elizabeth Pennink 635 Medford Leas City Medford State NJ Zip Code 08055 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836270 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836271 Date of Disbursement 10 / 06 / 2005
Mailing Address Margaret Lewis 756 Harbor Island		Amount of Each Disbursement this Period 100.00
City Clearwater	State FL	
Zip Code 33767		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836272 Date of Disbursement 10 / 13 / 2005
Mailing Address Nels Ekroth 6317 SW Wilton Court		Amount of Each Disbursement this Period 50.00
City Seattle	State WA	
Zip Code 98116		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836273 Date of Disbursement 10 / 04 / 2005
Mailing Address Agnes Grady 14809 121st Street E		Amount of Each Disbursement this Period 250.00
City Puyallup	State WA	
Zip Code 98374		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Laura Avery 6309 Cocoa Lane City Apollo Beach State FL Zip Code 33572 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836274 Date of Disbursement 10 / 05 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Gail Chester 24 Mill Road City Matawan State NJ Zip Code 07747 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836275 Date of Disbursement 10 / 25 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Jennifer Bell 63 Park Street City Tenafly State NJ Zip Code 07670 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836276 Date of Disbursement 10 / 21 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836277 Date of Disbursement 10 / 16 / 2005
Mailing Address Mary Favaro 626 14th Ave East		Amount of Each Disbursement this Period 100.00
City Seattle	State WA	
Zip Code 98112		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836278 Date of Disbursement 10 / 14 / 2005
Mailing Address Alan Solinger 1465 65th St Apt 253		Amount of Each Disbursement this Period 25.00
City Emeryville	State CA	
Zip Code 94608		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836279 Date of Disbursement 10 / 20 / 2005
Mailing Address Alison Tallard 6244 N Maplewood Ave		Amount of Each Disbursement this Period 200.00
City Chicago	State IL	
Zip Code 60659		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Barbara Berney 624 E 20th St Apt 1D City: New York State: NY Zip Code: 10009 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836280 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5 Amount of Each Disbursement this Period 75.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Nancy Madsen 2340 S 2300 E City: Salt Lake Cty State: UT Zip Code: 84109 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836281 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5 Amount of Each Disbursement this Period 20.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Laura Watson 6144 Fremont Circle City: Camarillo State: CA Zip Code: 93012 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836282 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions		Transaction ID: 21836283 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5
Mailing Address: Holley Humphrey 233 Rogue River Highway		Amount of Each Disbursement this Period 50.00
City: Grants Pass State: OR Zip Code: 97527	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions		Transaction ID: 21836284 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address: Annette Backous 1017 NW 121st Street		Amount of Each Disbursement this Period 100.00
City: Vancouver State: WA Zip Code: 98685	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions		Transaction ID: 21836285 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5
Mailing Address: Ronald Nelson 2323 Canehill Avenue		Amount of Each Disbursement this Period 50.00
City: Long Beach State: CA Zip Code: 90815	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address Susan Brown 613 NE 44th Street</p> <p>City Kansas City State MO Zip Code 64116</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836286 Date of Disbursement 10 / 05 / 2005</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address Marlene Share 14630 Dickens #310</p> <p>City Sherman Oaks State CA Zip Code 91403</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836287 Date of Disbursement 10 / 07 / 2005</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address Joan Englander 609 Elm Avenue</p> <p>City Swarthmore State PA Zip Code 19081</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836288 Date of Disbursement 10 / 17 / 2005</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Julie McVay 608 Poplar Street City Roslindale State MA Zip Code 02131 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836289 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Robert Brown 2315 Salem Village Road City Parkville State MD Zip Code 21234 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836290 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 20.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Mary Anne Hunter 604 Washington Square S City Philadelphia State PA Zip Code 19106 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836291 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836292 Date of Disbursement 10 / 21 / 2005
Mailing Address Diane Gross 1437 Rhode Island Ave #112		Amount of Each Disbursement this Period 150.00
City Washington State DC Zip Code 20005	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836293 Date of Disbursement 10 / 17 / 2005
Mailing Address Elizabeth Whittall 2300 Indian Creek Boulevard		Amount of Each Disbursement this Period 250.00
City Vero Beach State FL Zip Code 32966	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836294 Date of Disbursement 10 / 31 / 2005
Mailing Address Hugh Jackson 6035 W Mansfield Ave Unit 247		Amount of Each Disbursement this Period 25.00
City Denver State CO Zip Code 80235	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address Carol Leibman 100 Diplomat Drive, # 6F</p> <p>City Mt. Kisco State NY Zip Code 10549</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836295</p> <p>Date of Disbursement 10 / 02 / 2005</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address Patricia Kinsman 11671 N. Europa Place</p> <p>City Tucson State AZ Zip Code 85737</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836296</p> <p>Date of Disbursement 10 / 20 / 2005</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address Ann Rogers 1425 Cambridge Road</p> <p>City Ann Arbor State MI Zip Code 48104</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836297</p> <p>Date of Disbursement 10 / 17 / 2005</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Mailing Address Shirley Humphrey 6000 Lake Road, W #112 City Ashtabula State OH Zip Code 44004 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836298 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Mailing Address Grace Radin 107 River Road City Nyack State NY Zip Code 10960 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836299 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Mailing Address Carole Curtis 60 Somerset Road City New Rochelle State NY Zip Code 10804 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836300 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Rhoda Mann 60 Seminary Ave Apt 170 City Auburndale State MA Zip Code 02466 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836301 Date of Disbursement 10 / 17 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Anne Patterson 80 Buckingham St City Cambridge State MA Zip Code 02138 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836302 Date of Disbursement 10 / 17 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Mary Joanne Shaw 60 Robinson Street City Schenectady State NY Zip Code 12304 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836303 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Charlotte O'Keefe 60 Murray Avenue City Larkspur State CA Zip Code 94939 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836304 Date of Disbursement 10 / 21 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Analine Hicks 2280 Cayuga Rd City Schenectady State NY Zip Code 12309 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836305 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Paula Ginsburg 59975 E. Comanche Way City Strasburg State CO Zip Code 80136 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836306 Date of Disbursement 10 / 25 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Geri Loe 5961 Canon Court City Ventura State CA Zip Code 93003 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836307 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 200.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Judith Wolfe 11644 Harborview City Cleveland State OH Zip Code 44102 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836308 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Beatrice Nold 5954-3B Autumnwood Drive City Walnut Creek State CA Zip Code 94595 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836309 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836310 Date of Disbursement 10 / 12 / 2005
Mailing Address Catherine Helm 227 S. Windsor Blvd.		Amount of Each Disbursement this Period 100.00
City Los Angeles State CA Zip Code 90004	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836311 Date of Disbursement 10 / 04 / 2005
Mailing Address Maryanne Joyce 142 Nyac Avenue		Amount of Each Disbursement this Period 500.00
City Pelham State NY Zip Code 10803	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836312 Date of Disbursement 10 / 06 / 2005
Mailing Address Linda Cukurs 5940 N. Forest Glen Avenue		Amount of Each Disbursement this Period 100.00
City Chicago State IL Zip Code 60646	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 591 / 1975

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Rhea Rubin 5860 Heron Drive City Oakland State CA Zip Code 94618 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836313 Date of Disbursement 10 / 05 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Shirley Klass 226 S. Reese Street City Memphis State TN Zip Code 38111 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836314 Date of Disbursement 10 / 28 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Barbara Alberty 581 Covey Lane City Eugene State OR Zip Code 97401 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836315 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s)
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Detailed Summary Page

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836316 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address James Langland 1014 Oakland Park Road		Amount of Each Disbursement this Period 100.00
City Thief River Falls State MN Zip Code 56701	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name			Office Sought: ☐ House ☐ Senate ☐ President Disbursement For: 2006 ☒ Primary ☐ General ☐ Other (specify) ▼
State: District:		Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836317 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address Phyllis Farley 580 Park Avenue		Amount of Each Disbursement this Period 100.00
City New York State NY Zip Code 10021	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name			Office Sought: ☐ House ☐ Senate ☐ President Disbursement For: 2006 ☒ Primary ☐ General ☐ Other (specify) ▼
State: District:		Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836318 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address Ann Lee 116 Channing Lane		Amount of Each Disbursement this Period 100.00
City Chapel Hill State NC Zip Code 27516	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name			Office Sought: ☐ House ☐ Senate ☐ President Disbursement For: 2006 ☒ Primary ☐ General ☐ Other (specify) ▼
State: District:		SUBTOTAL of Disbursements This Page (optional) ▶

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Mary Brucklacher 560 Deer Lake Dr City: Findlay State: OH Zip Code: 45840 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836319 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Bronwyn Nelson 5567 Mesa Verde Court City: Fairfield State: OH Zip Code: 45014 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836320 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Adelle Lemon 1063 Cragmont City: Berkeley State: CA Zip Code: 94708 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836321 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5 Amount of Each Disbursement this Period 200.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Joan Green 555 Laurel Street City: San Francisco State: CA Zip Code: 94118 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836322 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 0 8 / 2 0 0 5 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Russell Gordon 22022 Catalina Circle City: Huntington Beach State: CA Zip Code: 92646 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836323 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Betty Young 550 Latimer Road City: Santa Monica State: CA Zip Code: 90402 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836324 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Sandra Hackman 22 Meadowbrook Rd City Bedford State MA Zip Code 01730 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836325 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Nancy Baskin 55 Ocean Ave Apt 5J City Monmouth Beach State NJ Zip Code 07750 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836326 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Diana Simon 55 E. Erie Street, Apt. 4505 City Chicago State IL Zip Code 60611 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836327 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836328 Date of Disbursement 10 / 06 / 2005
Mailing Address Thomas Carter 140 N. Tigertail Road		Amount of Each Disbursement this Period 100.00
City Los Angeles State CA Zip Code 90049	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836329 Date of Disbursement 10 / 27 / 2005
Mailing Address Constance Greenfield 279 Sturges Highway		Amount of Each Disbursement this Period 500.00
City Westport State CT Zip Code 06880	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836330 Date of Disbursement 10 / 13 / 2005
Mailing Address Caroline Lieberman 55 Arroyo Way		Amount of Each Disbursement this Period 100.00
City San Francisco State CA Zip Code 94127	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Grier Whitney 11516 Blossom Way City: Carmel State: IN Zip Code: 46032 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____		Transaction ID: 21836331 Date of Disbursement: 10 / 03 / 2005 Amount of Each Disbursement this Period: 250.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Barbara Brosnan 5431 Weybridge Road City: Weybridge State: VT Zip Code: 05753 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____		Transaction ID: 21836332 Date of Disbursement: 10 / 11 / 2005 Amount of Each Disbursement this Period: 100.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Alice Davis 215 W. 14th Street City: Wilmington State: DE Zip Code: 19801 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____		Transaction ID: 21836333 Date of Disbursement: 10 / 25 / 2005 Amount of Each Disbursement this Period: 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Tammy McLeod 5428 E Sanna St City: Paradise Vly State: AZ Zip Code: 85253 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836334 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Nancy Jones 536 Nash Street City: Rocky Mount State: NC Zip Code: 27804 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836335 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: June Walkington 2140 Ohio Avenue #D City: Signal Hill State: CA Zip Code: 90755 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836336 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836337 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address Lois Dummett 5344 Highlight Place		Amount of Each Disbursement this Period 100.00
City Los Angeles	State CA	
Zip Code 90016		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836338 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address Jane Murdock 14 Long Pond Avenue		Amount of Each Disbursement this Period 200.00
City Housatonic	State MA	
Zip Code 01236		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836339 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address Linda Hengst 533 W. Market Street		Amount of Each Disbursement this Period 50.00
City York	State PA	
Zip Code 17404		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Mailing Address Della Huber 5308 Boyd Ave # B City Oakland State CA Zip Code 94618 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836340 Date of Disbursement 10 / 05 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Mailing Address Sadie Taylor 115 Kendal Drive City Oberlin State OH Zip Code 44074 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836341 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Mailing Address Ellen Werback 529 Kevin Court City Ridgecrest State CA Zip Code 93555 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836342 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Emmons Ellis 14 Hillside Avenue City: Winchester State: MA Zip Code: 01890 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836343 Date of Disbursement 10 / 31 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Linda Lindquist 2116 NW 204th Street City: Shoreline State: WA Zip Code: 98177 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836344 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Claire Amendola 527 Fulton Lane City: Saint Helena State: CA Zip Code: 94574 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836345 Date of Disbursement 10 / 17 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 602 / 1975

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836346 Date of Disbursement 10 / 17 / 2005
Mailing Address Phyllis Levinson 5262 Boca Marina Circle S.		Amount of Each Disbursement this Period 50.00
City Boca Raton	State FL	
Zip Code 33487		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836347 Date of Disbursement 10 / 04 / 2005
Mailing Address Rosalind Smith 211 Hodges Lane		Amount of Each Disbursement this Period 100.00
City Takoma Park	State MD	
Zip Code 20912		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836348 Date of Disbursement 10 / 25 / 2005
Mailing Address Aashish Devitre 211 Central Park W #10G		Amount of Each Disbursement this Period 100.00
City New York	State NY	
Zip Code 10024		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 603 / 1975

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Janet Smarr 1397 Caminito Halago City La Jolla State CA Zip Code 92037 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836349 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Wyman Fowler 2107 Mallard Drive City Lancaster State PA Zip Code 17601 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836350 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 1000.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Grace Flesche 523 Pinehurst Boulevard City Kalamazoo State MI Zip Code 49006 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836351 Date of Disbursement 10 / 12 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836352 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address Jeana Petersen 21015 N. Totem Drive		Amount of Each Disbursement this Period 100.00
City Sun City West State AZ Zip Code 85375	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836353 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address Robert Myers 5210 N. Eisenhower		Amount of Each Disbursement this Period 100.00
City Roswell State NM Zip Code 88201	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836354 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address J. Brockhouse 1143 Oxford Drive		Amount of Each Disbursement this Period 50.00
City Emporia State KS Zip Code 66801	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Joan Goldstein 2100 North Salisbury Street City: West Lafayette State: IN Zip Code: 47906 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836355 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Mary Lou Parker 516 Westminster Avenue City: Swarthmore State: PA Zip Code: 19081 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836356 Date of Disbursement 10 / 28 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Beverly Fremont 515 S. Sierra #122 City: Solana Beach State: CA Zip Code: 92075 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836357 Date of Disbursement 10 / 28 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 606 / 1975

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address Linda Alter 210 W Rittenhouse Square</p> <p>City Philadelphia State PA Zip Code 19103</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 21836358</p> <p>Date of Disbursement 10 / 05 / 2005</p> <p>Amount of Each Disbursement this Period 2100.00</p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/ Type</p>

<p>B. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address Sarah Kelso 5142 Milburn Road</p> <p>City Saint Louis State MO Zip Code 63129</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 21836359</p> <p>Date of Disbursement 10 / 04 / 2005</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/ Type</p>

<p>C. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address Mary Barmettler 1388 Cordelia Avenue</p> <p>City San Jose State CA Zip Code 95129</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 21836360</p> <p>Date of Disbursement 10 / 14 / 2005</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/ Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836361 Date of Disbursement 10 / 13 / 2005
Mailing Address Iris Gruwell 290 Stoneykirk Dr		Amount of Each Disbursement this Period 25.00
City Bella Vista State AR Zip Code 72715	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836362 Date of Disbursement 10 / 04 / 2005
Mailing Address Mary Kaufman 210 Villard Avenue		Amount of Each Disbursement this Period 35.00
City Hastings Hdsn. State NY Zip Code 10706	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836363 Date of Disbursement 10 / 03 / 2005
Mailing Address Jane Olsen 5132 Saint Davids Drive		Amount of Each Disbursement this Period 100.00
City Vero Beach State FL Zip Code 32967	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836364 Date of Disbursement 10 / 28 / 2005
Mailing Address Jacqueline Cameron 513 W Aldine Ave Apt 2		Amount of Each Disbursement this Period 50.00
City Chicago	State IL	
Zip Code 60657		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836365 Date of Disbursement 10 / 12 / 2005
Mailing Address Florence Forrest 1385 Bay Laurel Drive		Amount of Each Disbursement this Period 50.00
City Menlo Park	State CA	
Zip Code 94025		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836366 Date of Disbursement 10 / 27 / 2005
Mailing Address Louise Hendrickson 1382 Newtown Langhorne Rd.		Amount of Each Disbursement this Period 100.00
City Newtown	State PA	
Zip Code 18940		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836367 Date of Disbursement 10 / 11 / 2005
Mailing Address Jane Moser 21 Stuyvesant Oval, Apt. 9F		Amount of Each Disbursement this Period 50.00
City New York State NY Zip Code 10009	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836368 Date of Disbursement 10 / 13 / 2005
Mailing Address Ann Wansley 51 Chula Lane		Amount of Each Disbursement this Period 50.00
City San Francisco State CA Zip Code 94114	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836369 Date of Disbursement 10 / 07 / 2005
Mailing Address Marie Kingdon 1062 Carter's Grove		Amount of Each Disbursement this Period 100.00
City Indianapolis State IN Zip Code 46260	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836370 Date of Disbursement 10 / 11 / 2005
Mailing Address Marylouise Stafford 900 E Harrison Avenue, H 4		Amount of Each Disbursement this Period 150.00
City Pomona State CA Zip Code 91767	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836371 Date of Disbursement 10 / 04 / 2005
Mailing Address Karen Sundback 21 Kenmore Road		Amount of Each Disbursement this Period 200.00
City Bloomfield State CT Zip Code 06002	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836372 Date of Disbursement 10 / 07 / 2005
Mailing Address Cheryl Cummer 21 Fairfield Street		Amount of Each Disbursement this Period 250.00
City Boston State MA Zip Code 02116	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836373 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address Margaret Cunningham 138 Rose Lane		Amount of Each Disbursement this Period 250.00
City Haverford State PA Zip Code 19041	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836374 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address Debora Kailing 505 Cypress Ave		Amount of Each Disbursement this Period 50.00
City Ukiah State CA Zip Code 95482	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836375 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address Joan Baer 11329 French Horn Lane		Amount of Each Disbursement this Period 100.00
City Reston State VA Zip Code 20191	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Esther Portnoy 208 W. Florida Avenue City: Urbana State: IL Zip Code: 61801 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____		Transaction ID: 21836376 Date of Disbursement: 10 / 04 / 2005 Amount of Each Disbursement this Period: 100.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Carol Kuller 137 Great Barrington Road City: West Stockbridge State: MA Zip Code: 01266 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____		Transaction ID: 21836377 Date of Disbursement: 10 / 20 / 2005 Amount of Each Disbursement this Period: 100.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Lisa Smith 208 7th Street, Apt. 2B City: Lindenhurst State: NY Zip Code: 11757 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____		Transaction ID: 21836378 Date of Disbursement: 10 / 21 / 2005 Amount of Each Disbursement this Period: 25.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836379 Date of Disbursement 10 / 28 / 2005
Mailing Address Clark Simms 1 Breezy Hill Road		Amount of Each Disbursement this Period 25.00
City Copake Falls State NY Zip Code 12517	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836380 Date of Disbursement 10 / 21 / 2005
Mailing Address Fred Reames 522 Virginia Terrace		Amount of Each Disbursement this Period 100.00
City Madison State WI Zip Code 53726	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836381 Date of Disbursement 10 / 03 / 2005
Mailing Address Sally Drew 502 Leonard Street		Amount of Each Disbursement this Period 25.00
City Madison State WI Zip Code 53711	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address James Donnell 207 Norman Drive City Cranberry Twp State PA Zip Code 16066 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836382 Date of Disbursement 10 / 31 / 2005 Amount of Each Disbursement this Period 500.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Arline Zuckerman 11315 Victoria Avenue City Los Angeles State CA Zip Code 90066 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836383 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Jape Taylor 500 N.W. 80th Boulevard City Gainesville State FL Zip Code 32607 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836384 Date of Disbursement 10 / 05 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836385 Date of Disbursement 10 / 21 / 2005
Mailing Address Helen Anderson 1059 El Centro Avenue		Amount of Each Disbursement this Period 40.00
City Oakland State CA Zip Code 94602	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836386 Date of Disbursement 10 / 31 / 2005
Mailing Address Valerie Block 50 Glenwood Rd		Amount of Each Disbursement this Period 250.00
City Montclair State NJ Zip Code 07043	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836387 Date of Disbursement 10 / 27 / 2005
Mailing Address Marian Gade 136 Highland Blvd.		Amount of Each Disbursement this Period 100.00
City Kensington State CA Zip Code 94708	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836388 Date of Disbursement 10 / 06 / 2005
Mailing Address Donald Johnson 5 W. Oak Street		Amount of Each Disbursement this Period 50.00
City Ramsey State NJ Zip Code 07446	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836389 Date of Disbursement 10 / 07 / 2005
Mailing Address Carolyn Baker 11303 Full Cry Court		Amount of Each Disbursement this Period 75.00
City Oakton State VA Zip Code 22124	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836390 Date of Disbursement 10 / 31 / 2005
Mailing Address Karen Graffenberger 2035 Norwood Avenue		Amount of Each Disbursement this Period 50.00
City Boulder State CO Zip Code 80304	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Morton Yuter 5 Dover Avenue City Garden City State NY Zip Code 11530 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836391 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Judith Carty 5 Byfield Lane City Dearborn State MI Zip Code 48120 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836392 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Kathleen Turner 20281 Forest Avenue City Castro Valley State CA Zip Code 94546 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836393 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Eleanor Endsley 4970 Boardwalk Pl City Indianapolis State IN Zip Code 46220 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836394 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address M. Thouless 4959 Purdue Avenue NE City Seattle State WA Zip Code 98105 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836395 Date of Disbursement 10 / 31 / 2005 Amount of Each Disbursement this Period 200.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Judy Goldenberg 4949 Joewood Drive City Sanibel State FL Zip Code 33957 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836396 Date of Disbursement 10 / 05 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Barbara Aman 4809 Ewing Avenue S City: Minneapolis State: MN Zip Code: 55410 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836397 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5 Amount of Each Disbursement this Period _____ 50.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Elaine Diamond 2001 Holmby Avenue City: Los Angeles State: CA Zip Code: 90025 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836398 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5 Amount of Each Disbursement this Period _____ 25.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Virginia Royden 13466 Three Forks Lane City: Los Altos Hills State: CA Zip Code: 94022 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836399 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5 Amount of Each Disbursement this Period _____ 250.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	_____ 0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Kellie Teter 4760 W. 37th Avenue City: Denver State: CO Zip Code: 80212 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836400 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Linda Wise 4749 Old Post Ct City: Boulder State: CO Zip Code: 80301 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836401 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Linda White 1120 E. Balboa Boulevard City: Balboa State: CA Zip Code: 92661 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836402 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5 Amount of Each Disbursement this Period 200.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Carol Nelson 13439 Calle Colina City Poway State CA Zip Code 92064 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836403 Date of Disbursement 10 / 08 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Helen Rich 200 Leeder Hill Dr Apt 317 City Hamden State CT Zip Code 06517 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836404 Date of Disbursement 10 / 12 / 2005 Amount of Each Disbursement this Period 15.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Allison Brower 4745 Espana Court City Carmichael State CA Zip Code 95608 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836405 Date of Disbursement 10 / 27 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Marguerite Jehle 4717 Collinos Way City Oceanside State CA Zip Code 92056 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836406 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Marcia Rider 20 Acacia Way City Santa Cruz State CA Zip Code 95062 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836407 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Ann Vogel 112 Starry Road City Sequim State WA Zip Code 98382 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836408 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Thomas Kane 2 Van Rensselaer Avenue City Stamford State CT Zip Code 06902 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836409 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Margaret Gelin 105 Trowbridge Street, #4 City Cambridge State MA Zip Code 02138 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836410 Date of Disbursement 10 / 31 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Gustav Papanek 2 Mason Street City Lexington State MA Zip Code 02421 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836411 Date of Disbursement 10 / 19 / 2005 Amount of Each Disbursement this Period 200.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836412 Date of Disbursement 10 / 14 / 2005
Mailing Address Laurie Barenborg 4610 S. Bradford Street		Amount of Each Disbursement this Period 50.00
City Seattle	State WA	
Zip Code 98118		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836413 Date of Disbursement 10 / 03 / 2005
Mailing Address Charlotte Moss 134 E 71st St		Amount of Each Disbursement this Period 250.00
City New York	State NY	
Zip Code 10021		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836414 Date of Disbursement 10 / 05 / 2005
Mailing Address Nancy Hyams 2 Madison Court		Amount of Each Disbursement this Period 200.00
City Beachwood	State OH	
Zip Code 44122		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Mary Reilly 4504 Alpine Rose Bnd City Ellicott City State MD Zip Code 21042 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836415 Date of Disbursement 10 / 12 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Dorothy Joy 10041 Resmar Pl. City La Mesa State CA Zip Code 91941 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836416 Date of Disbursement 10 / 31 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Myron Blee 4498 Big Ridge Road City Glenville State NC Zip Code 28736 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836417 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836418 Date of Disbursement 10 / 04 / 2005
Mailing Address Mary Delsman 4487 Picacho Drive		Amount of Each Disbursement this Period 25.00
City Riverside State CA Zip Code 92507	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836419 Date of Disbursement 10 / 16 / 2005
Mailing Address Linda Halbur 4472 Misty Way		Amount of Each Disbursement this Period 30.00
City Yorba Linda State CA Zip Code 92886	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836420 Date of Disbursement 10 / 31 / 2005
Mailing Address Athena Caul 4432 Sudley Road		Amount of Each Disbursement this Period 100.00
City Gainesville State VA Zip Code 20155	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836421 Date of Disbursement 10 / 11 / 2005
Mailing Address Vivian Lamb 13382 Fairmont Way		Amount of Each Disbursement this Period 100.00
City Santa Ana	State CA		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name			Office Sought: ☐ House ☐ Senate ☐ President Disbursement For: 2006 ☒ Primary ☐ General ☐ Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836422 Date of Disbursement 10 / 05 / 2005
Mailing Address Juliana Gunnarsson 19924 163rd Avenue NE		Amount of Each Disbursement this Period 100.00
City Woodinville	State WA		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name			Office Sought: ☐ House ☐ Senate ☐ President Disbursement For: 2006 ☒ Primary ☐ General ☐ Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836423 Date of Disbursement 10 / 19 / 2005
Mailing Address Susan McGreivy 105 Rachel Carson Way		Amount of Each Disbursement this Period 50.00
City Ithaca	State NY		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name			Office Sought: ☐ House ☐ Senate ☐ President Disbursement For: 2006 ☒ Primary ☐ General ☐ Other (specify) ▼
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836424 Date of Disbursement 10 / 17 / 2005
Mailing Address Ann Friend 4414 Durant Street, # 111		Amount of Each Disbursement this Period 25.00
City Deer Park State TX Zip Code 77536	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836425 Date of Disbursement 10 / 17 / 2005
Mailing Address Lynne Lohr 1114 E. 4th St.		Amount of Each Disbursement this Period 22.00
City Port Angeles State WA Zip Code 98362	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836426 Date of Disbursement 10 / 31 / 2005
Mailing Address Linda Hansen 9828 N Bentsen Road		Amount of Each Disbursement this Period 100.00
City McAllen State TX Zip Code 78504	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Adalyn Brugger 1973 Retreat Drive City Mechanicsville State VA Zip Code 23111 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836427 Date of Disbursement 10 / 12 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Mary Frey 1327 Eden Meadows Way City Dayton State OH Zip Code 45440 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836428 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Barbara Lafer 44 Mandeville Drive City Wayne State NJ Zip Code 07470 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836429 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Naomi Nakashima 44 Dawnview City San Francisco State CA Zip Code 94131 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836430 Date of Disbursement 10 / 21 / 2005 Amount of Each Disbursement this Period 150.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Clair Sharpless 1 Drumlin Road City West Simsbury State CT Zip Code 06092 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836431 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Jon Asmundson 1324 La Pointe Road City Eureka State CA Zip Code 95503 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836432 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Howard Poulter 4375 Bridgeview Drive City: Oakland State: CA Zip Code: 94602 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836433 Date of Disbursement 10 / 27 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Loain Olsen 437 Wild Indigo Ln City: Madison State: WI Zip Code: 53717 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836434 Date of Disbursement 10 / 17 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Adalyn Brugger 1973 Retreat Drive City: Mechanicsville State: VA Zip Code: 23111 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836435 Date of Disbursement 10 / 07 / 2005 Amount of Each Disbursement this Period 500.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836436 Date of Disbursement 10 / 05 / 2005
Mailing Address Mildred Glimcher 435 E. 52nd Street, #24C		Amount of Each Disbursement this Period 100.00
City New York State NY Zip Code 10022	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836437 Date of Disbursement 10 / 21 / 2005
Mailing Address Joyce Mihanovich 4338 Marl Way		Amount of Each Disbursement this Period 50.00
City Carmichael State CA Zip Code 95608	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836438 Date of Disbursement 10 / 20 / 2005
Mailing Address Lee Swarm 432 Little Switzerland Road		Amount of Each Disbursement this Period 100.00
City Knoxville State TN Zip Code 37920	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836439 Date of Disbursement 10 / 04 / 2005
Mailing Address Murray Laver 1950 SW Whiteside Drive		Amount of Each Disbursement this Period 20.00
City Corvallis	State OR	
Zip Code 97333		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836440 Date of Disbursement 10 / 14 / 2005
Mailing Address Nancy Lincoln 43 Hedge Road		Amount of Each Disbursement this Period 100.00
City Brookline	State MA	
Zip Code 02445		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836441 Date of Disbursement 10 / 15 / 2005
Mailing Address Steve Schwartz 425 S. Chickasaw Trail #348		Amount of Each Disbursement this Period 100.00
City Orlando	State FL	
Zip Code 32825		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Helen Longino 1318 Noe Street City San Francisco State CA Zip Code 94131 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836442 Date of Disbursement 10 / 25 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Patricia Cabe 19332 Evening Hill City Huntington Beach State CA Zip Code 92648 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836443 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Fred Golding 1113 Emeral Bay City Laguna Beach State CA Zip Code 92655 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836444 Date of Disbursement 10 / 27 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Hillary Mayers 425 Riverside Drive City: New York State: NY Zip Code: 10025 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836445 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 200.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Joan Hull 193 San Andreas Drive City: Novato State: CA Zip Code: 94945 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836446 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Kathleen Witowski 13152 S. Cicero PMB 290 City: Crestwood State: IL Zip Code: 60445 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836447 Date of Disbursement 10 / 27 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836448 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address Joanne Skirving 4220 South East Copper St.		Amount of Each Disbursement this Period 50.00
City Portland State OR Zip Code 97206	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836449 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address Susan Morrison 4205 Ramsey Avenue		Amount of Each Disbursement this Period 100.00
City Austin State TX Zip Code 78756	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836450 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address Arthur Fry 1923 E. Joyce Blvd. Apt. 323		Amount of Each Disbursement this Period 50.00
City Fayetteville State AR Zip Code 72703	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836451 Date of Disbursement 10 / 03 / 2005
Mailing Address Laura Petersen 418 E 59th Street #36B		Amount of Each Disbursement this Period 200.00
City New York	State NY	
Zip Code 10022		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836452 Date of Disbursement 10 / 05 / 2005
Mailing Address Mary Richeson 1312 Deveron Drive		Amount of Each Disbursement this Period 100.00
City New Haven	State IN	
Zip Code 46774		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836453 Date of Disbursement 10 / 13 / 2005
Mailing Address Suzanne Angevine 4160 26th Street		Amount of Each Disbursement this Period 50.00
City Boulder	State CO	
Zip Code 80304		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836454 Date of Disbursement 10 / 14 / 2005
Mailing Address Rosemary Vimont 1922 Oregon Street		Amount of Each Disbursement this Period 50.00
City Berkeley	State CA	
Zip Code 94703		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836455 Date of Disbursement 10 / 21 / 2005
Mailing Address Harriet Miller 4119 Highwood Drive		Amount of Each Disbursement this Period 50.00
City Fort Wayne	State IN	
Zip Code 46815		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836456 Date of Disbursement 10 / 03 / 2005
Mailing Address Jonathan Salomon 192 Waterman St # 3		Amount of Each Disbursement this Period 50.00
City Providence	State RI	
Zip Code 02906		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Susan Conley 4116 Longview Road City Little Rock State AR Zip Code 72212 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836457 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Susan Borke 4102 38th St NW City Washington State DC Zip Code 20016 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836458 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Gloria Deison 1311 Peacefield Place City Tallahassee State FL Zip Code 32308 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836459 Date of Disbursement 10 / 12 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Marilyn Clements 104 Wallacks Point City Stamford State CT Zip Code 06902 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836460 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Linda Dietel P.O. Box 309 City Flint Hill State VA Zip Code 22627 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836461 Date of Disbursement 10 / 25 / 2005 Amount of Each Disbursement this Period 500.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Robin Hanes 191 Lynn Cove Road City Asheville State NC Zip Code 28804 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836462 Date of Disbursement 10 / 27 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Mary Gallatin 408 Ira Avenue #L3 City: San Antonio State: TX Zip Code: 78209 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836463 Date of Disbursement 10 / 28 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Karen Curtis 406 W. 34th Street City: Wilmington State: DE Zip Code: 19802 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836464 Date of Disbursement 10 / 21 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Jean Thurston 10 Fiske Lane City: Weston State: MA Zip Code: 02493 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836465 Date of Disbursement 10 / 17 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Kristin Olsson 11127 Midway Road City Dallas State TX Zip Code 75229 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836466 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 10.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Katherine Simpson 1001 Spring Street, Apt. 805 City Silver Spring State MD Zip Code 20910 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836467 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Rachel Ritvo 4020 Everett Street City Kensington State MD Zip Code 20895 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836468 Date of Disbursement 10 / 27 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Jean Campbell 4001 Glacier Hills Drive City: Ann Arbor State: MI Zip Code: 48105 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836469 Date of Disbursement: 10 / 25 / 2005 Amount of Each Disbursement this Period: 250.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Richard Parrish 30862 Turquoise Pl City: Lebanon State: OR Zip Code: 97355 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836470 Date of Disbursement: 10 / 12 / 2005 Amount of Each Disbursement this Period: 50.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Geraldine Herbert 400 North Hulen Way City: Ketchum State: ID Zip Code: 83340 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836471 Date of Disbursement: 10 / 26 / 2005 Amount of Each Disbursement this Period: 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Valerie Merriam 1900 W. Burma Road City Gosport State IN Zip Code 47433 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836472 Date of Disbursement 10 / 27 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Dorothy Whitmore 1309 N. Clayton Street City Wilmington State DE Zip Code 19806 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836473 Date of Disbursement 10 / 12 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Martha McMahon 1900 SW Parkwood Drive City Portland State OR Zip Code 97225 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836474 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Lisa Lowery 4 Lexington Road City Little Rock State AR Zip Code 72227 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836475 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Ethel Brody 19 Quinine Hill City Columbia State SC Zip Code 29204 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836476 Date of Disbursement 10 / 31 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Joan Ulyot 39805 North 112th Street City Scottsdale State AZ Zip Code 85262 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836477 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836478 Date of Disbursement 10 / 31 / 2005
Mailing Address John Schumacher 397 Hudson Avenue		Amount of Each Disbursement this Period 30.00
City Albany State NY Zip Code 12203	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836479 Date of Disbursement 10 / 11 / 2005
Mailing Address Catherine Kelley 19 Pleasant St		Amount of Each Disbursement this Period 100.00
City Gt Barrington State MA Zip Code 01230	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836480 Date of Disbursement 10 / 17 / 2005
Mailing Address Margaret Sheppard 3945 Magnolia Avenue Apt. 1E		Amount of Each Disbursement this Period 100.00
City Saint Louis State MO Zip Code 63110	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836481 Date of Disbursement 10 / 20 / 2005
Mailing Address Elinor Finkelstein 1307 Stotesbury Avenue		Amount of Each Disbursement this Period 25.00
City Wyndmoor State PA Zip Code 19038	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836482 Date of Disbursement 10 / 17 / 2005
Mailing Address Sue Lindner 392 Sylvan Avenue		Amount of Each Disbursement this Period 100.00
City Mountain View State CA Zip Code 94041	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836483 Date of Disbursement 10 / 07 / 2005
Mailing Address B. Mill 1887 Greenfield Avenue #3		Amount of Each Disbursement this Period 50.00
City Los Angeles State CA Zip Code 90025	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836484 Date of Disbursement 10 / 04 / 2005
Mailing Address: Greta Newman 39 Steppingstone Lane		Amount of Each Disbursement this Period 100.00
City: Great Neck State: NY Zip Code: 11024	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836485 Date of Disbursement 10 / 28 / 2005
Mailing Address: Victoria Lowell 188 Sippewissett Road		Amount of Each Disbursement this Period 100.00
City: Falmouth State: MA Zip Code: 02540	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836486 Date of Disbursement 10 / 01 / 2005
Mailing Address: Sharon Stein 1035 Leonello Avenue		Amount of Each Disbursement this Period 25.00
City: Los Altos State: CA Zip Code: 94024	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836487 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address Jennifer Whitaker 39 5th Avenue		Amount of Each Disbursement this Period 250.00
City New York State NY Zip Code 10003	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836488 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address Nancy Wilds 1305 Windsor Point Road		Amount of Each Disbursement this Period 250.00
City Norfolk State VA Zip Code 23509	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836489 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address Dorothy Merrill 3831 Casper Avenue NW		Amount of Each Disbursement this Period 100.00
City Grand Rapids State MI Zip Code 49544	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836490 Date of Disbursement 10 / 03 / 2005
Mailing Address Barbara Lawrence 383 South Middlebush Road		Amount of Each Disbursement this Period 100.00
City Somerset	State NJ	
Zip Code 08873		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836491 Date of Disbursement 10 / 25 / 2005
Mailing Address Samona Sheppard 1301 N Tamiami Trl Apt 713		Amount of Each Disbursement this Period 25.00
City Sarasota	State FL	
Zip Code 34236		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836492 Date of Disbursement 10 / 11 / 2005
Mailing Address Judy Lumbert 11102 Lincoln Trl		Amount of Each Disbursement this Period 100.00
City Indianapolis	State IN	
Zip Code 46236		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Annette Stewart 1822 Marydale Road City: Dallas State: TX Zip Code: 75208 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____		Transaction ID: 21836493 Date of Disbursement: 10 / 11 / 2005 Amount of Each Disbursement this Period: 100.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Gail McBride 3703 Hillbrook Drive City: Austin State: TX Zip Code: 78731 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____		Transaction ID: 21836494 Date of Disbursement: 10 / 04 / 2005 Amount of Each Disbursement this Period: 250.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Linda Manry 18179 Bancroft Avenue City: Monte Sereno State: CA Zip Code: 95030 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____		Transaction ID: 21836495 Date of Disbursement: 10 / 03 / 2005 Amount of Each Disbursement this Period: 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Joan Wendling 11089 VanKal Ave. City: Lawton State: MI Zip Code: 49065 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836496 Date of Disbursement 10 / 31 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Melinda Reed 3671 Ward Road City: Wheat Ridge State: CO Zip Code: 80033 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836497 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Susanna Davison 1301 Irving Avenue City: Wheaton State: IL Zip Code: 60187 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836498 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836499 Date of Disbursement 10 / 25 / 2005
Mailing Address Leni Klaimitz 367 Locust Avenue		Amount of Each Disbursement this Period 100.00
City Rye State NY Zip Code 10580	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836500 Date of Disbursement 10 / 21 / 2005
Mailing Address Eugenia Durdall 1812 Edgewood Lane		Amount of Each Disbursement this Period 100.00
City Menlo Park State CA Zip Code 94025	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836501 Date of Disbursement 10 / 17 / 2005
Mailing Address Luana Sever 3635 64th Avenue, West		Amount of Each Disbursement this Period 100.00
City University PI State WA Zip Code 98466	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836502 Date of Disbursement 10 / 11 / 2005
Mailing Address Mary Sieber 3621 Georgetown Street		Amount of Each Disbursement this Period 25.00
City Houston State TX Zip Code 77005	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836503 Date of Disbursement 10 / 21 / 2005
Mailing Address Rosamond Douglass 1106 Catalina Road W		Amount of Each Disbursement this Period 25.00
City Jacksonville State FL Zip Code 32216	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836504 Date of Disbursement 10 / 03 / 2005
Mailing Address Phyllis Winkler 3610 Yacht Club Drive		Amount of Each Disbursement this Period 50.00
City Aventura State FL Zip Code 33180	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Wendy Goldman 3606 Fairmount St City Dallas State TX Zip Code 75219 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836505 Date of Disbursement 10 / 21 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Ellen Jacobsen-Isserman 3604 S vine St City Urbana State IL Zip Code 61802 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836506 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 150.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Muriel Turetsky 1301 Carter Drive City Rockaway State NJ Zip Code 07866 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836507 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836508 Date of Disbursement 10 / 11 / 2005
Mailing Address Catherine Gerhold 1804 Wightman Street		Amount of Each Disbursement this Period 200.00
City Pittsburgh State PA Zip Code 15217	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836509 Date of Disbursement 10 / 14 / 2005
Mailing Address Howard Kaufman 130 Sunrise Avenue Apt. 505		Amount of Each Disbursement this Period 50.00
City Palm Beach State FL Zip Code 33480	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836510 Date of Disbursement 10 / 27 / 2005
Mailing Address John O'Toole 3601 Connecticut Avenue NW		Amount of Each Disbursement this Period 100.00
City Washington State DC Zip Code 20008	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836511 Date of Disbursement 10 / 28 / 2005
Mailing Address Libby Tanner 1800 Sunset Harbour Drive		Amount of Each Disbursement this Period 100.00
City Miami State FL Zip Code 33139	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836512 Date of Disbursement 10 / 03 / 2005
Mailing Address Lyndsay Downs 3562 NW 68th Street		Amount of Each Disbursement this Period 100.00
City Seattle State WA Zip Code 98117	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836513 Date of Disbursement 10 / 04 / 2005
Mailing Address Elteen Stone 3550 Pacific Avenue		Amount of Each Disbursement this Period 100.00
City Livermore State CA Zip Code 94550	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Marilyn Freeman 130 Pheasant Run Drive City Sequim State WA Zip Code 98382 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836514 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Linda Byers 1105 Perkins City San Marcos State TX Zip Code 78666 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836515 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Virginia Mattson 3517 17th Way SE City Olympia State WA Zip Code 98501 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836516 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Rebecca Sterner 35 Horst Avenue City Lebanon State PA Zip Code 17042 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836517 Date of Disbursement 10 / 21 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Marcia Romick 1293 Regency City Eugene State OR Zip Code 97401 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836518 Date of Disbursement 10 / 21 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Kenneth Salinger 18 Putnam Road City Arlington State MA Zip Code 02474 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836519 Date of Disbursement 10 / 09 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Lois Snedden 6093 Carriage House Way City Reno State NV Zip Code 89509 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836520 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Donald Pelz 3470 Carpenter Road, # 211 City Ypsilanti State MI Zip Code 48197 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836521 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Alice Burks 3445 Vintage Valley Road City Ann Arbor State MI Zip Code 48105 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836522 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836523 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5
Mailing Address Elisabeth Pantaleoni 18 Deshon Avenue		Amount of Each Disbursement this Period 100.00
City Bronxville State NY Zip Code 10708	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836524 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address Catherine Fiore 18 Battle Green Road		Amount of Each Disbursement this Period 100.00
City Lexington State MA Zip Code 02421	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836525 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address Nancy Hay 341 Harbor View Avenue		Amount of Each Disbursement this Period 50.00
City Pismo Beach State CA Zip Code 93449	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Hollace McCormick 341 Fern Glen City La Jolla State CA Zip Code 92037 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836526 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Rose Hamlin 1102 K Street City Crescent City State CA Zip Code 95531 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836527 Date of Disbursement 10 / 27 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Rebecca Behrendt 3403 Field Avenue City Anacortes State WA Zip Code 98221 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836528 Date of Disbursement 10 / 25 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Joy Katoski 12740 Tiara Street City Valley Village State CA Zip Code 91607 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836529 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 35.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Terry Saario 34 Park Ln City Minneapolis State MN Zip Code 55416 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836530 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Margery Markowich 1785 Westwood Avenue City Columbus State OH Zip Code 43212 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836531 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Estelle Meislich 338 Lacey Drive City New Milford State NJ Zip Code 07646 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836532 Date of Disbursement 10 / 12 / 2005 Amount of Each Disbursement this Period 500.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Susan Spero 1774 S. Uinta Way City Denver State CO Zip Code 80231 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836533 Date of Disbursement 10 / 05 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Roy Ickes 1274 Overlook Drive City Washington State PA Zip Code 15301 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836534 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Glenn Watts 1767 Southview Dr City: Yellow Spgs State: OH Zip Code: 45387 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836535 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Janice Miller 1266 West 20th Avenue City: Oshkosh State: WI Zip Code: 54902 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836536 Date of Disbursement 10 / 21 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Robert Hartmann 335 Via Concha City: Aptos State: CA Zip Code: 95003 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836537 Date of Disbursement 10 / 07 / 2005 Amount of Each Disbursement this Period 1000.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Dorothy Flaster 1760 East Valley Road City Montecito State CA Zip Code 93108 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836538 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Cynthia Wicker Ste. 105 Pmb 283 City Tucson State AZ Zip Code 85749 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836539 Date of Disbursement 10 / 17 / 2005 Amount of Each Disbursement this Period 30.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Bernice Pernhall Rainberry Bay City Delray Beach State FL Zip Code 33445 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836540 Date of Disbursement 10 / 07 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address Lynn Seaman 3324 Vernal Avenue</p> <p>City Merced State CA Zip Code 95340</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836541 Date of Disbursement 10 / 14 / 2005</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address Jean Pasche 1100 University Street, Apt 3F</p> <p>City Seattle State WA Zip Code 98101</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836542 Date of Disbursement 10 / 25 / 2005</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address Matthew Morris PO Box 9157</p> <p>City Aspen State CO Zip Code 81612</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836543 Date of Disbursement 10 / 28 / 2005</p> <p>Amount of Each Disbursement this Period 5.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Nora Rowe 1029 Meadowwood Lane City Bowling Green State KY Zip Code 42104 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836544 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Joan Steele 332 Glenn Street City Ashland State OR Zip Code 97520 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836545 Date of Disbursement 10 / 15 / 2005 Amount of Each Disbursement this Period 20.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Carolyn Franck 12618 W. Butter Field Drive City Sun City West State AZ Zip Code 85375 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836546 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836547 Date of Disbursement 10 / 03 / 2005
Mailing Address: Joel Ginzberg PO Box 873		Amount of Each Disbursement this Period 250.00
City: Stone Ridge State: NY Zip Code: 12484	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836548 Date of Disbursement 10 / 07 / 2005
Mailing Address: Anne Carriere PO Box 84		Amount of Each Disbursement this Period 50.00
City: Norfolk State: AR Zip Code: 72658	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836549 Date of Disbursement 10 / 14 / 2005
Mailing Address: Jennifer Reynolds PO Box 83886		Amount of Each Disbursement this Period 250.00
City: Fairbanks State: AK Zip Code: 99708	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Sarah Weinberg 3304 81st Place, SE City Mercer Island State WA Zip Code 98040 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836550 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Carl Brown 1260 Los Arcos City Prescott State AZ Zip Code 86305 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836551 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Mary Harbold 1100 University Street City Seattle State WA Zip Code 98101 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836552 Date of Disbursement 10 / 21 / 2005 Amount of Each Disbursement this Period 200.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Andrew Carson PO Box 709 City Wilson State WY Zip Code 83014 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836553 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Claire Davidson 3300 Darby Road, Apt. 3311 City Haverford State PA Zip Code 19041 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836554 Date of Disbursement 10 / 28 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Madeleine Littman 175 Richdale Avenue, # 114 City Cambridge State MA Zip Code 02140 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836555 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 5.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Margaret Poole 33 Sunset Road City Wayland State MA Zip Code 01778 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836556 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Elaine Howe PO Box 624 City Sulphur State OK Zip Code 73086 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836557 Date of Disbursement 10 / 05 / 2005 Amount of Each Disbursement this Period 150.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Maureen McCarthy 126 Waverly Place, Apt. 3E City New York State NY Zip Code 10011 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836558 Date of Disbursement 10 / 21 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Carol Edmunds PO Box 58 City Readsboro State VT Zip Code 05350 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836559 Date of Disbursement 10 / 05 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Dennis White PO Box 540127 City Dallas State TX Zip Code 75354 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836560 Date of Disbursement 10 / 07 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Lynette Reilly 12516 Davan Drive City Silver Spring State MD Zip Code 20904 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836561 Date of Disbursement 10 / 25 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836562 Date of Disbursement 10 / 21 / 2005
Mailing Address Lois James 328 Paseo Pacifica		Amount of Each Disbursement this Period 50.00
City Encinitas State CA Zip Code 92024	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836563 Date of Disbursement 10 / 04 / 2005
Mailing Address Miriam Yantis 3269 Las Palmas		Amount of Each Disbursement this Period 25.00
City Houston State TX Zip Code 77027	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836564 Date of Disbursement 10 / 21 / 2005
Mailing Address Anita Siegenthaler PO Box 336		Amount of Each Disbursement this Period 25.00
City Pt. Clyde State ME Zip Code 04855	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Robert Lande 325 Central Park W. City New York State NY Zip Code 10025 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836565 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Rhoda Honigman PO Box 294 City Oilville State VA Zip Code 23129 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836566 Date of Disbursement 10 / 07 / 2005 Amount of Each Disbursement this Period 300.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Sheila Gershen PO Box 292 City Santa Fe State NM Zip Code 87504 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836567 Date of Disbursement 10 / 28 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Ed Rocker 3230 Chenu Avenue City Sacramento State CA Zip Code 95821 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836568 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 15.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Dorothy Hines PO Box 274 City Warren State VT Zip Code 05674 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836569 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Lucinda Briggs 17028 NE 18th Street City Bellevue State WA Zip Code 98008 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836570 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 10.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address Arthur Lazarus 3201 Fessenden Street, N.W.</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836571 Date of Disbursement 10 / 21 / 2005</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address Cynthia Kayser PO Box 48</p> <p>City Fairfax State CA Zip Code 94978</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836572 Date of Disbursement 10 / 17 / 2005</p> <p>Amount of Each Disbursement this Period 75.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address Richard Toole PO Box 256</p> <p>City Oak Bluffs State MA Zip Code 02557</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836573 Date of Disbursement 10 / 13 / 2005</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Lorette Zirker PO Box 249 City High Rolls State NM Zip Code 88325 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836574 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Robert Bridgham PO Box 242 City Eaton Center State NH Zip Code 03832 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836575 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Diane Grotz 1241 Huron Road City North Brunswick State NJ Zip Code 08902 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836576 Date of Disbursement 10 / 02 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836577 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address Sheridan Harvey 110 6th Street SE # 303		Amount of Each Disbursement this Period 100.00
City Washington State DC Zip Code 20003	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836578 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address Eleanor Grant 1025 Bamar Lane		Amount of Each Disbursement this Period 100.00
City Galveston State TX Zip Code 77554	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836579 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address Gerrish Milliken PO Box 1880		Amount of Each Disbursement this Period 1000.00
City Oroville State WA Zip Code 98844	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Catherine Jacobson 316 W 57th St City Hinsdale State IL Zip Code 60521 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836580 Date of Disbursement 10 / 12 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Dorothy Shaw 316 Helen Street City Midland State MI Zip Code 48640 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836581 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Nancy McCarthy PO Box 178 City Stinson Beach State CA Zip Code 94970 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836582 Date of Disbursement 10 / 05 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836583 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address Suzanne Seubert PO Box 174		Amount of Each Disbursement this Period 100.00
City Wilmington State DE Zip Code 19899	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836584 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address Doris Faber 17 Cobble Road # 0-1		Amount of Each Disbursement this Period 50.00
City Salisbury State CT Zip Code 06068	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836585 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address John Wolf PO Box 1429		Amount of Each Disbursement this Period 50.00
City Sanibel State FL Zip Code 33957	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836586 Date of Disbursement 10 / 25 / 2005
Mailing Address Angelina Erbes PO Box 1149		Amount of Each Disbursement this Period 20.00
City Whitefish State MT Zip Code 59937	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836587 Date of Disbursement 10 / 12 / 2005
Mailing Address Helga Eaddy 313 Templeton		Amount of Each Disbursement this Period 25.00
City Shelbyville State TN Zip Code 37160	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836588 Date of Disbursement 10 / 21 / 2005
Mailing Address Maria Pedak-Kari 24129 New Bury Road		Amount of Each Disbursement this Period 100.00
City Gaithersburg State MD Zip Code 20882	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Kristina Santos PO Box 1058 City Patterson State CA Zip Code 95363 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836589 Date of Disbursement 10 / 17 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Barbara Matthews PO Box 10553 City Fairbanks State AK Zip Code 99710 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836590 Date of Disbursement 10 / 05 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Dortha Marquis 124 Marshall Corner Woodsville City Hopewell State NJ Zip Code 08525 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836591 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 500.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Julie Monson PO Box 1029 City Point Reyes Sta. State CA Zip Code 94956 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836592 Date of Disbursement 10 / 21 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Roberta Ballard PO Box 1022 City Bodega Bay State CA Zip Code 94923 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836593 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Esther Palmer Pennwood Vlg. # K205 City Newtown State PA Zip Code 18940 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836594 Date of Disbursement 10 / 31 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Patricia Folkerth 31 Shearwater City Irvine State CA Zip Code 92604 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836595 Date of Disbursement 10 / 25 / 2005 Amount of Each Disbursement this Period 10.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Raymond Tchou 16765 Sunderland Road City Detroit State MI Zip Code 48219 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836596 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Barbara Ryder 166 Grove Avenue City Metuchen State NJ Zip Code 08840 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836597 Date of Disbursement 10 / 17 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836598 Date of Disbursement 10 / 25 / 2005
Mailing Address Lorraine Barnhart P.O. Box 382		Amount of Each Disbursement this Period 100.00
City Great Falls State VA Zip Code 22066	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836599 Date of Disbursement 10 / 28 / 2005
Mailing Address Margaret Solomon P.O. Box 3303		Amount of Each Disbursement this Period 100.00
City Incline Village State NV Zip Code 89450	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836600 Date of Disbursement 10 / 04 / 2005
Mailing Address Arlene Popkin 307 Knollwood Road Ext		Amount of Each Disbursement this Period 50.00
City Elmsford State NY Zip Code 10523	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836601 Date of Disbursement 10 / 20 / 2005
Mailing Address Patsy Rogers PO Box 616		Amount of Each Disbursement this Period 250.00
City New Suffolk State NY Zip Code 11956	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836602 Date of Disbursement 10 / 28 / 2005
Mailing Address Lisa Arbeiter P.O. Box 311		Amount of Each Disbursement this Period 50.00
City Metuchen State NJ Zip Code 08840	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836603 Date of Disbursement 10 / 14 / 2005
Mailing Address Martha Panetti 3061 Wintergreen Drive		Amount of Each Disbursement this Period 30.00
City Florissant State MO Zip Code 63033	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

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

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address Linda Perez 1650 County Road 112</p> <p>City Floresville State TX Zip Code 78114</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836604 Date of Disbursement 10 / 05 / 2005</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address Andrew Carson PO Box 709</p> <p>City Wilson State WY Zip Code 83014</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836605 Date of Disbursement 10 / 01 / 2005</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address Patricia Voelz 3055 Bentwater Drive</p> <p>City Montgomery State TX Zip Code 77356</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836606 Date of Disbursement 10 / 12 / 2005</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Susan Moundalexis 16460 Machodoc Creek Lane City King George State VA Zip Code 22485 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836607 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Ingrid Heide 305 E. 24th Street City New York State NY Zip Code 10010 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836608 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 15.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Rosemary Rowan 666 Upas Street Unit 404 City San Diego State CA Zip Code 92103 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836609 Date of Disbursement 10 / 31 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Susan Hazard 1025 5th Avenue # 3CN City New York State NY Zip Code 10028 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836610 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Ruth Hailperin 175 W. North Street, Apt. 234C City Nazaret State PA Zip Code 18064 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836611 Date of Disbursement 10 / 21 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Margaret Greer Dept. of Romances Studies City Durham State NC Zip Code 27708 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836612 Date of Disbursement 10 / 28 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Mary Ittner Bob Rutemoeller City Gualala State CA Zip Code 95445 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836613 Date of Disbursement 10 / 12 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address W. Harbour 3302 Roxburg Drive City Lexington State KY Zip Code 40503 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836614 Date of Disbursement 10 / 12 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Lynn Hauser 11 Sylvan Lane City Dekalb State IL Zip Code 60115 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836615 Date of Disbursement 10 / 23 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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TOTAL This Period (last page this line number only) ▶	[Empty Box]

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Anne Ehrlich Biological Sciences City Stanford State CA Zip Code 94305 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836616 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Penelope Taylor 1643 Seacayne Blvd. City Aptos State CA Zip Code 95003 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836617 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Anita DeVine 988 Blvd of the Arts #1210 City Sarasota State FL Zip Code 34236 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836618 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Harriet Gruhn 3025 NE 137 #207 City Seattle State WA Zip Code 98125 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836619 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Robert Keller 9809 Ramsay Drive City Fredericksburg State VA Zip Code 22408 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836620 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Donna Sylvan 9785 Huntcliff Trace City Atlanta State GA Zip Code 30350 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836621 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Sharon Jenkins 301 Coronado Dr Apt 1004 City Denton State TX Zip Code 76209 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836622 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Barbara Corwin 1230 Winding Ridge Terrace City Colorado Springs State CO Zip Code 80919 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836623 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 200.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Elizabeth Sherer 96 Perrine Road City Monmouth Junction State NJ Zip Code 08852 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836624 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Patricia Palmer 96 Fairbanks Ave City Wellesley Hls State MA Zip Code 02481 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836625 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address M. Roberta Keiter 3005 Portofino Isle 0-2 City Coconut Creek State FL Zip Code 33066 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836626 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Steven Mercado 1628 Peapond Road City North Bellmore State NY Zip Code 11710 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836627 Date of Disbursement 10 / 31 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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TOTAL This Period (last page this line number only) ▶	[]

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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836628 Date of Disbursement 10 / 11 / 2005
Mailing Address Kathryn Ryan 951 Hepburn Street		Amount of Each Disbursement this Period 50.00
City Williamsport State PA Zip Code 17701	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836629 Date of Disbursement 10 / 09 / 2005
Mailing Address Sandra Laurenson 937 Trimble Place		Amount of Each Disbursement this Period 50.00
City Sagamore Hills State OH Zip Code 44067	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836630 Date of Disbursement 10 / 13 / 2005
Mailing Address Lynn Neuville 9324 North 110th Street		Amount of Each Disbursement this Period 50.00
City Scottsdale State AZ Zip Code 85259	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Joyce Hausdorff 30 West 60th Street, Apt. 12R City: New York State: NY Zip Code: 10023 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836631 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Diane McNeilly 924 N. 6th Street City: Rochelle State: IL Zip Code: 61068 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836632 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address: Sharon Callaway 922 Constellation Drive City: Great Falls State: VA Zip Code: 22066 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836633 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836634 Date of Disbursement 10 / 11 / 2005
Mailing Address: Beatriz Clewell-Romero 1621 13th Street, N.W.		Amount of Each Disbursement this Period 100.00
City: Washington State: DC Zip Code: 20009	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836635 Date of Disbursement 10 / 12 / 2005
Mailing Address: Ellen Hanly 9205 122nd Court NE		Amount of Each Disbursement this Period 25.00
City: Kirkland State: WA Zip Code: 98033	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836636 Date of Disbursement 10 / 11 / 2005
Mailing Address: Edith Naismith 1224 Cornwall Avenue		Amount of Each Disbursement this Period 25.00
City: Bellingham State: WA Zip Code: 98225	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Ruth Katz 30 Creekside Way City Asheville State NC Zip Code 28804 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836637 Date of Disbursement 10 / 05 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Estelle Dashman 11 Riverview Farm Road City Ossining State NY Zip Code 10562 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836638 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Eva Apfelbaum 92 Foster Street City Littelton State MA Zip Code 01460 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836639 Date of Disbursement 10 / 27 / 2005 Amount of Each Disbursement this Period 20.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p>		<p>Transaction ID: 21836640 Date of Disbursement 10 / 06 / 2005</p>
<p>Mailing Address Margaret Johnson 9190 Brier Rd.</p>		<p>Amount of Each Disbursement this Period 50.00</p>
<p>City La Mesa State CA Zip Code 91942</p>	<p>Category/Type</p>	
<p>Purpose of Disbursement Candidate Contrib Earmarked</p>		
<p>Candidate Name</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>[MEMO ITEM] MEMO</p>
<p>State: District:</p>		

<p>B. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p>		<p>Transaction ID: 21836641 Date of Disbursement 10 / 05 / 2005</p>
<p>Mailing Address Maurine Behrens 12222 Orange Drive</p>		<p>Amount of Each Disbursement this Period 50.00</p>
<p>City Whittier State CA Zip Code 90601</p>	<p>Category/Type</p>	
<p>Purpose of Disbursement Candidate Contrib Earmarked</p>		
<p>Candidate Name</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>[MEMO ITEM] MEMO</p>
<p>State: District:</p>		

<p>C. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p>		<p>Transaction ID: 21836642 Date of Disbursement 10 / 03 / 2005</p>
<p>Mailing Address Karen Martin 916 N Graham Ave</p>		<p>Amount of Each Disbursement this Period 100.00</p>
<p>City Indianapolis State IN Zip Code 46219</p>	<p>Category/Type</p>	
<p>Purpose of Disbursement Candidate Contrib Earmarked</p>		
<p>Candidate Name</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>[MEMO ITEM] MEMO</p>
<p>State: District:</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address Sandra Casey 915 Pompano drive</p> <p>City Jupiter State FL Zip Code 33458</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836643 Date of Disbursement 10 / 03 / 2005</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address Debbie Linthorst 7 Rumson Court</p> <p>City Pennington State NJ Zip Code 08534</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836644 Date of Disbursement 10 / 04 / 2005</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address Nancy Driscoll 1620 Lombardi Rd</p> <p>City Mount Shasta State CA Zip Code 96067</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836645 Date of Disbursement 10 / 20 / 2005</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

**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 checked="" 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)
EMILY's List

<p>A. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p>		<p>Transaction ID: 21836646 Date of Disbursement 10 / 14 / 2005</p>
<p>Mailing Address Margret Jacoby 912 Blossom Drive</p>		<p>Amount of Each Disbursement this Period 100.00</p>
<p>City Santa Clara State CA Zip Code 95050</p>	<p>Category/Type</p>	
<p>Purpose of Disbursement Candidate Contrib Earmarked</p>		<p>[MEMO ITEM] MEMO</p>
<p>Candidate Name</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>B. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p>		<p>Transaction ID: 21836647 Date of Disbursement 10 / 05 / 2005</p>
<p>Mailing Address Mary McMillan 2925 Lincoln Drive #713</p>		<p>Amount of Each Disbursement this Period 250.00</p>
<p>City Roseville State MN Zip Code 55113</p>	<p>Category/Type</p>	
<p>Purpose of Disbursement Candidate Contrib Earmarked</p>		<p>[MEMO ITEM] MEMO</p>
<p>Candidate Name</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>C. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p>		<p>Transaction ID: 21836648 Date of Disbursement 10 / 12 / 2005</p>
<p>Mailing Address Marcia Raeber-McClain 910 Holly Street</p>		<p>Amount of Each Disbursement this Period 100.00</p>
<p>City Blytheville State AR Zip Code 72315</p>	<p>Category/Type</p>	
<p>Purpose of Disbursement Candidate Contrib Earmarked</p>		<p>[MEMO ITEM] MEMO</p>
<p>Candidate Name</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address CleoBell Heiple-Tice 1615 N. 2nd Avenue City Upland State CA Zip Code 91784 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836649 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Pamela Thul-Immler 9060 Madeline Lake Road City Woodruff State WI Zip Code 54568 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836650 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Helen Long 2904 Via Chiquita City Santa Fe State NM Zip Code 87505 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836651 Date of Disbursement 10 / 21 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836652 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address Margaret Layne 1613 Honeysuckle Drive		Amount of Each Disbursement this Period 100.00
City Blacksburg State VA Zip Code 24060	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836653 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address Ruth Zabre 11 N. Hillside Road		Amount of Each Disbursement this Period 50.00
City South Deerfield State MA Zip Code 01373	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836654 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address Sandra Wilson 9 Sawmill Lane		Amount of Each Disbursement this Period 100.00
City Greenwich State CT Zip Code 06830	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Jill Snyder 12222 Forsythe Drive City Austin State TX Zip Code 78759 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836655 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Jean Howard 89 Meridian Street City Melrose State MA Zip Code 02176 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836656 Date of Disbursement 10 / 21 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Carole Light PO Box 99 City Scaly Mtn State NC Zip Code 28775 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836657 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address John Kerber 8834 Pointe Vista Drive City Victoria State MN Zip Code 55386 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836658 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Robert Katzman 1611 Calle De Andluca City La Jolla State CA Zip Code 92037 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836659 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Janet Krack 8774 Laurel Drive City Erie State PA Zip Code 16509 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836660 Date of Disbursement 10 / 21 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 707 / 1975

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836661 Date of Disbursement 10 / 13 / 2005
Mailing Address Janet Randall 862 Jonive Rd		Amount of Each Disbursement this Period 250.00
City santa rosa State CA Zip Code 95472	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836662 Date of Disbursement 10 / 04 / 2005
Mailing Address Susan Olsen 8601 Sultana Drive		Amount of Each Disbursement this Period 100.00
City Anchorage State AK Zip Code 99516	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836663 Date of Disbursement 10 / 12 / 2005
Mailing Address Ann Maddox 289 Deer Path Ln		Amount of Each Disbursement this Period 100.00
City Battle Creek State MI Zip Code 49015	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836664 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address Catherine Smith 85316 Coyote Creek Road		Amount of Each Disbursement this Period 250.00
City Veneta State OR Zip Code 97487	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836665 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address Beverlee Mitchell 1605 N. 7th Street		Amount of Each Disbursement this Period 100.00
City Boise State ID Zip Code 83702	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836666 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address Kathryn Kami 2880 NE 14th Street, Apt. 405		Amount of Each Disbursement this Period 100.00
City Pompano Beach State FL Zip Code 33062	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address Betty Grant 2845 Colfax Ave S Apt 401</p> <p>City Minneapolis State MN Zip Code 55408</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 21836667</p> <p>Date of Disbursement 10 / 11 / 2005</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/ Type</p>

<p>B. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address Kendall Tersiguel Rue Du Groselenberg 54</p> <p>City 1180 Uccle State Zip Code 00000</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 21836668</p> <p>Date of Disbursement 10 / 04 / 2005</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/ Type</p>

<p>C. Maria Cantwell Contributions</p> <p>Full Name (Last, First, Middle Initial) Maria Cantwell Contributions</p> <p>Mailing Address S. Tellinghuisen 837 S. Spring Avenue</p> <p>City La Grange State IL Zip Code 60525</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 21836669</p> <p>Date of Disbursement 10 / 06 / 2005</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/ Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Darrell Helmuth 83570 Woodland Lane City Florence State OR Zip Code 97439 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836670 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Virginia Ralston 8348 Colton Cove City Germantown State TN Zip Code 38139 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836671 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Ida Braun 1 Baldwin Avenue, Apt. 709 City San Mateo State CA Zip Code 94401 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836672 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 1000.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Phyllis Grossberg 831 Vista Grande Ave City Los Altos State CA Zip Code 94024 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836673 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Mitzi Henderson 16 Sunset Lane City Menlo Park State CA Zip Code 94025 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836674 Date of Disbursement 10 / 23 / 2005 Amount of Each Disbursement this Period 500.00 [MEMO ITEM] MEMO
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C. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions Mailing Address Beulah Frankel-Tillisch 121 Vine Street, Unit 1401 City Seattle State WA Zip Code 98121 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836675 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Cantwell Contributions		Transaction ID: 21836676 Date of Disbursement 10 / 06 / 2005
Mailing Address Sara Anderson 100 South Street, Apt. 104		Amount of Each Disbursement this Period 100.00
City Sausalito State CA Zip Code 94965	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Maria Cantwell Contributions		Transaction ID: 21836677 Date of Disbursement 10 / 21 / 2005
Mailing Address Renate Wasserman 102 Tonset Rd.		Amount of Each Disbursement this Period 50.00
City Orleans State MA Zip Code 02653	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Maria Cantwell Contributions		Transaction ID: 21836678 Date of Disbursement 10 / 31 / 2005
Mailing Address George Sodowick 28 Mountain Ridge Drive		Amount of Each Disbursement this Period 100.00
City Livingston State NJ Zip Code 07039	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Maria Cantwell Contributions Full Name (Last, First, Middle Initial) Maria Cantwell Contributions		Transaction ID: 21836679 Date of Disbursement 10 / 11 / 2005
Mailing Address: Norma Lawler 8207 HWY 252		Amount of Each Disbursement this Period 100.00
City: Honea Path State: SC Zip Code: 29654	Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Category/Type: _____	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Melissa Bean Contributions		Transaction ID: 21836680 Date of Disbursement 10 / 14 / 2005
Mailing Address: Kathleen Crittenden 820 S. Morgan Street, # 2		Amount of Each Disbursement this Period 100.00
City: Chicago State: IL Zip Code: 60607	Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Category/Type: _____	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Melissa Bean Contributions		Transaction ID: 21836681 Date of Disbursement 10 / 14 / 2005
Mailing Address: Marybeth Bronson 28 Everett Street		Amount of Each Disbursement this Period 25.00
City: Jamaica Plain State: MA Zip Code: 02130	Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Category/Type: _____	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836682 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address Geraldine Hurley 16 Pine Tree Road		Amount of Each Disbursement this Period 100.00
City Salisbury	State NC	
Zip Code 28144		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836683 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address Joan Pate 1209 Pheasant Ridge		Amount of Each Disbursement this Period 25.00
City Goshen	State KY	
Zip Code 40026		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836684 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address Caryle Miller 8132 Keeler Street		Amount of Each Disbursement this Period 200.00
City Alexandria	State VA	
Zip Code 22309		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836685 Date of Disbursement 10 / 11 / 2005
Mailing Address Shirley Gleich 8116 Pine Circle		Amount of Each Disbursement this Period 50.00
City Tamarac State FL Zip Code 33321	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836686 Date of Disbursement 10 / 27 / 2005
Mailing Address Constance Greenfield 279 Sturges Highway		Amount of Each Disbursement this Period 250.00
City Westport State CT Zip Code 06880	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836687 Date of Disbursement 10 / 05 / 2005
Mailing Address Dolores Crane 16 New York Avenue		Amount of Each Disbursement this Period 50.00
City Stony Brook State NY Zip Code 11790	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836688 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address Lynn Schoenmann 800 Powell Street		Amount of Each Disbursement this Period 200.00
City San Francisco State CA Zip Code 94108	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836689 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address Anne Patterson 80 Buckingham St		Amount of Each Disbursement this Period 100.00
City Cambridge State MA Zip Code 02138	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836690 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address Linda Ervin 2731 St Regis Ave		Amount of Each Disbursement this Period 150.00
City Brentwood State CA Zip Code 94513	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address Lynda Wills 8 MacArthur Street City Somerville State MA Zip Code 02145 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836691 Date of Disbursement 10 / 19 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address Jesse Kehres 8 Classic Cir City Madison State WI Zip Code 53719 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836692 Date of Disbursement 10 / 01 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address Janice Moritz 272 Getzville Road City Amherst State NY Zip Code 14226 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836693 Date of Disbursement 10 / 31 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial) Melissa Bean</p> <p>Mailing Address Roberta Reich 7825 Westwood Drive</p> <p>City Elmwood Park State IL Zip Code 60707</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836694 Date of Disbursement: 10 / 06 / 2005</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial) Melissa Bean</p> <p>Mailing Address Nancy Martin 2706 Belknap Beach</p> <p>City Prospect State KY Zip Code 40059</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836695 Date of Disbursement: 10 / 14 / 2005</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial) Melissa Bean</p> <p>Mailing Address Mary Besore 2705 Stampede Court</p> <p>City Rocklin State CA Zip Code 95765</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836696 Date of Disbursement: 10 / 03 / 2005</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

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 checked="" 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)
EMILY's List

A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Lynne Diamond 1200 N. College Avenue City: Claremont State: CA Zip Code: 91711 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836697 Date of Disbursement: 10 / 28 / 2005 Amount of Each Disbursement this Period: 250.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Nancy Baldwin 78 Dietz Street City: Oneonta State: NY Zip Code: 13820 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836698 Date of Disbursement: 10 / 19 / 2005 Amount of Each Disbursement this Period: 25.00 [MEMO ITEM] MEMO
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C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Marcia Allen 1551 Spring Drive City: Wichita State: KS Zip Code: 67208 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836699 Date of Disbursement: 10 / 06 / 2005 Amount of Each Disbursement this Period: 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836700 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address Barbara Hopfinger 773 N. 1st Street		Amount of Each Disbursement this Period 25.00
City El Cajon	State CA	
Zip Code 92021		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836701 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address Stephen Levy 7701 Leesburg Drive		Amount of Each Disbursement this Period 100.00
City Bethesda	State MD	
Zip Code 20817		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836702 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address Harriet Kogen 1200 Lindenwood Drive		Amount of Each Disbursement this Period 50.00
City Winnetka	State IL	
Zip Code 60093		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions

Full Name (Last, First, Middle Initial) _____
 Mailing Address Marc Collin
 2692 Landon Road

City Shaker Heights State OH Zip Code 44122

Purpose of Disbursement _____
 Candidate Contrib Earmarked _____

Candidate Name _____ Category/Type _____

Office Sought: House Senate President
 Disbursement For: 2006 Primary General
 Other (specify) ▼

State: _____ District: _____

Transaction ID: 21836703
 Date of Disbursement 10 / 25 / 2005

Amount of Each Disbursement this Period 25.00

**[MEMO ITEM]
MEMO**

B. Melissa Bean Contributions

Full Name (Last, First, Middle Initial) _____
 Mailing Address Charles Haley
 15426 W. Fairmount Avenue

City Goodyear State AZ Zip Code 85338

Purpose of Disbursement _____
 Candidate Contrib Earmarked _____

Candidate Name _____ Category/Type _____

Office Sought: House Senate President
 Disbursement For: 2006 Primary General
 Other (specify) ▼

State: _____ District: _____

Transaction ID: 21836704
 Date of Disbursement 10 / 07 / 2005

Amount of Each Disbursement this Period 100.00

**[MEMO ITEM]
MEMO**

C. Melissa Bean Contributions

Full Name (Last, First, Middle Initial) _____
 Mailing Address Jennifer Berlekamp
 120 Hazel Lane

City Piedmont State CA Zip Code 94611

Purpose of Disbursement _____
 Candidate Contrib Earmarked _____

Candidate Name _____ Category/Type _____

Office Sought: House Senate President
 Disbursement For: 2006 Primary General
 Other (specify) ▼

State: _____ District: _____

Transaction ID: 21836705
 Date of Disbursement 10 / 21 / 2005

Amount of Each Disbursement this Period 500.00

**[MEMO ITEM]
MEMO**

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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 Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Melissa Bean Contributions Mailing Address: Renate Wasserman 102 Tonset Rd. City: Orleans State: MA Zip Code: 02653 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____		Transaction ID: 21836706 Date of Disbursement: 10 / 21 / 2005 Amount of Each Disbursement this Period: 25.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Melissa Bean Contributions Mailing Address: Shearer Bowman 756 Garden Grove Walk City: Lexington State: KY Zip Code: 40502 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____		Transaction ID: 21836707 Date of Disbursement: 10 / 14 / 2005 Amount of Each Disbursement this Period: 150.00 [MEMO ITEM] MEMO
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C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Melissa Bean Contributions Mailing Address: Margaret Podlich 2645 E Southern Ave Apt A226 City: Tempe State: AZ Zip Code: 85282 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____		Transaction ID: 21836708 Date of Disbursement: 10 / 19 / 2005 Amount of Each Disbursement this Period: 25.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional)	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836709 Date of Disbursement 10 / 06 / 2005
Mailing Address Ann Lemke 7450 Olivetas Avenue, # D361		Amount of Each Disbursement this Period 100.00
City LaJolla	State CA	
Zip Code 92037		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836710 Date of Disbursement 10 / 19 / 2005
Mailing Address Susan Stanton 741 W 58th St		Amount of Each Disbursement this Period 100.00
City Casper	State WY	
Zip Code 82601		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836711 Date of Disbursement 10 / 31 / 2005
Mailing Address Merilee Ross 15327 Sherwood Forest Dr		Amount of Each Disbursement this Period 50.00
City Tampa	State FL	
Zip Code 33647		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 724 / 1975

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address Jane Godfrey 7400 Birch Ave City Takoma Park State MD Zip Code 20912 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836712 Date of Disbursement 10 / 31 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address Aino Husen 2625 Boone Avenue S City Minneapolis State MN Zip Code 55426 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836713 Date of Disbursement 10 / 19 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address Lael Braymer 2604 123rd Avenue SE City Bellevue State WA Zip Code 98005 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836714 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836715 Date of Disbursement 10 / 06 / 2005
Mailing Address Elizabeth Jackets 7306 Channel View Drive		Amount of Each Disbursement this Period 10.00
City Anacortes State WA Zip Code 98221	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836716 Date of Disbursement 10 / 31 / 2005
Mailing Address Marjorie Harris 1529 West Hood Avenue		Amount of Each Disbursement this Period 25.00
City Chicago State IL Zip Code 60660	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836717 Date of Disbursement 10 / 31 / 2005
Mailing Address Mary Lerza 2600 Overland Avenue #101		Amount of Each Disbursement this Period 100.00
City Los Angeles State CA Zip Code 90064	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions

Full Name (Last, First, Middle Initial)
Melissa Bean

Mailing Address Marcia Knowles
7300 Dearwester Dr Apt 210

City Cincinnati State OH Zip Code 45236

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2006
 Primary General
 Other (specify) ▼

Transaction ID: 21836718
Date of Disbursement
10 / 04 / 2005

Amount of Each Disbursement this Period
100.00

[MEMO ITEM]
MEMO

B. Melissa Bean Contributions

Full Name (Last, First, Middle Initial)
Melissa Bean

Mailing Address Cynthia Metcalfe
26 Upper Ladue Road

City Saint Louis State MO Zip Code 63124

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2006
 Primary General
 Other (specify) ▼

Transaction ID: 21836719
Date of Disbursement
10 / 27 / 2005

Amount of Each Disbursement this Period
200.00

[MEMO ITEM]
MEMO

C. Melissa Bean Contributions

Full Name (Last, First, Middle Initial)
Melissa Bean

Mailing Address Phyllis Goldman
2593 Fairford Ln

City Northbrook State IL Zip Code 60062

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2006
 Primary General
 Other (specify) ▼

Transaction ID: 21836720
Date of Disbursement
10 / 06 / 2005

Amount of Each Disbursement this Period
100.00

[MEMO ITEM]
MEMO

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836721 Date of Disbursement 10 / 07 / 2005
Mailing Address Karen Cox 15214 Manzanita Diggins		Amount of Each Disbursement this Period 50.00
City Nevada City State CA Zip Code 95959	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836722 Date of Disbursement 10 / 12 / 2005
Mailing Address Patricia Perry 257 Bartram Road		Amount of Each Disbursement this Period 100.00
City Riverside State IL Zip Code 60546	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836723 Date of Disbursement 10 / 06 / 2005
Mailing Address Nadine Martin 102 Poshard Street		Amount of Each Disbursement this Period 20.00
City Pleasant Hill State CA Zip Code 94523	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 728 / 1975

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836724 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address David Stahl 100 Magnolia Road		Amount of Each Disbursement this Period 50.00
City Manchester State NH Zip Code 03104	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836725 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address Mary Allen 719 Lincoln Street		Amount of Each Disbursement this Period 100.00
City Sayre State PA Zip Code 18840	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836726 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address Georgia Locker 713 Duke Square		Amount of Each Disbursement this Period 20.00
City Fort Collins State CO Zip Code 80525	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions

Full Name (Last, First, Middle Initial)
Melissa Bean

Mailing Address Margaret Hauck
12 Running Brook Road

City Bridgewater State NJ Zip Code 08807

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2006
 Primary General
 Other (specify) ▼

Transaction ID: 21836727
Date of Disbursement
10 / 03 / 2005

Amount of Each Disbursement this Period
100.00

[MEMO ITEM]
MEMO

B. Melissa Bean Contributions

Full Name (Last, First, Middle Initial)
Melissa Bean

Mailing Address Judith Sanderson
1520 15th Avenue East Apt. 48

City Seattle State WA Zip Code 98112

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2006
 Primary General
 Other (specify) ▼

Transaction ID: 21836728
Date of Disbursement
10 / 07 / 2005

Amount of Each Disbursement this Period
50.00

[MEMO ITEM]
MEMO

C. Melissa Bean Contributions

Full Name (Last, First, Middle Initial)
Melissa Bean

Mailing Address Karen Keefer
705 Chesapeake Avenue

City Silver Spring State MD Zip Code 20910

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2006
 Primary General
 Other (specify) ▼

Transaction ID: 21836729
Date of Disbursement
10 / 14 / 2005

Amount of Each Disbursement this Period
50.00

[MEMO ITEM]
MEMO

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836730 Date of Disbursement 10 / 11 / 2005
Mailing Address: Jean Schreiber 152 Glenwood Avenue		Amount of Each Disbursement this Period 15.00
City: Winnetka State: IL Zip Code: 60093	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836731 Date of Disbursement 10 / 03 / 2005
Mailing Address: Yvette Rudnitzky 702 W. Matson Run Parkway		Amount of Each Disbursement this Period 100.00
City: Wilmington State: DE Zip Code: 19802	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836732 Date of Disbursement 10 / 19 / 2005
Mailing Address: Beth Bangert 10842 Wilkinson Avenue		Amount of Each Disbursement this Period 100.00
City: Cupertino State: CA Zip Code: 95014	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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) EMILY's List	
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A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Andrea Michael 2504 Briargrove Drive City: Austin State: TX Zip Code: 78704 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____		Transaction ID: 21836733 Date of Disbursement: <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y Amount of Each Disbursement this Period: <input type="text"/> 50.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Peter Politzer 701 Kettner Blvd. #53 City: San Diego State: CA Zip Code: 92101 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____		Transaction ID: 21836734 Date of Disbursement: <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y Amount of Each Disbursement this Period: <input type="text"/> 100.00 [MEMO ITEM] MEMO
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C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: David Wells 7000 Steely Ridge Road City: Grizzly Flats State: CA Zip Code: 95636 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____		Transaction ID: 21836735 Date of Disbursement: <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y Amount of Each Disbursement this Period: <input type="text"/> 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional)	<input type="text"/> 0.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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)

PAGE 732 / 1975

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836736 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address Catherine Campbell 2500 S Melanie Lane		Amount of Each Disbursement this Period 20.00
City Sioux Falls State SD Zip Code 57103	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836737 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5
Mailing Address Susan Cramer 25 Autumn Lane		Amount of Each Disbursement this Period 200.00
City Amherst State MA Zip Code 01002	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836738 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address Jane Tripp 249 Azalea Ln		Amount of Each Disbursement this Period 50.00
City West Grove State PA Zip Code 19390	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836739 Date of Disbursement 10 / 06 / 2005
Mailing Address: Jean Reller 1507 Woodacre Drive		Amount of Each Disbursement this Period 100.00
City: McLean State: VA Zip Code: 22101	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836740 Date of Disbursement 10 / 14 / 2005
Mailing Address: Carol Stein 680 N Lake Shore Dr Apt 205		Amount of Each Disbursement this Period 25.00
City: Chicago State: IL Zip Code: 60611	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836741 Date of Disbursement 10 / 11 / 2005
Mailing Address: Lynnette McGie 248 W 3rd Avenue		Amount of Each Disbursement this Period 50.00
City: Chico State: CA Zip Code: 95926	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address Pamela Moore 6768 Areca Blvd.</p> <p>City Sarasota State FL Zip Code 34241</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 21836742</p> <p>Date of Disbursement</p> <p>10 / 14 / 2005</p> <p>Amount of Each Disbursement this Period</p> <p>100.00</p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		

<p>B. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address Betty Head 119 Maple Road</p> <p>City Cobleskill State NY Zip Code 12043</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 21836743</p> <p>Date of Disbursement</p> <p>10 / 06 / 2005</p> <p>Amount of Each Disbursement this Period</p> <p>25.00</p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		

<p>C. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address Robert Meagher 108 Curtis Street</p> <p>City Somerville State MA Zip Code 02144</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 21836744</p> <p>Date of Disbursement</p> <p>10 / 07 / 2005</p> <p>Amount of Each Disbursement this Period</p> <p>10.00</p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

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 checked="" 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)
EMILY's List

A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address Carol Alsberge 673 County Road 335 City Franklin State MO Zip Code 65250 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836745 Date of Disbursement 10 / 19 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address Irene Leiwant 246 Crescenzi Court City West Orange State NJ Zip Code 07052 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836746 Date of Disbursement 10 / 05 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address Isaac Heard 6728 Constitution Lane City Charlotte State NC Zip Code 28210 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836747 Date of Disbursement 10 / 19 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836748 Date of Disbursement 10 / 19 / 2005
Mailing Address Robert Boileau 6724 Ralston Beach Circle		Amount of Each Disbursement this Period 50.00
City Tampa State FL Zip Code 33614	Purpose of Disbursement Candidate Contrib Earmarked	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836749 Date of Disbursement 10 / 19 / 2005
Mailing Address Ellen Siever 67 Beals Street		Amount of Each Disbursement this Period 100.00
City Brookline State MA Zip Code 02446	Purpose of Disbursement Candidate Contrib Earmarked	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836750 Date of Disbursement 10 / 14 / 2005
Mailing Address Barbara Seiler 119 Laurel Hollow Way		Amount of Each Disbursement this Period 250.00
City Saluda State NC Zip Code 28773	Purpose of Disbursement Candidate Contrib Earmarked	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836751 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address Virginia Blackledge 663 Coventry Road		Amount of Each Disbursement this Period 100.00
City Kensington State CA Zip Code 94707	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836752 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address Sara Pfaff 2425 Sherwood Road		Amount of Each Disbursement this Period 25.00
City Columbus State OH Zip Code 43209	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836753 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address Dorothy Dayton 2423 Walden Court		Amount of Each Disbursement this Period 300.00
City Iowa City State IA Zip Code 52246	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836754 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address Irene Goldman 15 West 72nd Street, Apt. 21S		Amount of Each Disbursement this Period 50.00
City New York State NY Zip Code 10023	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836755 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address Rosemary Smith 653 Ravel Court		Amount of Each Disbursement this Period 100.00
City Las Vegas State NV Zip Code 89145	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836756 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address Eleanor Weiss-Zoub 6509 N. Kilbourn Avenue		Amount of Each Disbursement this Period 50.00
City Lincolnwood State IL Zip Code 60712	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Mary Hudspeth 118 E. 6th Street City: Ontario State: CA Zip Code: 91764 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836757 Date of Disbursement 10 / 19 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Patricia Elvebak 650 Oakdale Avenue City: Corte Madera State: CA Zip Code: 94925 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836758 Date of Disbursement 10 / 12 / 2005 Amount of Each Disbursement this Period 200.00 [MEMO ITEM] MEMO
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C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Roberta Martini 1175 York Avenue City: New York State: NY Zip Code: 10021 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836759 Date of Disbursement 10 / 17 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836760 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address Mary Burke 65 E Elm St		Amount of Each Disbursement this Period 100.00
City Chicago State IL Zip Code 60611	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836761 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5
Mailing Address Nancy Pastroff 6420 SW 50 Street		Amount of Each Disbursement this Period 100.00
City Miami State FL Zip Code 33155	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836762 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address Nedra Palmer 6415 Paradise Pt. Road		Amount of Each Disbursement this Period 50.00
City Flowery Br State GA Zip Code 30542	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836763 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address Lois Lipton 24 W. Erie Street, Apt. 4N		Amount of Each Disbursement this Period 100.00
City Chicago State IL Zip Code 60610	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836764 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5
Mailing Address Hans Engelke 640 Weaver Avenue		Amount of Each Disbursement this Period 70.00
City Kalamazoo State MI Zip Code 49006	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836765 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address Ruth Holland 24 Peacock Court		Amount of Each Disbursement this Period 500.00
City San Rafael State CA Zip Code 94901	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address Carol Leibman 100 Diplomat Drive, # 6F City Mt. Kisco State NY Zip Code 10549 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836766 Date of Disbursement 10 / 02 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address Gail Chester 24 Mill Road City Matawan State NJ Zip Code 07747 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836767 Date of Disbursement 10 / 25 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address Jill Kraus 791 Park Avenue, Apt. 6A City New York State NY Zip Code 10021 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836768 Date of Disbursement 10 / 19 / 2005 Amount of Each Disbursement this Period 500.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836769 Date of Disbursement 10 / 06 / 2005
Mailing Address Nancy Trick 6302 W Halbert Rd		Amount of Each Disbursement this Period 25.00
City Bethesda State MD Zip Code 20817	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836770 Date of Disbursement 10 / 19 / 2005
Mailing Address Gary Gemmer 63 Lincoln Lane		Amount of Each Disbursement this Period 50.00
City Lucasville State OH Zip Code 45648	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836771 Date of Disbursement 10 / 21 / 2005
Mailing Address Delta Osborne 148 Crossbow Lane		Amount of Each Disbursement this Period 30.00
City Gaithersburg State MD Zip Code 20878	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address Alan Solinger 1465 65th St Apt 253</p> <p>City Emeryville State CA Zip Code 94608</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 21836772</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="25.00"/></p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>B. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address Alison Prindle 235 N. Union Street</p> <p>City Delaware State OH Zip Code 43015</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 21836773</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>C. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address Helen Volk 6201 Rutland Drive</p> <p>City Carmichael State CA Zip Code 95608</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 21836774</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="25.00"/></p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="0.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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 checked="" 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)
EMILY's List

A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Alice Passer Mailing Address Alice Passer 62 Meadowbrook Road City Bangor State ME Zip Code 04401 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836775 Date of Disbursement 10 / 28 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Holley Humphrey Mailing Address Holley Humphrey 233 Rogue River Highway City Grants Pass State OR Zip Code 97527 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836776 Date of Disbursement 10 / 12 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Judy Cottle Mailing Address Judy Cottle 1170 Chatfield Road City Winnetka State IL Zip Code 60093 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836777 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 75.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836778 Date of Disbursement 10 / 03 / 2005
Mailing Address Robert Brown 2315 Salem Village Road		Amount of Each Disbursement this Period 20.00
City Parkville State MD Zip Code 21234	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836779 Date of Disbursement 10 / 19 / 2005
Mailing Address Rosalie Beloff 607 Ocean Drive		Amount of Each Disbursement this Period 25.00
City Key Biscayne State FL Zip Code 33149	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836780 Date of Disbursement 10 / 06 / 2005
Mailing Address Cordelia Merritt 8 Mount Hunger Road		Amount of Each Disbursement this Period 35.00
City Hartland State VT Zip Code 05048	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836781 Date of Disbursement 10 / 19 / 2005
Mailing Address L. Dietrichson 231 Sult Road		Amount of Each Disbursement this Period 25.00
City Millville State PA Zip Code 17846	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836782 Date of Disbursement 10 / 19 / 2005
Mailing Address Cricket Levering 604 NE 165th Street Apt. 113		Amount of Each Disbursement this Period 20.00
City Shoreline State WA Zip Code 98155	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836783 Date of Disbursement 10 / 03 / 2005
Mailing Address Grace Radin 107 River Road		Amount of Each Disbursement this Period 50.00
City Nyack State NY Zip Code 10960	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836784 Date of Disbursement 10 / 27 / 2005
Mailing Address Jerome Newmark 604 19th Street, East		Amount of Each Disbursement this Period 100.00
City Jasper State AL Zip Code 35501	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836785 Date of Disbursement 10 / 31 / 2005
Mailing Address Hugh Jackson 6035 W Mansfield Ave Unit 247		Amount of Each Disbursement this Period 25.00
City Denver State CO Zip Code 80235	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836786 Date of Disbursement 10 / 25 / 2005
Mailing Address Nancy Anderson 23 Teresa Road		Amount of Each Disbursement this Period 50.00
City Hopkinton State MA Zip Code 01748	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address Jane Davis 143 Inkberry Road City Hendersonville State NC Zip Code 28739 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836787 Date of Disbursement 10 / 19 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address Patricia Miller 6015 Wellesley Avenue City Pittsburgh State PA Zip Code 15206 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836788 Date of Disbursement 10 / 05 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address Patricia Clark 23 Lake Drive City Plainfield State IL Zip Code 60544 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836789 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836790 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address Ellen Siegel 229 Golf Edge		Amount of Each Disbursement this Period 50.00
City Westfield State NJ Zip Code 07090	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836791 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address Laura Peterson 60 Jacob Gates Road		Amount of Each Disbursement this Period 100.00
City Harvard State MA Zip Code 01451	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836792 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address Sally McGarry 6 Anglers Pond Court		Amount of Each Disbursement this Period 100.00
City Hilton Head State SC Zip Code 29926	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial) Melissa Bean</p> <p>Mailing Address Judith Wolfe 11644 Harborview</p> <p>City Cleveland State OH Zip Code 44102</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836793 Date of Disbursement 10 / 03 / 2005</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial) Melissa Bean</p> <p>Mailing Address Betty Adamson 228 N. Colony Drive</p> <p>City Edgewood State KY Zip Code 41017</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836794 Date of Disbursement 10 / 19 / 2005</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial) Melissa Bean</p> <p>Mailing Address Clare Crane 5950 Avenida Chamnez</p> <p>City La Jolla State CA Zip Code 92037</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836795 Date of Disbursement 10 / 06 / 2005</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836796 Date of Disbursement 10 / 28 / 2005
Mailing Address Anne Vawser 22608 Melia Road		Amount of Each Disbursement this Period 100.00
City Gretna	State NE	
Zip Code 68028		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836797 Date of Disbursement 10 / 06 / 2005
Mailing Address Elizabeth Jones 226 Countryview Road		Amount of Each Disbursement this Period 50.00
City Slippery Rock	State PA	
Zip Code 16057		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836798 Date of Disbursement 10 / 14 / 2005
Mailing Address Ann Lee 116 Channing Lane		Amount of Each Disbursement this Period 75.00
City Chapel Hill	State NC	
Zip Code 27516		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 753 / 1975

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Melissa Bean Contributions Mailing Address: Joanne Senyk 5800 Trailridge Drive City: Austin State: TX Zip Code: 78731 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836799 Date of Disbursement: 10 / 06 / 2005 Amount of Each Disbursement this Period: 50.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Melissa Bean Contributions Mailing Address: Phyllis Farley 580 Park Avenue City: New York State: NY Zip Code: 10021 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836800 Date of Disbursement: 10 / 04 / 2005 Amount of Each Disbursement this Period: 100.00 [MEMO ITEM] MEMO
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C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Melissa Bean Contributions Mailing Address: Marilyn Reed 22501 130th Street City: Danville State: IA Zip Code: 52623 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836801 Date of Disbursement: 10 / 05 / 2005 Amount of Each Disbursement this Period: 25.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836802 Date of Disbursement 10 / 19 / 2005
Mailing Address Andrea Jackson 568 Bedford Avenue		Amount of Each Disbursement this Period 200.00
City Saint Louis	State MO		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name			Disbursement For: 2006 ☒ Primary ☐ General ☐ Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836803 Date of Disbursement 10 / 19 / 2005
Mailing Address Irene Wright 5654 El Gato Lane		Amount of Each Disbursement this Period 30.00
City Meridian	State ID		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name			Disbursement For: 2006 ☒ Primary ☐ General ☐ Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836804 Date of Disbursement 10 / 31 / 2005
Mailing Address William Midboe 1408 Cooper Avenue		Amount of Each Disbursement this Period 50.00
City Turlock	State CA		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name			Disbursement For: 2006 ☒ Primary ☐ General ☐ Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	SUBTOTAL of Disbursements This Page (optional) ▶

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Melissa Bean Contributions Mailing Address Colette Meunier 564 Sandy Way City Benicia State CA Zip Code 94510 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836805 Date of Disbursement 10 / 19 / 2005 Amount of Each Disbursement this Period 150.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Melissa Bean Contributions Mailing Address Sharon Murphy 2233 Summit Avenue City Saint Paul State MN Zip Code 55105 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836806 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Melissa Bean Contributions Mailing Address Janet Howard 5624 Boatwright Circle City Williamsburg State VA Zip Code 23185 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836807 Date of Disbursement 10 / 19 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Jacob Samkoff 560 Jackson Avenue City: Washington Tp State: NJ Zip Code: 07676 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836808 Date of Disbursement 10 / 31 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Jennifer Campbell 2230 Ridge Drive City: Mars State: PA Zip Code: 16046 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836809 Date of Disbursement 10 / 31 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Mary Brucklacher 560 Deer Lake Dr City: Findlay State: OH Zip Code: 45840 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836810 Date of Disbursement 10 / 13 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial) Melissa Bean</p> <p>Mailing Address Yvonne Martin 2230 Chestnut St</p> <p>City Waukegan State IL Zip Code 60087</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836811 Date of Disbursement 10 / 25 / 2005</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial) Melissa Bean</p> <p>Mailing Address Joan Green 555 Laurel Street</p> <p>City San Francisco State CA Zip Code 94118</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836812 Date of Disbursement 10 / 08 / 2005</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial) Melissa Bean</p> <p>Mailing Address Jean Brown 1400 North Green Bay Road</p> <p>City Lake Forest State IL Zip Code 60045</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836813 Date of Disbursement 10 / 20 / 2005</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

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 checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836814 Date of Disbursement 10 / 03 / 2005
Mailing Address Dolores Lowry 5501 Legend Hills Ln		Amount of Each Disbursement this Period 25.00
City Spring Hill State FL Zip Code 34609	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836815 Date of Disbursement 10 / 14 / 2005
Mailing Address Katharine Mieszkowski 220 Filbert Street		Amount of Each Disbursement this Period 100.00
City San Francisco State CA Zip Code 94133	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836816 Date of Disbursement 10 / 21 / 2005
Mailing Address Joan Chrisler 116 5th Ave.		Amount of Each Disbursement this Period 50.00
City Milford State CT Zip Code 06460	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836817 Date of Disbursement 10 / 07 / 2005
Mailing Address Rae Kier 55 Spring Garden St.		Amount of Each Disbursement this Period 25.00
City Hampden State CT Zip Code 06517	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836818 Date of Disbursement 10 / 03 / 2005
Mailing Address James Langland 1014 Oakland Park Road		Amount of Each Disbursement this Period 50.00
City Thief River Falls State MN Zip Code 56701	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836819 Date of Disbursement 10 / 14 / 2005
Mailing Address Diana Simon 55 E. Erie Street, Apt. 4505		Amount of Each Disbursement this Period 50.00
City Chicago State IL Zip Code 60611	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836820 Date of Disbursement 10 / 19 / 2005
Mailing Address Mary Nicholaisen 216 Reservoir Road		Amount of Each Disbursement this Period 45.00
City San Rafael State CA Zip Code 94901	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836821 Date of Disbursement 10 / 13 / 2005
Mailing Address Caroline Lieberman 55 Arroyo Way		Amount of Each Disbursement this Period 100.00
City San Francisco State CA Zip Code 94127	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836822 Date of Disbursement 10 / 19 / 2005
Mailing Address Cheryl Hiipakka 5487 S. Cornell Avenue		Amount of Each Disbursement this Period 50.00
City Chicago State IL Zip Code 60615	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address Barbara Asner 5436 S. Hyde Park Blvd.</p> <p>City Chicago State IL Zip Code 60615</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 21836823</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>B. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address Nathan Savin 216 Magowan Ave</p> <p>City Iowa City State IA Zip Code 52246</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 21836824</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>C. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address Virginia Barksdale 140 Crestmont Drive</p> <p>City Madison State VA Zip Code 22727</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 21836825</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="25.00"/></p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="0.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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)

PAGE 762 / 1975

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial) Melissa Bean</p> <p>Mailing Address Peg Shaw 2147 O Street, N.W.</p> <p>City Washington State DC Zip Code 20037</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836826 Date of Disbursement 10 / 14 / 2005</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial) Melissa Bean</p> <p>Mailing Address Carolyn Meisel 54 Westview Cres</p> <p>City Geneseo State NY Zip Code 14454</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836827 Date of Disbursement 10 / 06 / 2005</p> <p>Amount of Each Disbursement this Period 20.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial) Melissa Bean</p> <p>Mailing Address A Murray Johnson 54 Roosevelt Drive</p> <p>City Poughquag State NY Zip Code 12570</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836828 Date of Disbursement 10 / 19 / 2005</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

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 checked="" 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)
EMILY's List

A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address June Walkington 2140 Ohio Avenue #D City Signal Hill State CA Zip Code 90755 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836829 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address Laura Foster 14 Suzanne Road City Lexington State MA Zip Code 02420 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836830 Date of Disbursement 10 / 19 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address Adelle Lemon 1063 Cragmont City Berkeley State CA Zip Code 94708 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836831 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836832 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address Jacquelyn McElhaney 5340 Tanbark		Amount of Each Disbursement this Period 100.00
City Dallas	State TX	
Zip Code 75229		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836833 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address Karen Packer 21355 SW Hillsboro Highway		Amount of Each Disbursement this Period 25.00
City Newberg	State OR	
Zip Code 97132		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836834 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address Della Huber 5308 Boyd Ave # B		Amount of Each Disbursement this Period 100.00
City Oakland	State CA	
Zip Code 94618		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address Margaret McCamant 2130 Orrington City Evanston State IL Zip Code 60201 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836835 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 200.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address Alice Scott 213 N. Main Street City Elizabethtown State KY Zip Code 42701 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836836 Date of Disbursement 10 / 19 / 2005 Amount of Each Disbursement this Period 35.00 [MEMO ITEM] MEMO
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C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address Frances Eller 213 Lincolnshire Blvd. City Belleville State IL Zip Code 62221 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836837 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 20.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Emmons Ellis 14 Hillside Avenue City: Winchester State: MA Zip Code: 01890 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836838 Date of Disbursement: 10 / 31 / 2005 Amount of Each Disbursement this Period: 100.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: William Winternitz 53 Guildswood City: Tuscaloosa State: AL Zip Code: 35401 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836839 Date of Disbursement: 10 / 31 / 2005 Amount of Each Disbursement this Period: 50.00 [MEMO ITEM] MEMO
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C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Francoise Delvaux 2121 February Court City: San Diego State: CA Zip Code: 92110 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836840 Date of Disbursement: 10 / 19 / 2005 Amount of Each Disbursement this Period: 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836841 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address Janet Brown-Liberman 528 Lake Sherwood Drive		Amount of Each Disbursement this Period 50.00
City Lake Sherwood State CA Zip Code 91361	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836842 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address Emmons Ellis 14 Hillside Avenue		Amount of Each Disbursement this Period 100.00
City Winchester State MA Zip Code 01890	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836843 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address Marsha Pedersen 5250 W. Avenue L6		Amount of Each Disbursement this Period 50.00
City Quartz Hill State CA Zip Code 93536	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836844 Date of Disbursement 10 / 21 / 2005
Mailing Address Fred Reames 522 Virginia Terrace		Amount of Each Disbursement this Period 150.00
City Madison State WI Zip Code 53726	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836845 Date of Disbursement 10 / 19 / 2005
Mailing Address Phyllis Wender 115 E 67th Street #6C		Amount of Each Disbursement this Period 150.00
City New York State NY Zip Code 10021	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836846 Date of Disbursement 10 / 05 / 2005
Mailing Address Linda Brandenburger 5201 Pleasant Drive		Amount of Each Disbursement this Period 100.00
City Sacramento State CA Zip Code 95822	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial) Melissa Bean</p> <p>Mailing Address: Joan Goldstein 2100 North Salisbury Street</p> <p>City: West Lafayette State: IN Zip Code: 47906</p> <p>Purpose of Disbursement: Candidate Contrib Earmarked</p> <p>Candidate Name: _____</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836847</p> <p>Date of Disbursement: 10 / 14 / 2005</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial) Melissa Bean</p> <p>Mailing Address: Edith Biondi 520 Haworth Avenue</p> <p>City: Haworth State: NJ Zip Code: 07641</p> <p>Purpose of Disbursement: Candidate Contrib Earmarked</p> <p>Candidate Name: _____</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836848</p> <p>Date of Disbursement: 10 / 14 / 2005</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial) Melissa Bean</p> <p>Mailing Address: Sally Coughlin 52 Upland Road</p> <p>City: Brookline State: MA Zip Code: 02445</p> <p>Purpose of Disbursement: Candidate Contrib Earmarked</p> <p>Candidate Name: _____</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836849</p> <p>Date of Disbursement: 10 / 19 / 2005</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p> </p>

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836850 Date of Disbursement 10 / 17 / 2005
Mailing Address Nancy Hall 210 Zellej Avenue		Amount of Each Disbursement this Period 250.00
City Moorestown State NJ Zip Code 08057	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836851 Date of Disbursement 10 / 31 / 2005
Mailing Address Melanie Loo 1395 56th Street		Amount of Each Disbursement this Period 20.00
City Sacramento State CA Zip Code 95819	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836852 Date of Disbursement 10 / 19 / 2005
Mailing Address Melanie Loo 1395 56th Street		Amount of Each Disbursement this Period 20.00
City Sacramento State CA Zip Code 95819	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836853 Date of Disbursement 10 / 25 / 2005
Mailing Address Lisa Bevill 1014 Alton Avenue		Amount of Each Disbursement this Period 30.00
City Madison State IL Zip Code 62060	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836854 Date of Disbursement 10 / 14 / 2005
Mailing Address Mary Barmettler 1388 Cordelia Avenue		Amount of Each Disbursement this Period 50.00
City San Jose State CA Zip Code 95129	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836855 Date of Disbursement 10 / 05 / 2005
Mailing Address Linda Alter 210 W Rittenhouse Square		Amount of Each Disbursement this Period 1600.00
City Philadelphia State PA Zip Code 19103	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836856 Date of Disbursement 10 / 05 / 2005
Mailing Address B. Ellen Fisher 5137 S. Kimbark Avenue		Amount of Each Disbursement this Period 100.00
City Chicago State IL Zip Code 60615	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836857 Date of Disbursement 10 / 04 / 2005
Mailing Address Mary Kaufman 210 Villard Avenue		Amount of Each Disbursement this Period 35.00
City Hastings Hdsn. State NY Zip Code 10706	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836858 Date of Disbursement 10 / 03 / 2005
Mailing Address Annette Sobel 5135 Coldwater Canyon Ave		Amount of Each Disbursement this Period 25.00
City Sherman Oaks State CA Zip Code 91423	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836859 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address Nancy Martin-Perdue 1385 Twymans Mill Road		Amount of Each Disbursement this Period 100.00
City Madison State VA Zip Code 22727	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836860 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address Jacqueline Cameron 513 W Aldine Ave Apt 2		Amount of Each Disbursement this Period 50.00
City Chicago State IL Zip Code 60657	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836861 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address Ragnhild Latchford 511 Marine Avenue		Amount of Each Disbursement this Period 100.00
City Manhattan Beach State CA Zip Code 90266	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836862 Date of Disbursement 10 / 19 / 2005
Mailing Address Jack Rosenberg 51 Island Drive		Amount of Each Disbursement this Period 50.00
City Boynton Beach State FL Zip Code 33436	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836863 Date of Disbursement 10 / 13 / 2005
Mailing Address Ann Wansley 51 Chula Lane		Amount of Each Disbursement this Period 50.00
City San Francisco State CA Zip Code 94114	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836864 Date of Disbursement 10 / 19 / 2005
Mailing Address Hadassah Thursz 11410 Strand Dr. Apt. 416		Amount of Each Disbursement this Period 15.00
City Rockville State MD Zip Code 20852	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836865 Date of Disbursement 10 / 19 / 2005
Mailing Address Virginia Mays 2090 Bonita Avenue		Amount of Each Disbursement this Period 25.00
City Melbourne Beach	State FL		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name			Office Sought: ☐ House ☐ Senate ☐ President Disbursement For: 2006 ☒ Primary ☐ General ☐ Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836866 Date of Disbursement 10 / 21 / 2005
Mailing Address Willard Elsbree 209 Grosvenor Street		Amount of Each Disbursement this Period 25.00
City Athens	State OH		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name			Office Sought: ☐ House ☐ Senate ☐ President Disbursement For: 2006 ☒ Primary ☐ General ☐ Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836867 Date of Disbursement 10 / 04 / 2005
Mailing Address Esther Portnoy 208 W. Florida Avenue		Amount of Each Disbursement this Period 100.00
City Urbana	State IL		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name			Office Sought: ☐ House ☐ Senate ☐ President Disbursement For: 2006 ☒ Primary ☐ General ☐ Other (specify) ▼
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836868 Date of Disbursement 10 / 19 / 2005
Mailing Address Jo Whetzel 5036 Castleman Street		Amount of Each Disbursement this Period 100.00
City Pittsburgh State PA Zip Code 15232	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836869 Date of Disbursement 10 / 19 / 2005
Mailing Address Katherine Akers 5026 West Lake Road		Amount of Each Disbursement this Period 25.00
City Mayville State NY Zip Code 14757	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836870 Date of Disbursement 10 / 14 / 2005
Mailing Address Virginia Mueller 106 L Street Old Sacramento		Amount of Each Disbursement this Period 50.00
City Sacramento State CA Zip Code 95814	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836871 Date of Disbursement 10 / 19 / 2005
Mailing Address Deborah Weinstein 5021 W. Cedar Lane		Amount of Each Disbursement this Period 25.00
City Bethesda State MD Zip Code 20814	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836872 Date of Disbursement 10 / 31 / 2005
Mailing Address James Donnell 207 Norman Drive		Amount of Each Disbursement this Period 500.00
City Cranberry Twp State PA Zip Code 16066	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836873 Date of Disbursement 10 / 31 / 2005
Mailing Address Lois Myers 5006 Break Heart Road		Amount of Each Disbursement this Period 100.00
City Crozet State VA Zip Code 22932	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836874 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address Jape Taylor 500 N.W. 80th Boulevard		Amount of Each Disbursement this Period 100.00
City Gainesville State FL Zip Code 32607	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836875 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address Nancy Allison 137 E. 19th Street # 1		Amount of Each Disbursement this Period 50.00
City New York State NY Zip Code 10003	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836876 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address Jean Shepard 50 Main Street		Amount of Each Disbursement this Period 50.00
City Northfield State MA Zip Code 01360	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836877 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address Clair Sharpless 1 Drumlin Road		Amount of Each Disbursement this Period 100.00
City West Simsbury State CT Zip Code 06092	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836878 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address Bonnie Morgan 205 East Joppa Road		Amount of Each Disbursement this Period 50.00
City Towson State MD Zip Code 21286	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836879 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address Elizabeth Russell 202 Saponi Drive		Amount of Each Disbursement this Period 50.00
City Hillsborough State NC Zip Code 27278	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Melissa Bean Contributions Mailing Address Patricia Hoffman 202 Main Street City New Ipswich State NH Zip Code 03071 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836880 Date of Disbursement 10 / 28 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Melissa Bean Contributions Mailing Address Lynne Scheer 1350 Sky High Road City Tully State NY Zip Code 13159 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836881 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 75.00 [MEMO ITEM] MEMO
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C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Melissa Bean Contributions Mailing Address Ruth Ferm 202 Dogford Road City Etna State NH Zip Code 03750 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836882 Date of Disbursement 10 / 25 / 2005 Amount of Each Disbursement this Period 75.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836883 Date of Disbursement 10 / 19 / 2005
Mailing Address Lois Wynn 1128 Linden Avenue		Amount of Each Disbursement this Period 50.00
City Highland Park	State IL	
Zip Code 60035		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836884 Date of Disbursement 10 / 06 / 2005
Mailing Address Ellen Haring 4857 Colorado Avenue NW		Amount of Each Disbursement this Period 200.00
City Washington	State DC	
Zip Code 20011		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836885 Date of Disbursement 10 / 19 / 2005
Mailing Address Kathleen O'Brien 4848 Northrop Drive		Amount of Each Disbursement this Period 100.00
City Minneapolis	State MN	
Zip Code 55406		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836886 Date of Disbursement 10 / 19 / 2005
Mailing Address Edward Greaves 4831 Keane Drive		Amount of Each Disbursement this Period 50.00
City Carmichael State CA Zip Code 95608	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836887 Date of Disbursement 10 / 06 / 2005
Mailing Address Dorothy Sohm 4824 East Indianapolis Avenue		Amount of Each Disbursement this Period 25.00
City Fresno State CA Zip Code 93726	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836888 Date of Disbursement 10 / 12 / 2005
Mailing Address Virginia Royden 13466 Three Forks Lane		Amount of Each Disbursement this Period 250.00
City Los Altos Hills State CA Zip Code 94022	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836889 Date of Disbursement 10 / 19 / 2005
Mailing Address Ellen Kinney 2000 King James Pkwy # 111		Amount of Each Disbursement this Period 50.00
City Westlake State OH Zip Code 44145	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836890 Date of Disbursement 10 / 31 / 2005
Mailing Address Mark Krueger 200 West 54th Street		Amount of Each Disbursement this Period 100.00
City New York State NY Zip Code 10019	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836891 Date of Disbursement 10 / 21 / 2005
Mailing Address Linda White 1120 E. Balboa Boulevard		Amount of Each Disbursement this Period 200.00
City Balboa State CA Zip Code 92661	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions

Full Name (Last, First, Middle Initial)
Melissa Bean

Mailing Address Linda Wise
4749 Old Post Ct

City Boulder State CO Zip Code 80301

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Office Sought: House Senate President
Disbursement For: 2006 Primary General Other (specify) ▼

State: District:

Transaction ID: 21836892
Date of Disbursement
10 / 14 / 2005

Amount of Each Disbursement this Period
250.00

[MEMO ITEM]
MEMO

B. Melissa Bean Contributions

Full Name (Last, First, Middle Initial)
Melissa Bean

Mailing Address Jeanne Snodgrass
10501 Lagrima De Oro NE

City Albuquerque State NM Zip Code 87111

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Office Sought: House Senate President
Disbursement For: 2006 Primary General Other (specify) ▼

State: District:

Transaction ID: 21836893
Date of Disbursement
10 / 13 / 2005

Amount of Each Disbursement this Period
200.00

[MEMO ITEM]
MEMO

C. Melissa Bean Contributions

Full Name (Last, First, Middle Initial)
Melissa Bean

Mailing Address Allison Brower
4745 Espana Court

City Carmichael State CA Zip Code 95608

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Office Sought: House Senate President
Disbursement For: 2006 Primary General Other (specify) ▼

State: District:

Transaction ID: 21836894
Date of Disbursement
10 / 27 / 2005

Amount of Each Disbursement this Period
50.00

[MEMO ITEM]
MEMO

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836895 Date of Disbursement 10 / 06 / 2005
Mailing Address Joyce Greenfield 200 Blake Rd		Amount of Each Disbursement this Period 25.00
City Hamden	State CT	
Zip Code 06517		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836896 Date of Disbursement 10 / 19 / 2005
Mailing Address Vera Anne Green 4737 Dolphin Cay Lane S		Amount of Each Disbursement this Period 50.00
City St Petersburg	State FL	
Zip Code 33711		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836897 Date of Disbursement 10 / 03 / 2005
Mailing Address John Poplawski 4726 San Feliciano Drive		Amount of Each Disbursement this Period 50.00
City Woodland Hills	State CA	
Zip Code 91364		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 786 / 1975

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836898 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address Marcia Rider 20 Acacia Way		Amount of Each Disbursement this Period 100.00
City Santa Cruz State CA Zip Code 95062	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836899 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address Aurelia Fule 101 Camino Santiago		Amount of Each Disbursement this Period 25.00
City Santa Fe State NM Zip Code 87501	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836900 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address Jeanne Richie 134 Franklin		Amount of Each Disbursement this Period 25.00
City Santa Cruz State CA Zip Code 95060	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 787 / 1975

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Melissa Bean Contributions Mailing Address Coline Jenkins 20 1/2 Forest Avenue City Old Greenwich State CT Zip Code 06870 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836901 Date of Disbursement 10 / 19 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Melissa Bean Contributions Mailing Address Joan Spaulding 112 Oxford Lane City Cambridge State WI Zip Code 53523 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836902 Date of Disbursement 10 / 19 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
---	--	--

C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Melissa Bean Contributions Mailing Address Joan Amron 47 E. 88th Street City New York State NY Zip Code 10128 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836903 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 788 / 1975

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836904 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address Charlotte Moss 134 E 71st St		Amount of Each Disbursement this Period 250.00
City New York State NY Zip Code 10021	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836905 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address Laurie Barenborg 4610 S. Bradford Street		Amount of Each Disbursement this Period 25.00
City Seattle State WA Zip Code 98118	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836906 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address Gustav Papanek 2 Mason Street		Amount of Each Disbursement this Period 75.00
City Lexington State MA Zip Code 02421	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 789 / 1975

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836907 Date of Disbursement 10 / 19 / 2005
Mailing Address Catherine Claman 4600 N. Versailles Avenue		Amount of Each Disbursement this Period 50.00
City Dallas State TX Zip Code 75209	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836908 Date of Disbursement 10 / 19 / 2005
Mailing Address Cheryl Randall 460 Leslie Street SE		Amount of Each Disbursement this Period 20.00
City Salem State OR Zip Code 97301	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836909 Date of Disbursement 10 / 31 / 2005
Mailing Address Leah Fink 457 Main Street		Amount of Each Disbursement this Period 25.00
City Norhtport State NY Zip Code 11768	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 790 / 1975

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial)</p>		<p>Transaction ID: 21836910</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	6		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		0	6		2	0	0	5													
<p>Mailing Address: Barbara Gleason 4556 Graywood Avenue</p>		<p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td>100.00</td> </tr> </table>	100.00																			
100.00																						
<p>City: Long Beach State: CA Zip Code: 90808</p>	<p>Purpose of Disbursement: Candidate Contrib Earmarked</p> <p>Candidate Name: _____</p> <p>Category/Type: <input type="checkbox"/></p>																					
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p>	<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>	<p>[MEMO ITEM] MEMO</p>																				

<p>B. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial)</p>		<p>Transaction ID: 21836911</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	9		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		1	9		2	0	0	5													
<p>Mailing Address: Mary Everts 4504 Mount Vernon Dr</p>		<p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td>50.00</td> </tr> </table>	50.00																			
50.00																						
<p>City: Bradenton State: FL Zip Code: 34210</p>	<p>Purpose of Disbursement: Candidate Contrib Earmarked</p> <p>Candidate Name: _____</p> <p>Category/Type: <input type="checkbox"/></p>																					
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p>	<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>	<p>[MEMO ITEM] MEMO</p>																				

<p>C. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial)</p>		<p>Transaction ID: 21836912</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	9		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		1	9		2	0	0	5													
<p>Mailing Address: Karen Offen 450 Raymundo Drive</p>		<p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td>150.00</td> </tr> </table>	150.00																			
150.00																						
<p>City: Woodside State: CA Zip Code: 94062</p>	<p>Purpose of Disbursement: Candidate Contrib Earmarked</p> <p>Candidate Name: _____</p> <p>Category/Type: <input type="checkbox"/></p>																					
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p>	<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>	<p>[MEMO ITEM] MEMO</p>																				

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<table border="1"> <tr> <td>0.00</td> </tr> </table>	0.00
0.00		
<p>TOTAL This Period (last page this line number only)</p>	<table border="1"> <tr> <td> </td> </tr> </table>	

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 checked="" 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)
EMILY's List

A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address Robert Stern 2 Imperial Landing City Westport State CT Zip Code 06880 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836913 Date of Disbursement 10 / 28 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address Mary Delsman 4487 Picacho Drive City Riverside State CA Zip Code 92507 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836914 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address Elsa Boyce 2 Benker School Way City Cropseyville State NY Zip Code 12052 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836915 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 200.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836916 Date of Disbursement 10 / 31 / 2005
Mailing Address Athena Caul 4432 Sudley Road		Amount of Each Disbursement this Period 100.00
City Gainesville	State VA		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name			Office Sought: ☐ House ☐ Senate ☐ President Disbursement For: 2006 ☒ Primary ☐ General ☐ Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836917 Date of Disbursement 10 / 06 / 2005
Mailing Address Kathleen Carrell 1115 Brownings Lane		Amount of Each Disbursement this Period 50.00
City Lake Zurich	State IL		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name			Office Sought: ☐ House ☐ Senate ☐ President Disbursement For: 2006 ☒ Primary ☐ General ☐ Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836918 Date of Disbursement 10 / 27 / 2005
Mailing Address Judith Marshik 4422 Napier Parkway NE		Amount of Each Disbursement this Period 100.00
City St. Michael	State MN		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name			Office Sought: ☐ House ☐ Senate ☐ President Disbursement For: 2006 ☒ Primary ☐ General ☐ Other (specify) ▼
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Andrea Bolliger 4415 SW Othello Street City: Seattle State: WA Zip Code: 98136 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836919 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5 Amount of Each Disbursement this Period _____ 50.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Ann Friend 4414 Durant Street, # 111 City: Deer Park State: TX Zip Code: 77536 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836920 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5 Amount of Each Disbursement this Period _____ 25.00 [MEMO ITEM] MEMO
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C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Marie Basel 13339 W Paintbrush Drive City: Sun City West State: AZ Zip Code: 85375 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836921 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5 Amount of Each Disbursement this Period _____ 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	_____ 0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836922 Date of Disbursement 10 / 06 / 2005
Mailing Address Caroline Kilbourne 4400 East West Hwy.		Amount of Each Disbursement this Period 100.00
City Bethesda State MD Zip Code 20814	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836923 Date of Disbursement 10 / 12 / 2005
Mailing Address Adalyn Brugger 1973 Retreat Drive		Amount of Each Disbursement this Period 50.00
City Mechanicsville State VA Zip Code 23111	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836924 Date of Disbursement 10 / 31 / 2005
Mailing Address Dora Gianoulakis 44 Clearview Park		Amount of Each Disbursement this Period 50.00
City Saint Louis State MO Zip Code 63138	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836925 Date of Disbursement 10 / 05 / 2005
Mailing Address Mildred Glimcher 435 E. 52nd Street, #24C		Amount of Each Disbursement this Period 100.00
City New York State NY Zip Code 10022	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836926 Date of Disbursement 10 / 14 / 2005
Mailing Address Helen Katz 1973 DeMille Drive		Amount of Each Disbursement this Period 50.00
City Los Angeles State CA Zip Code 90027	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836927 Date of Disbursement 10 / 19 / 2005
Mailing Address Diane Wiesenfeld 4325 Pioneer Trail SE		Amount of Each Disbursement this Period 10.00
City Cedar Rapids State IA Zip Code 52403	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836928 Date of Disbursement 10 / 27 / 2005
Mailing Address Helen McCool 43169 N. John Temple Road		Amount of Each Disbursement this Period 25.00
City Gonzales	State LA	
Zip Code 70737		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836929 Date of Disbursement 10 / 14 / 2005
Mailing Address Nancy Lincoln 43 Hedge Road		Amount of Each Disbursement this Period 100.00
City Brookline	State MA	
Zip Code 02445		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836930 Date of Disbursement 10 / 03 / 2005
Mailing Address Philip Carrigan 1944 Ash St		Amount of Each Disbursement this Period 50.00
City Waukegan	State IL	
Zip Code 60087		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836931 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address Steve Schwartz 425 S. Chickasaw Trail #348		Amount of Each Disbursement this Period 50.00
City Orlando State FL Zip Code 32825	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836932 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address Betty Dunhaver 424 N. State Street		Amount of Each Disbursement this Period 100.00
City Bellingham State WA Zip Code 98225	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836933 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address Caroline Willis 4235 Fordham Road NW		Amount of Each Disbursement this Period 50.00
City Washington State DC Zip Code 20016	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Melissa Bean Contributions Mailing Address: Marshall McDonald 4231 Park Boulevard City: Palo Alto State: CA Zip Code: 94306 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836934 Date of Disbursement 10 / 21 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Melissa Bean Contributions Mailing Address: Debra Dodson 4209 Huerfano Avenue City: San Diego State: CA Zip Code: 92117 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836935 Date of Disbursement 10 / 31 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Melissa Bean Contributions Mailing Address: Patricia Sharpe 1923 Sherman Avenue City: Evanston State: IL Zip Code: 60201 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836936 Date of Disbursement 10 / 19 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836937 Date of Disbursement 10 / 20 / 2005
Mailing Address Arthur Fry 1923 E. Joyce Blvd. Apt. 323		Amount of Each Disbursement this Period 50.00
City Fayetteville State AR Zip Code 72703	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836938 Date of Disbursement 10 / 13 / 2005
Mailing Address Susan Morrison 4205 Ramsey Avenue		Amount of Each Disbursement this Period 25.00
City Austin State TX Zip Code 78756	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836939 Date of Disbursement 10 / 27 / 2005
Mailing Address Fred Golding 1113 Emeral Bay		Amount of Each Disbursement this Period 60.00
City Laguna Beach State CA Zip Code 92655	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836940 Date of Disbursement 10 / 19 / 2005
Mailing Address S. Keskinen 1042 S. Harding Street		Amount of Each Disbursement this Period 100.00
City Moscow State ID CA Zip Code 83843	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836941 Date of Disbursement 10 / 11 / 2005
Mailing Address Debby Kremsdorf 4172 Combe Way		Amount of Each Disbursement this Period 50.00
City San Diego State ID CA Zip Code 92122	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836942 Date of Disbursement 10 / 19 / 2005
Mailing Address Sharon Cross-Friedman 4160 Jade St Space 68		Amount of Each Disbursement this Period 20.00
City Capitola State ID CA Zip Code 95010	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions

Full Name (Last, First, Middle Initial)
Melissa Bean

Mailing Address: Rosemary Vimont
1922 Oregon Street

City: Berkeley State: CA Zip Code: 94703

Purpose of Disbursement: Candidate Contrib Earmarked

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: 2006 Primary General Other (specify) ▼

State: _____ District: _____

Transaction ID: 21836943
Date of Disbursement: 10 / 14 / 2005

Amount of Each Disbursement this Period: 50.00

[MEMO ITEM]
MEMO

B. Melissa Bean Contributions

Full Name (Last, First, Middle Initial)
Melissa Bean

Mailing Address: Gloria Deison
1311 Peacefield Place

City: Tallahassee State: FL Zip Code: 32308

Purpose of Disbursement: Candidate Contrib Earmarked

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: 2006 Primary General Other (specify) ▼

State: _____ District: _____

Transaction ID: 21836944
Date of Disbursement: 10 / 12 / 2005

Amount of Each Disbursement this Period: 100.00

[MEMO ITEM]
MEMO

C. Melissa Bean Contributions

Full Name (Last, First, Middle Initial)
Melissa Bean

Mailing Address: Robin Bennett
41 Terra Cotta Road

City: Hewitt State: NJ Zip Code: 07421

Purpose of Disbursement: Candidate Contrib Earmarked

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: 2006 Primary General Other (specify) ▼

State: _____ District: _____

Transaction ID: 21836945
Date of Disbursement: 10 / 19 / 2005

Amount of Each Disbursement this Period: 10.00

[MEMO ITEM]
MEMO

SUBTOTAL of Disbursements This Page (optional) ► 0.00

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

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

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Detailed Summary Page

FOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836946 Date of Disbursement 10 / 06 / 2005
Mailing Address Dolores Braun 41 Laurel Grove Avenue		Amount of Each Disbursement this Period 50.00
City Kentfield State CA Zip Code 94904	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836947 Date of Disbursement 10 / 06 / 2005
Mailing Address James Clever 41 Glen Drive		Amount of Each Disbursement this Period 100.00
City Mill Valley State CA Zip Code 94941	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836948 Date of Disbursement 10 / 27 / 2005
Mailing Address Robin Hanes 191 Lynn Cove Road		Amount of Each Disbursement this Period 250.00
City Asheville State NC Zip Code 28804	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Jamie Berndt 409 E. Chicago Avenue City: Naperville State: IL Zip Code: 60540 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836949 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 1000.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Carol Farthing 406 Dale Dr. City: Silver Spring State: MD Zip Code: 20910 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836950 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Joyce Waters 4046 Tenango Road City: Claremont State: CA Zip Code: 91711 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21836951 Date of Disbursement 10 / 31 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 804 / 1975

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836952 Date of Disbursement 10 / 19 / 2005
Mailing Address Betty Lourie 104 Litchfield Drive		Amount of Each Disbursement this Period 25.00
City Syracuse State NY Zip Code 13224	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836953 Date of Disbursement 10 / 21 / 2005
Mailing Address Janet Ellis 401 Regents Park Lane		Amount of Each Disbursement this Period 20.00
City Noblesville State IN Zip Code 46062	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836954 Date of Disbursement 10 / 13 / 2005
Mailing Address Janice Doxtator 1909 Plover Street		Amount of Each Disbursement this Period 100.00
City Stevens Point State WI Zip Code 54481	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 805 / 1975

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836955 Date of Disbursement 10 / 03 / 2005
Mailing Address Kristin Olsson 11127 Midway Road		Amount of Each Disbursement this Period 5.00
City Dallas State TX Zip Code 75229	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836956 Date of Disbursement 10 / 31 / 2005
Mailing Address Mary Courrege 1905 Princess Street		Amount of Each Disbursement this Period 250.00
City Wilmington State NC Zip Code 28405	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836957 Date of Disbursement 10 / 06 / 2005
Mailing Address Thomas Curtis 1903 Rolling Hills Avenue SE		Amount of Each Disbursement this Period 50.00
City Renton State WA Zip Code 98055	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836958 Date of Disbursement 10 / 12 / 2005
Mailing Address Dorothy Whitmore 1309 N. Clayton Street		Amount of Each Disbursement this Period 250.00
City Wilmington State DE Zip Code 19806	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836959 Date of Disbursement 10 / 11 / 2005
Mailing Address Lee Estes 1036 S. Los Robles Avenue		Amount of Each Disbursement this Period 25.00
City Pasadena State CA Zip Code 91106	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836960 Date of Disbursement 10 / 31 / 2005
Mailing Address Mary Woods 4 Cove Ridge Lane		Amount of Each Disbursement this Period 100.00
City Old Greenwich State CT Zip Code 06870	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial) Melissa Bean</p> <p>Mailing Address: Joan Ulliyot 39805 North 112th Street</p> <p>City: Scottsdale State: AZ Zip Code: 85262</p> <p>Purpose of Disbursement: Candidate Contrib Earmarked</p> <p>Candidate Name: _____</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836961</p> <p>Date of Disbursement: 10 / 04 / 2005</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial) Melissa Bean</p> <p>Mailing Address: Sharon Stein 1035 Leonello Avenue</p> <p>City: Los Altos State: CA Zip Code: 94024</p> <p>Purpose of Disbursement: Candidate Contrib Earmarked</p> <p>Candidate Name: _____</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836962</p> <p>Date of Disbursement: 10 / 01 / 2005</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial) Melissa Bean</p> <p>Mailing Address: Katherine Simpson 1001 Spring Street, Apt. 805</p> <p>City: Silver Spring State: MD Zip Code: 20910</p> <p>Purpose of Disbursement: Candidate Contrib Earmarked</p> <p>Candidate Name: _____</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21836963</p> <p>Date of Disbursement: 10 / 14 / 2005</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p> </p>

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)

PAGE 808 / 1975

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions

Full Name (Last, First, Middle Initial)
Melissa Bean

Mailing Address Nancy Schneider
3930 Grand Avenue #302

City Des Moines State IA Zip Code 50312

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2006
 Primary General
 Other (specify) ▼

Transaction ID: 21836964
Date of Disbursement
10 / 06 / 2005

Amount of Each Disbursement this Period
35.00

[MEMO ITEM]
MEMO

B. Melissa Bean Contributions

Full Name (Last, First, Middle Initial)
Melissa Bean

Mailing Address Nancy Henderlite
391 Holder Ln SE

City Salem State OR Zip Code 97306

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2006
 Primary General
 Other (specify) ▼

Transaction ID: 21836965
Date of Disbursement
10 / 19 / 2005

Amount of Each Disbursement this Period
15.00

[MEMO ITEM]
MEMO

C. Melissa Bean Contributions

Full Name (Last, First, Middle Initial)
Melissa Bean

Mailing Address Greta Newman
39 Steppingstone Lane

City Great Neck State NY Zip Code 11024

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2006
 Primary General
 Other (specify) ▼

Transaction ID: 21836966
Date of Disbursement
10 / 04 / 2005

Amount of Each Disbursement this Period
100.00

[MEMO ITEM]
MEMO

SUBTOTAL of Disbursements This Page (optional) ► 0.00

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 Page

FOR LINE NUMBER:
(check only one)

PAGE 809 / 1975

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836967 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address Charleen Behrschmidt 1306 Parkhill Court		Amount of Each Disbursement this Period 25.00
City Camarillo State CA Zip Code 93010	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836968 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address Judith Tracy 3881 San Ysidro Way		Amount of Each Disbursement this Period 100.00
City Sacramento State CA Zip Code 95864	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836969 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address Samona Sheppard 1301 N Tamiami Trl Apt 713		Amount of Each Disbursement this Period 25.00
City Sarasota State FL Zip Code 34236	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 810 / 1975

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836970 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5
Mailing Address Sandra Cummings 3804 Sweeten Creek Road		Amount of Each Disbursement this Period 50.00
City Chapel Hill State NC Zip Code 27514	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836971 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address Barbara Madden-Bittle 3801 Green Branch Drive		Amount of Each Disbursement this Period 50.00
City W. Des Moines State IA Zip Code 50265	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836972 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address Debra Metcalf 376 Farmhouse Ln		Amount of Each Disbursement this Period 25.00
City Wind Gap State PA Zip Code 18091	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836973 Date of Disbursement 10 / 31 / 2005
Mailing Address Alice Garrison 3737 Atlantic Avenue		Amount of Each Disbursement this Period 100.00
City Long Beach State CA Zip Code 90807	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836974 Date of Disbursement 10 / 06 / 2005
Mailing Address Ann Kelley 3704 Providence Court		Amount of Each Disbursement this Period 75.00
City Wilmington State NC Zip Code 28412	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836975 Date of Disbursement 10 / 03 / 2005
Mailing Address Linda Cooper 3700 S. Westport Avenue		Amount of Each Disbursement this Period 20.00
City Sioux Falls State SD Zip Code 57106	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 812 / 1975

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836976 Date of Disbursement 10 / 03 / 2005
Mailing Address Susanna Davison 1301 Irving Avenue		Amount of Each Disbursement this Period 50.00
City Wheaton	State IL	
Zip Code 60187		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836977 Date of Disbursement 10 / 12 / 2005
Mailing Address Deb Preston 3690 Mount Vernon Road		Amount of Each Disbursement this Period 20.00
City Sebastopol	State CA	
Zip Code 95472		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836978 Date of Disbursement 10 / 20 / 2005
Mailing Address Dolores Ginter 1816 Yermo Place		Amount of Each Disbursement this Period 20.00
City Fullerton	State CA	
Zip Code 92833		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	0.00
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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836979 Date of Disbursement 10 / 19 / 2005
Mailing Address Jerald Nice 365 Newtown Road, Apt. B21		Amount of Each Disbursement this Period 100.00
City Warminster	State PA	
Zip Code 18974	Purpose of Disbursement Candidate Contrib Earmarked	[MEMO ITEM] MEMO
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836980 Date of Disbursement 10 / 11 / 2005
Mailing Address Mary Sieber 3621 Georgetown Street		Amount of Each Disbursement this Period 25.00
City Houston	State TX	
Zip Code 77005	Purpose of Disbursement Candidate Contrib Earmarked	[MEMO ITEM] MEMO
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836981 Date of Disbursement 10 / 06 / 2005
Mailing Address Patricia Pardee 362 North Jefferson Street		Amount of Each Disbursement this Period 100.00
City Batavia	State IL	
Zip Code 60510	Purpose of Disbursement Candidate Contrib Earmarked	[MEMO ITEM] MEMO
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836982 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address Melinda McDonald 1806 Charmeran Avenue		Amount of Each Disbursement this Period 100.00
City San Jose State CA Zip Code 95124	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836983 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address Muriel Turetsky 1301 Carter Drive		Amount of Each Disbursement this Period 50.00
City Rockaway State NJ Zip Code 07866	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836984 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address Celia Stuart-Powles 3610 E. 24th Street		Amount of Each Disbursement this Period 50.00
City Tulsa State OK Zip Code 74114	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836985 Date of Disbursement 10 / 11 / 2005
Mailing Address Catherine Gerhold 1804 Wightman Street		Amount of Each Disbursement this Period 200.00
City Pittsburgh State PA Zip Code 15217	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836986 Date of Disbursement 10 / 11 / 2005
Mailing Address Ellen Jacobsen-Isserman 3604 S vine St		Amount of Each Disbursement this Period 50.00
City Urbana State IL Zip Code 61802	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836987 Date of Disbursement 10 / 27 / 2005
Mailing Address John O'Toole 3601 Connecticut Avenue NW		Amount of Each Disbursement this Period 100.00
City Washington State DC Zip Code 20008	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836988 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address Holly Burnes 359 Heath Street		Amount of Each Disbursement this Period 100.00
City Chestnut Hill	State MA	
Zip Code 02467		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836989 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address Ellie Wilder 130 Spencer Avenue		Amount of Each Disbursement this Period 50.00
City Sausalito	State CA	
Zip Code 94965		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836990 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address Richard Foust 180 N. 4th Street, Apt. 607		Amount of Each Disbursement this Period 50.00
City San Jose	State CA	
Zip Code 95112		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836991 Date of Disbursement 10 / 03 / 2005
Mailing Address Lee Hornstein 18 Waters Edge		Amount of Each Disbursement this Period 50.00
City Mount Vernon State OH Zip Code 43050	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836992 Date of Disbursement 10 / 13 / 2005
Mailing Address Patricia Keating 10347 Calvin Avenue		Amount of Each Disbursement this Period 100.00
City Los Angeles State CA Zip Code 90025	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836993 Date of Disbursement 10 / 19 / 2005
Mailing Address James Foster 346 W. Hunt Road		Amount of Each Disbursement this Period 25.00
City Rushville State IN Zip Code 46173	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Melissa Bean Contributions Mailing Address Marjorie Main 3440 S Jefferson Street City Falls Church State VA Zip Code 22041 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836994 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 200.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Melissa Bean Contributions Mailing Address Ann Beyer 343 Rim Road City Los Alamos State NM Zip Code 87544 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836995 Date of Disbursement 10 / 21 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Melissa Bean Contributions Mailing Address Dorothy Weed 12853 Dunbarton Drive City Bristow State VA Zip Code 20136 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21836996 Date of Disbursement 10 / 07 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21836997 Date of Disbursement 10 / 19 / 2005
Mailing Address Deborah Whitehurst 128 Shady Lane		Amount of Each Disbursement this Period 25.00
City Lexington State KY Zip Code 40503	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21836998 Date of Disbursement 10 / 04 / 2005
Mailing Address Madelein Arnow 179 Griffin Avenue		Amount of Each Disbursement this Period 100.00
City Scarsdale State NY Zip Code 10583	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21836999 Date of Disbursement 10 / 03 / 2005
Mailing Address James Beck 34 Bates Street		Amount of Each Disbursement this Period 500.00
City Cambridge State MA Zip Code 02140	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21837000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address Helen Burgener 1101 Sunrise Lane		Amount of Each Disbursement this Period 50.00
City Estes Park State CO Zip Code 80517	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21837001 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5
Mailing Address Estelle Meislich 338 Lacey Drive		Amount of Each Disbursement this Period 100.00
City New Milford State NJ Zip Code 07646	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21837002 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address Nancy Letourneau 3362 Brittan Avenue, # 14		Amount of Each Disbursement this Period 25.00
City San Carlos State CA Zip Code 94070	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

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

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21837003 Date of Disbursement 10 / 20 / 2005
Mailing Address Gail Spane 1101 G Street SE		Amount of Each Disbursement this Period 150.00
City Washington State DC Zip Code 20003	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21837004 Date of Disbursement 10 / 06 / 2005
Mailing Address Nora Rowe 1029 Meadowwood Lane		Amount of Each Disbursement this Period 50.00
City Bowling Green State KY Zip Code 42104	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21837005 Date of Disbursement 10 / 03 / 2005
Mailing Address Mary Zeis 335 Whispering Pines		Amount of Each Disbursement this Period 100.00
City Loveland State OH Zip Code 45140	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

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

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21837006 Date of Disbursement 10 / 07 / 2005
Mailing Address Robert Hartmann 335 Via Concha		Amount of Each Disbursement this Period 500.00
City Aptos State CA Zip Code 95003	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21837007 Date of Disbursement 10 / 14 / 2005
Mailing Address Toni Delisi The Statler Building		Amount of Each Disbursement this Period 50.00
City Boston State MA Zip Code 02116	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21837008 Date of Disbursement 10 / 03 / 2005
Mailing Address Elinor McCloskey 335 Skyline Drive SW		Amount of Each Disbursement this Period 25.00
City Pullman State WA Zip Code 99163	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21837009 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address Jane Burkhardt RR 1 Box 115		Amount of Each Disbursement this Period 15.00
City North Bennington State VT Zip Code 05257	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21837010 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address Dorothy Flaster 1760 East Valley Road		Amount of Each Disbursement this Period 50.00
City Montecito State CA Zip Code 93108	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21837011 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address Lynn Seaman 3324 Vernal Avenue		Amount of Each Disbursement this Period 50.00
City Merced State CA Zip Code 95340	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21837012 Date of Disbursement 10 / 19 / 2005
Mailing Address Judith Gass 1265 Beacon Street # 406		Amount of Each Disbursement this Period 50.00
City Brookline State MA Zip Code 02446	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21837013 Date of Disbursement 10 / 28 / 2005
Mailing Address Evelyn Evans PO Box 99		Amount of Each Disbursement this Period 250.00
City Pebble Beach State CA Zip Code 93953	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21837014 Date of Disbursement 10 / 28 / 2005
Mailing Address Matthew Morris PO Box 9157		Amount of Each Disbursement this Period 5.00
City Aspen State CO Zip Code 81612	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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PAGE 825 / 1975

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Donald Myers 3322 E. Waverly Street City: Tucson State: AZ Zip Code: 85716 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21837015 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Joan Steele 332 Glenn Street City: Ashland State: OR Zip Code: 97520 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21837016 Date of Disbursement 10 / 15 / 2005 Amount of Each Disbursement this Period 10.00 [MEMO ITEM] MEMO
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C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Joel Ginzberg PO Box 873 City: Stone Ridge State: NY Zip Code: 12484 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21837017 Date of Disbursement 10 / 03 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Holly Nelson 1750 P St NW City: Washington State: DC Zip Code: 20036 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21837018 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Robert Sharrer PO Box 770453 City: Eagle River State: AK Zip Code: 99577 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21837019 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5 Amount of Each Disbursement this Period 30.00 [MEMO ITEM] MEMO
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C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Carolyn Simonson PO Box 7487 City: Tacoma State: WA Zip Code: 98406 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21837020 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21837021 Date of Disbursement 10 / 03 / 2005
Mailing Address Andrew Carson PO Box 709		Amount of Each Disbursement this Period <input type="text" value="25.00"/>
City Wilson	State WY		[MEMO ITEM] MEMO
Zip Code 83014		
Purpose of Disbursement Candidate Contrib Earmarked		[MEMO ITEM] MEMO
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21837022 Date of Disbursement 10 / 01 / 2005
Mailing Address Andrew Carson PO Box 709		Amount of Each Disbursement this Period <input type="text" value="25.00"/>
City Wilson	State WY		[MEMO ITEM] MEMO
Zip Code 83014		
Purpose of Disbursement Candidate Contrib Earmarked		[MEMO ITEM] MEMO
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21837023 Date of Disbursement 10 / 05 / 2005
Mailing Address Elaine Howe PO Box 624		Amount of Each Disbursement this Period <input type="text" value="150.00"/>
City Sulphur	State OK		[MEMO ITEM] MEMO
Zip Code 73086		
Purpose of Disbursement Candidate Contrib Earmarked		[MEMO ITEM] MEMO
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21837024 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address Betty Baril PO Box 62		Amount of Each Disbursement this Period 100.00
City Wilson State WY Zip Code 83014	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21837025 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address Margaret Poole 33 Sunset Road		Amount of Each Disbursement this Period 50.00
City Wayland State MA Zip Code 01778	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21837026 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5
Mailing Address Erma Manoncourt PO Box 5747		Amount of Each Disbursement this Period 250.00
City New York State NY Zip Code 10163	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

PAGE 829 / 1975

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21837027 Date of Disbursement 10 / 07 / 2005
Mailing Address Dennis White PO Box 540127		Amount of Each Disbursement this Period 100.00
City Dallas State TX Zip Code 75354	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21837028 Date of Disbursement 10 / 19 / 2005
Mailing Address Patricia Dorman 33 Mesa Vista Drive		Amount of Each Disbursement this Period 100.00
City Boise State ID Zip Code 83705	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21837029 Date of Disbursement 10 / 21 / 2005
Mailing Address Florence DeRose PO Box 482		Amount of Each Disbursement this Period 50.00
City Leeds State MA Zip Code 01053	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial) Melissa Bean</p> <p>Mailing Address Martha Smith 3297 Malone Drive</p> <p>City Lexington State KY Zip Code 40513</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21837030 Date of Disbursement 10 / 06 / 2005</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial) Melissa Bean</p> <p>Mailing Address Jean Crichton 173 Summit Avenue</p> <p>City Summit State NJ Zip Code 07901</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21837031 Date of Disbursement 10 / 05 / 2005</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial) Melissa Bean</p> <p>Mailing Address Lynda McNeive 1100 E. Stanford Avenue</p> <p>City Englewood State CO Zip Code 80113</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21837032 Date of Disbursement 10 / 06 / 2005</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial) Melissa Bean Contributions</p>		<p>Transaction ID: 21837033 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	7		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		1	7		2	0	0	5													
<p>Mailing Address: Cynthia Kayser PO Box 48</p>		<p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>75.00</td> </tr> </table> </p>	75.00																			
75.00																						
<p>City: Fairfax State: CA Zip Code: 94978</p>																						
<p>Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____</p>		<p>[MEMO ITEM] MEMO</p>																				
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____</p>																						

<p>B. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial) Melissa Bean Contributions</p>		<p>Transaction ID: 21837034 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	7		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		2	7		2	0	0	5													
<p>Mailing Address: Cynthia Schmidt 329 S Shelley Lake Ln</p>		<p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>50.00</td> </tr> </table> </p>	50.00																			
50.00																						
<p>City: Spokane Valley State: WA Zip Code: 99037</p>																						
<p>Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____</p>		<p>[MEMO ITEM] MEMO</p>																				
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____</p>																						

<p>C. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial) Melissa Bean Contributions</p>		<p>Transaction ID: 21837035 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	4		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		1	4		2	0	0	5													
<p>Mailing Address: Karen Hollins PO Box 4737</p>		<p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>25.00</td> </tr> </table> </p>	25.00																			
25.00																						
<p>City: Basalt State: CO Zip Code: 81621</p>																						
<p>Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____</p>		<p>[MEMO ITEM] MEMO</p>																				
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____</p>																						

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<table border="1"> <tr> <td>0.00</td> </tr> </table>	0.00
0.00		
<p>TOTAL This Period (last page this line number only)</p>	<table border="1"> <tr> <td> </td> </tr> </table>	

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)

PAGE 832 / 1975

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Sheila Pfafflin 173 Gates Avenue City: Gillette State: NJ Zip Code: 07933 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21837036 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Laurie Berman PO Box 390 City: Isle of Palms State: SC Zip Code: 29451 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21837037 Date of Disbursement 10 / 21 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Judith Grubner 1726 Ashland Avenue City: Evanston State: IL Zip Code: 60201 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21837038 Date of Disbursement 10 / 19 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21837039 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address Anita Siegenthaler PO Box 336		Amount of Each Disbursement this Period 25.00
City Pt. Clyde State ME Zip Code 04855	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21837040 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address Robert Lande 325 Central Park W.		Amount of Each Disbursement this Period 50.00
City New York State NY Zip Code 10025	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21837041 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address Rhoda Honigman PO Box 294		Amount of Each Disbursement this Period 300.00
City Oilville State VA Zip Code 23129	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21837042 Date of Disbursement 10 / 19 / 2005
Mailing Address Debra Burger 110 Evans Drive		Amount of Each Disbursement this Period 50.00
City McMurray State PA Zip Code 15317	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21837043 Date of Disbursement 10 / 28 / 2005
Mailing Address Sheila Gershen PO Box 292		Amount of Each Disbursement this Period 25.00
City Santa Fe State NM Zip Code 87504	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21837044 Date of Disbursement 10 / 06 / 2005
Mailing Address John McKinney PO Box 266		Amount of Each Disbursement this Period 100.00
City Maggie Valley State NC Zip Code 28751	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address Arthur Lazarus 3201 Fessenden Street, N.W.</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p>Transaction ID: 21837045</p> <p>Date of Disbursement 10 / 21 / 2005</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/ Type</p>

<p>B. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address Richard Toole PO Box 256</p> <p>City Oak Bluffs State MA Zip Code 02557</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p>Transaction ID: 21837046</p> <p>Date of Disbursement 10 / 13 / 2005</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/ Type</p>

<p>C. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address Patricia Ryan 17 south Ferris Street</p> <p>City Irvington State NY Zip Code 10533</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p>Transaction ID: 21837047</p> <p>Date of Disbursement 10 / 11 / 2005</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/ Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21837048 Date of Disbursement 10 / 05 / 2005
Mailing Address Gretchen Keiser PO Box 21883		Amount of Each Disbursement this Period 25.00
City Juneau State AK Zip Code 99802	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21837049 Date of Disbursement 10 / 06 / 2005
Mailing Address Mary Winston 3173 Riverbend Avenue		Amount of Each Disbursement this Period 100.00
City Eugene State OR Zip Code 97408	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21837050 Date of Disbursement 10 / 06 / 2005
Mailing Address Michaelann Herring PO Box 2102		Amount of Each Disbursement this Period 100.00
City Telluride State CO Zip Code 81435	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21837051 Date of Disbursement 10 / 12 / 2005
Mailing Address Catherine Jacobson 316 W 57th St		Amount of Each Disbursement this Period 250.00
City Hinsdale State IL Zip Code 60521	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21837052 Date of Disbursement 10 / 25 / 2005
Mailing Address Gerrish Milliken PO Box 1880		Amount of Each Disbursement this Period 500.00
City Oroville State WA Zip Code 98844	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21837053 Date of Disbursement 10 / 04 / 2005
Mailing Address John Wolf PO Box 1429		Amount of Each Disbursement this Period 50.00
City Sanibel State FL Zip Code 33957	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21837054 Date of Disbursement 10 / 06 / 2005
Mailing Address Joseph Moore 315 W. 70th Street, Apt. 5H		Amount of Each Disbursement this Period 50.00
City New York State NY Zip Code 10023	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21837055 Date of Disbursement 10 / 19 / 2005
Mailing Address Sara Saylor 3137 Kaiser Way		Amount of Each Disbursement this Period 50.00
City Carmichael State CA Zip Code 95608	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21837056 Date of Disbursement 10 / 06 / 2005
Mailing Address Sandra Schlachtmeyer 124 Princess St		Amount of Each Disbursement this Period 50.00
City Alexandria State VA Zip Code 22314	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 839 / 1975

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21837057 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address Phillip Corin PO Box 1096		Amount of Each Disbursement this Period 250.00
City Mercer Island State WA Zip Code 98040	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21837058 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address Rachel Schonberger 1686 Grove Park Way		Amount of Each Disbursement this Period 100.00
City Decatur State GA Zip Code 30033	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21837059 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address Charlotte Cohen 310 S. Bentley Avenue		Amount of Each Disbursement this Period 25.00
City Los Angeles State CA Zip Code 90049	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Melissa Bean Contributions Mailing Address Selma Josell 31 Silver Street City Lanesboro State MA Zip Code 01237 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21837060 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Melissa Bean Contributions Mailing Address Audrey Miller P.O. Box 888 City Ferndale State CA Zip Code 95536 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21837061 Date of Disbursement 10 / 17 / 2005 Amount of Each Disbursement this Period 60.00 [MEMO ITEM] MEMO
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C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Melissa Bean Contributions Mailing Address Richard Parrish 30862 Turquoise Pl City Lebanon State OR Zip Code 97355 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21837062 Date of Disbursement 10 / 12 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address Lucille Bacon P.O. Box 616 City Gleneden Beach State OR Zip Code 97388 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21837063 Date of Disbursement 10 / 19 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address Margaret Solomon P.O. Box 3303 City Incline Village State NV Zip Code 89450 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21837064 Date of Disbursement 10 / 28 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address Gaylord Capes 11 Whitehaven Way City Lewes State DE Zip Code 19958 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21837065 Date of Disbursement 10 / 19 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Beverly Gibbs P.O. Box 279 City: Manchaca State: TX Zip Code: 78652 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21837066 Date of Disbursement: 10 / 19 / 2005 Amount of Each Disbursement this Period: 100.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Janice Eddy P.O. Box 27 City: Kittery Point State: ME Zip Code: 03905 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21837067 Date of Disbursement: 10 / 19 / 2005 Amount of Each Disbursement this Period: 50.00 [MEMO ITEM] MEMO
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C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Barbara Adelman P.O. Box 225 City: Moro State: IL Zip Code: 62067 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21837068 Date of Disbursement: 10 / 11 / 2005 Amount of Each Disbursement this Period: 500.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address Susan Gordon 306 West St. City Pittsfield State MA Zip Code 01201 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21837069 Date of Disbursement 10 / 19 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address Joan Golder 1235 Whitebridge Lane City Winnetka State IL Zip Code 60093 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21837070 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address Frances Tibbits P.O. Box 205 City Pacific Palisades State CA Zip Code 90272 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21837071 Date of Disbursement 10 / 04 / 2005 Amount of Each Disbursement this Period 200.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21837072 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address Roberta Frissell P.O. Box 116		Amount of Each Disbursement this Period 25.00
City Pt. Townsend State WA Zip Code 98368	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO
Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		
Mailing Address Joan Stephenson 165 E. 35th Street, Apt. 4J		Transaction ID: 21837073 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
City New York State NY Zip Code 10016		Amount of Each Disbursement this Period 100.00
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO
Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		
Mailing Address Jeanne Brett MORS Kellogg		Transaction ID: 21837074 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
City Evanston State IL Zip Code 60208		Amount of Each Disbursement this Period 500.00
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Melissa Bean Contributions Mailing Address Ingrid Heide 305 E. 24th Street City New York State NY Zip Code 10010 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21837075 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 15.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Melissa Bean Contributions Mailing Address Lynn Hauser 11 Sylvan Lane City Dekalb State IL Zip Code 60115 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21837076 Date of Disbursement 10 / 23 / 2005 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Melissa Bean Contributions Mailing Address Sarah Crites 1000 Franklin Avenue, # 304 City Essex State MD Zip Code 21221 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21837077 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21837078 Date of Disbursement 10 / 05 / 2005
Mailing Address Patti Kile E3412 Bunker Road		Amount of Each Disbursement this Period 100.00
City Waupaca State WI Zip Code 54981	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21837079 Date of Disbursement 10 / 12 / 2005
Mailing Address Mary Ittner Bob Rutemoeller		Amount of Each Disbursement this Period 100.00
City Gualala State CA Zip Code 95445	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21837080 Date of Disbursement 10 / 14 / 2005
Mailing Address Marilyn Dowdell 1645 Randall Road		Amount of Each Disbursement this Period 100.00
City Yellow Springs State OH Zip Code 45387	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial) Melissa Bean</p> <p>Mailing Address Mary Mostaghim 304 Pineridge Street</p> <p>City Ann Arbor State MI Zip Code 48103</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21837081 Date of Disbursement 10 / 21 / 2005</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial) Melissa Bean</p> <p>Mailing Address Cynthia Linton 990 N. Lake Shore Drive</p> <p>City Chicago State IL Zip Code 60611</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21837082 Date of Disbursement 10 / 19 / 2005</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial) Melissa Bean</p> <p>Mailing Address Janice Paneth 301 W. 108th Street</p> <p>City New York State NY Zip Code 10025</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21837083 Date of Disbursement 10 / 19 / 2005</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] MEMO</p>
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SUBTOTAL of Disbursements This Page (optional)	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21837084 Date of Disbursement 10 / 19 / 2005
Mailing Address Susan Swan 96 Winfield Avenue		Amount of Each Disbursement this Period 100.00
City San Francisco State CA Zip Code 94110	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21837085 Date of Disbursement 10 / 19 / 2005
Mailing Address E. DeChene 1629 Selby Avenue		Amount of Each Disbursement this Period 10.00
City Los Angeles State CA Zip Code 90024	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21837086 Date of Disbursement 10 / 19 / 2005
Mailing Address Ann Bailey 3001 Albemarle Street, N.W.		Amount of Each Disbursement this Period 50.00
City Washington State DC Zip Code 20008	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21837087 Date of Disbursement 10 / 06 / 2005
Mailing Address Victoria Welch 932 Twisp River Road		Amount of Each Disbursement this Period 25.00
City Twisp	State WA	
Zip Code 98856		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21837088 Date of Disbursement 10 / 19 / 2005
Mailing Address Frances Shaw 123 Arthur J. Moore Drive		Amount of Each Disbursement this Period 50.00
City Saint Simons Isl.	State GA	
Zip Code 31522		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21837089 Date of Disbursement 10 / 19 / 2005
Mailing Address Sena Zinn 9217 E Rocky Lake Drive		Amount of Each Disbursement this Period 10.00
City Sun Lakes	State AZ	
Zip Code 85248		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21837090 Date of Disbursement 10 / 19 / 2005
Mailing Address Nancy King 92 Ponquogue Avenue		Amount of Each Disbursement this Period 25.00
City Hampton Bay State NY Zip Code 11946	Purpose of Disbursement Candidate Contrib Earmarked	
Candidate Name		[MEMO ITEM] MEMO
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21837091 Date of Disbursement 10 / 06 / 2005
Mailing Address Margaret Johnson 9190 Brier Rd.		Amount of Each Disbursement this Period 50.00
City La Mesa State CA Zip Code 91942	Purpose of Disbursement Candidate Contrib Earmarked	
Candidate Name		[MEMO ITEM] MEMO
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21837092 Date of Disbursement 10 / 05 / 2005
Mailing Address Deborah Gray 915 Arbor Avenue		Amount of Each Disbursement this Period 100.00
City Wheaton State IL Zip Code 60187	Purpose of Disbursement Candidate Contrib Earmarked	
Candidate Name		[MEMO ITEM] MEMO
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21837093 Date of Disbursement 10 / 21 / 2005
Mailing Address June Dwyer 30 5th Avenue, Apt. 16C		Amount of Each Disbursement this Period 100.00
City New York State NY Zip Code 10011	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21837094 Date of Disbursement 10 / 11 / 2005
Mailing Address Daniel Milligan 2912 Arlington Drive		Amount of Each Disbursement this Period 50.00
City Springfield State IL Zip Code 62704	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21837095 Date of Disbursement 10 / 04 / 2005
Mailing Address Pamela Thul-Immler 9060 Madeline Lake Road		Amount of Each Disbursement this Period 50.00
City Woodruff State WI Zip Code 54568	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21837096 Date of Disbursement 10 / 19 / 2005
Mailing Address Lisa Lindeman 906 Flindt Drive		Amount of Each Disbursement this Period 25.00
City Storm Lake State IA Zip Code 50588	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21837097 Date of Disbursement 10 / 14 / 2005
Mailing Address Nancy Duckles 9048 Hemingway Grove Circle		Amount of Each Disbursement this Period 50.00
City Knoxville State TN Zip Code 37922	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21837098 Date of Disbursement 10 / 06 / 2005
Mailing Address Virginia Covey 900 E. Harrison Avenue		Amount of Each Disbursement this Period 50.00
City Pomona State CA Zip Code 91767	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Mary Stark 2900 W. Park Blvd. City: Shaker Hts State: OH Zip Code: 44120 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21837099 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Susan Parsons 8918 Day Lilly Court City: Fairfax State: VA Zip Code: 22031 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21837100 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Robert Katzman 1611 Calle De Andluca City: La Jolla State: CA Zip Code: 92037 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21837101 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Melissa Bean Contributions Mailing Address John Kerber 8834 Pointe Vista Drive City Victoria State MN Zip Code 55386 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21837102 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Melissa Bean Contributions Mailing Address Karen Sonderby 88 W. Schiller Street, # 2602 City Chicago State IL Zip Code 60610 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21837103 Date of Disbursement 10 / 19 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Melissa Bean Contributions Mailing Address William Hayles 29 Lake Park Drive City Piscataway State NJ Zip Code 08854 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21837104 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Beth Bentley 8762 25th Place NE City: Seattle State: WA Zip Code: 98115 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21837105 Date of Disbursement: 10 / 17 / 2005 Amount of Each Disbursement this Period: 50.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Mary Strubbe 1021 N Sheridan Rd City: Waukegan State: IL Zip Code: 60085 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21837106 Date of Disbursement: 10 / 07 / 2005 Amount of Each Disbursement this Period: 50.00 [MEMO ITEM] MEMO
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C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address: Catherine Smith 85316 Coyote Creek Road City: Veneta State: OR Zip Code: 97487 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 21837107 Date of Disbursement: 10 / 17 / 2005 Amount of Each Disbursement this Period: 250.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Melissa Bean Contributions Mailing Address Carolyn Koster 850 Powell Street, Apt. 203 City San Francisco State CA Zip Code 94108 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21837108 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Melissa Bean Contributions Mailing Address Joan Nissman 286 Clinton Road City Brookline State MA Zip Code 02445 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21837109 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 12.50 [MEMO ITEM] MEMO
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C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Melissa Bean Contributions Mailing Address Beverlee Mitchell 1605 N. 7th Street City Boise State ID Zip Code 83702 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21837110 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

A. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address Anita Krantz 11 Monson Turnpike Road City Ware State MA Zip Code 01082 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21837111 Date of Disbursement 10 / 21 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address Dana Herpe 2828 North Burling Street City Chicago State IL Zip Code 60657 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21837112 Date of Disbursement 10 / 11 / 2005 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Melissa Bean Contributions Full Name (Last, First, Middle Initial) Mailing Address Harriet Stone 8312 Kilbourn Avenue City Skokie State IL Zip Code 60076 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 21837113 Date of Disbursement 10 / 06 / 2005 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Melissa Bean Contributions		Transaction ID: 21837114 Date of Disbursement 10 / 06 / 2005
Mailing Address Jeanne Vale 827 Kenmare Ter		Amount of Each Disbursement this Period 25.00
City Crown Point	State IN		[MEMO ITEM] MEMO
Zip Code 46307		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked			[MEMO ITEM] MEMO
Candidate Name		[MEMO ITEM] MEMO
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			[MEMO ITEM] MEMO
Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) B. Melissa Bean Contributions		Transaction ID: 21837115 Date of Disbursement 10 / 24 / 2005
Mailing Address Elle Milholland 2800 Windrush Lane		Amount of Each Disbursement this Period 250.00
City Roswell	State GA		[MEMO ITEM] MEMO
Zip Code 30076		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked			[MEMO ITEM] MEMO
Candidate Name		[MEMO ITEM] MEMO
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			[MEMO ITEM] MEMO
Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) C. Melissa Bean Contributions		Transaction ID: 21837116 Date of Disbursement 10 / 31 / 2005
Mailing Address George Sodowick 28 Mountain Ridge Drive		Amount of Each Disbursement this Period 100.00
City Livingston	State NJ		[MEMO ITEM] MEMO
Zip Code 07039		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked			[MEMO ITEM] MEMO
Candidate Name		[MEMO ITEM] MEMO
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			[MEMO ITEM] MEMO
Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

<p>A. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial) Melissa Bean</p> <p>Mailing Address Frances Danaher 16 S. Main Street, # 407</p> <p>City Barre State VT Zip Code 05641</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21837117 Date of Disbursement 10 / 11 / 2005</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial) Melissa Bean</p> <p>Mailing Address Gordon Gibson 821 Hiawatha Drive</p> <p>City Elkhart State IN Zip Code 46517</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21837118 Date of Disbursement 10 / 14 / 2005</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Melissa Bean Contributions</p> <p>Full Name (Last, First, Middle Initial) Melissa Bean</p> <p>Mailing Address Julie Peppard 1094 Palms Blvd</p> <p>City Venice State CA Zip Code 90291</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 21837119 Date of Disbursement 10 / 11 / 2005</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p> <p>TOTAL This Period (last page this line number only)</p>	<p>0.00</p>
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**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Melissa Bean Contributions

Mailing Address Elizabeth Benedict

City REQUESTED State Zip Code 11111

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 21837120

Date of Disbursement

10 / 27 / 2005

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]
MEMO

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

8212.94

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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Susan Solovay		Transaction ID: SB28A-80236 Date of Disbursement 10 / 04 / 2005
Mailing Address 40 E. 88th Street, Apt. 9C		Amount of Each Disbursement this Period 75.00
City New York State NY Zip Code 10128		
Purpose of Disbursement Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. David Allen		Transaction ID: SB28A-79208 Date of Disbursement 10 / 20 / 2005
Mailing Address 684 W. Harriet Street		Amount of Each Disbursement this Period 40.00
City Altadena State CA Zip Code 91001		
Purpose of Disbursement Refund Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Sarah Allen		Transaction ID: SB28A-79209 Date of Disbursement 10 / 20 / 2005
Mailing Address 909 Trail Cross Court		Amount of Each Disbursement this Period 50.00
City Santa Fe State NM Zip Code 87505		
Purpose of Disbursement Refund Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	165.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 862 / 1975

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Alberta Anderson		Transaction ID: SB28A-79210 Date of Disbursement 10 / 20 / 2005
Mailing Address 16762 Woodlake Drive		Amount of Each Disbursement this Period 50.00
City College Station	State TX	
Zip Code 77845	Category/Type	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. George Andreassi		Transaction ID: SB28A-79211 Date of Disbursement 10 / 20 / 2005
Mailing Address 2 Churchill Road		Amount of Each Disbursement this Period 30.00
City Cresskill	State NJ	
Zip Code 07626	Category/Type	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Caroline Armstrong		Transaction ID: SB28A-79212 Date of Disbursement 10 / 20 / 2005
Mailing Address 11335 N. Eagle Landing Drive		Amount of Each Disbursement this Period 50.00
City Tucson	State AZ	
Zip Code 85737	Category/Type	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	130.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Patricia Arnold		Transaction ID: SB28A-79213 Date of Disbursement 10 / 20 / 2005
Mailing Address 6704 Allegheny Ave.		Amount of Each Disbursement this Period 700.00
City Takoma Park State MD Zip Code 20912	Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type		
Disbursement For:		

Full Name (Last, First, Middle Initial) B. Rose Aronin		Transaction ID: SB28A-79214 Date of Disbursement 10 / 20 / 2005
Mailing Address 5113 Cantabria Crst.		Amount of Each Disbursement this Period 20.00
City Sarasota State FL Zip Code 34238	Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type		
Disbursement For:		

Full Name (Last, First, Middle Initial) C. Paul Armer		Transaction ID: SB28A-79215 Date of Disbursement 10 / 20 / 2005
Mailing Address 18250 Alexandria Way		Amount of Each Disbursement this Period 250.00
City Grass Valley State CA Zip Code 95949	Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type		
Disbursement For:		

SUBTOTAL of Disbursements This Page (optional) ▶	970.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Elisabeth Bakshi		Transaction ID: SB28A-79216 Date of Disbursement 10 / 20 / 2005	
Mailing Address PO Box 2858		Amount of Each Disbursement this Period 50.00	
City Silver City	State NM		Zip Code 88062
Purpose of Disbursement Refund			Category/Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

Full Name (Last, First, Middle Initial) B. Robert Baltzer		Transaction ID: SB28A-79217 Date of Disbursement 10 / 20 / 2005	
Mailing Address 2415 Brexel Street		Amount of Each Disbursement this Period 25.00	
City Vienna	State VA		Zip Code 22180
Purpose of Disbursement Refund			Category/Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

Full Name (Last, First, Middle Initial) C. Jeanne Benioff		Transaction ID: SB28A-79218 Date of Disbursement 10 / 20 / 2005	
Mailing Address 765 Upland Road		Amount of Each Disbursement this Period 50.00	
City Redwood City	State CA		Zip Code 94062
Purpose of Disbursement Refund			Category/Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

SUBTOTAL of Disbursements This Page (optional) ▶	125.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Arnoldine Berlin		Transaction ID: SB28A-79219 Date of Disbursement 10 / 20 / 2005
Mailing Address 5823 Mendocino Avenue		Amount of Each Disbursement this Period 20.00
City Oakland	State CA	
Zip Code 94618		
Purpose of Disbursement Refund		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Lois Ann Cailliet		Transaction ID: SB28A-79220 Date of Disbursement 10 / 20 / 2005
Mailing Address 1339 Luna Vista Drive		Amount of Each Disbursement this Period 50.00
City Pacific Palisades	State CA	
Zip Code 90272		
Purpose of Disbursement Refund		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Alberta Cecchini		Transaction ID: SB28A-79221 Date of Disbursement 10 / 20 / 2005
Mailing Address 2699 New Macland Road		Amount of Each Disbursement this Period 20.00
City Powder Springs	State GA	
Zip Code 30127		
Purpose of Disbursement Refund		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	90.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Marlys Chutich		Transaction ID: SB28A-79222 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 11664 Tulip Street NW		Amount of Each Disbursement this Period 25.00
City Coon Rapids State MN Zip Code 55433	Category/ Type	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Mary Coffman		Transaction ID: SB28A-79223 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address HC 72 Box 4		Amount of Each Disbursement this Period 50.00
City Keyser State WV Zip Code 26726	Category/ Type	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Mary Conway		Transaction ID: SB28A-79224 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 1 Wellesley Way		Amount of Each Disbursement this Period 50.00
City Iowa City State IA Zip Code 52245	Category/ Type	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	125.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mary Cope		Transaction ID: SB28A-79225 Date of Disbursement 10 / 20 / 2005
Mailing Address 6101 Twin Silo Drive		Amount of Each Disbursement this Period 50.00
City Blue Bell	State PA Zip Code 19422	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Edward Cushman		Transaction ID: SB28A-79226 Date of Disbursement 10 / 20 / 2005
Mailing Address 1108 E. Shelby Street		Amount of Each Disbursement this Period 2.00
City Seattle	State WA Zip Code 98102	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Vera David		Transaction ID: SB28A-79227 Date of Disbursement 10 / 20 / 2005
Mailing Address 1108 E. Shelby Street		Amount of Each Disbursement this Period 20.00
City Beverly Hills	State CA Zip Code 90210	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	72.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Jack Dawson		Transaction ID: SB28A-79228 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 6 Montclair		Amount of Each Disbursement this Period 50.00
City Atlanta State GA Zip Code 30309		
Purpose of Disbursement Refund Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) George Dickie		Transaction ID: SB28A-79229 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 3110 43rd St W		Amount of Each Disbursement this Period 50.00
City Brandenton State FL Zip Code 34209		
Purpose of Disbursement Refund Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Kathryn Dickman		Transaction ID: SB28A-79230 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 5101 S. Ridge Dr.		Amount of Each Disbursement this Period 50.00
City Cincinnati State OH Zip Code 45224		
Purpose of Disbursement Refund Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Leona Doherty		Transaction ID: SB28A-79231 Date of Disbursement 10 / 20 / 2005
Mailing Address 35 Bancroft Road		Amount of Each Disbursement this Period 125.00
City Andover State MA Zip Code 01810	Purpose of Disbursement Refund Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Adele Dunn		Transaction ID: SB28A-79232 Date of Disbursement 10 / 20 / 2005
Mailing Address 1205 Kendal Way		Amount of Each Disbursement this Period 25.00
City Sleeply Hollow State NY Zip Code 10591	Purpose of Disbursement Refund Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Alice Franck		Transaction ID: SB28A-79233 Date of Disbursement 10 / 20 / 2005
Mailing Address 4509 S. Hudson Street		Amount of Each Disbursement this Period 50.00
City Seattle State WA Zip Code 98118	Purpose of Disbursement Refund Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	200.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Gilbert French		Transaction ID: SB28A-79234 Date of Disbursement 10 / 20 / 2005	
Mailing Address 1127 Valley View Drive		Amount of Each Disbursement this Period 20.00	
City Vermillion State SD Zip Code 57069	Purpose of Disbursement Refund Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Cathajane Galante		Transaction ID: SB28A-79235 Date of Disbursement 10 / 20 / 2005	
Mailing Address 35 Campus Circle NW		Amount of Each Disbursement this Period 50.00	
City Grand Rapids State MI Zip Code 49503	Purpose of Disbursement Refund Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Lynda Goldstein		Transaction ID: SB28A-79236 Date of Disbursement 10 / 20 / 2005	
Mailing Address 472 Columbine Street		Amount of Each Disbursement this Period 150.00	
City Denver State CO Zip Code 80206	Purpose of Disbursement Refund Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	220.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 871 / 1975

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Madeline Goodwin		Transaction ID: SB28A-79237 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 1333S S Beverly Glenn Blvd. #901		Amount of Each Disbursement this Period 200.00	
City Los Angeles	State CA		Zip Code 90024
Purpose of Disbursement Refund			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

Full Name (Last, First, Middle Initial) B. Daniel Goulding		Transaction ID: SB28A-79238 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 61 Mulberry Drive		Amount of Each Disbursement this Period 50.00	
City Oberlin	State OH		Zip Code 44074
Purpose of Disbursement Refund			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

Full Name (Last, First, Middle Initial) C. Robert Grubbs		Transaction ID: SB28A-79239 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 1700 Spruce Street		Amount of Each Disbursement this Period 200.00	
City S. Pasadena	State CA		Zip Code 92030
Purpose of Disbursement Refund			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

SUBTOTAL of Disbursements This Page (optional) ▶	450.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 872 / 1975

<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)
EMILY's List

A. Robert Guy Full Name (Last, First, Middle Initial) Mailing Address 2701 Pickett Rd. Apt. 4004 City Durham State NC Zip Code 27705 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-79240 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 200.00 Category/Type
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B. Judy Hansen Full Name (Last, First, Middle Initial) Mailing Address 106 West Linden Street City Alexandria State VA Zip Code 22301 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-79241 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 25.00 Category/Type
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C. Lillian Hansen Full Name (Last, First, Middle Initial) Mailing Address 251 Arrowroch Lane City Boise State ID Zip Code 83706 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-79242 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 25.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	250.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Jane Hanna		Transaction ID: SB28A-79243 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 10 Descanso Road		Amount of Each Disbursement this Period 25.00
City Santa Fe State NM Zip Code 87508	Category/ Type	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Kathy Henry		Transaction ID: SB28A-79244 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 5024 Pacific Village Drive		Amount of Each Disbursement this Period 25.00
City Carpinteria State CA Zip Code 93013	Category/ Type	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Patricia Hendel		Transaction ID: SB28A-79245 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 127 Parkway S.		Amount of Each Disbursement this Period 25.00
City New London State CT Zip Code 06320	Category/ Type	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	75.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Carole Hesse		Transaction ID: SB28A-79246 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 117 Nob Hill Street		Amount of Each Disbursement this Period 50.00
City Ashland State OR Zip Code 97520		
Purpose of Disbursement Refund Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Sandra Heyward		Transaction ID: SB28A-79247 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 30071 Andromeda Lane		Amount of Each Disbursement this Period 20.00
City Malibu State CA Zip Code 90265		
Purpose of Disbursement Refund Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Anne Honhart		Transaction ID: SB28A-79248 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 197 E. Frank Street		Amount of Each Disbursement this Period 25.00
City Birmingham State MI Zip Code 48009		
Purpose of Disbursement Refund Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	95.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)

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<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)
EMILY's List

A. Robert Horowitz Full Name (Last, First, Middle Initial) Mailing Address 7631 Monte Verde Lane City West Palm Beach State FL Zip Code 33412 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-79249 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Mark Hubelbank Full Name (Last, First, Middle Initial) Mailing Address 167 Maynard Road City Sudbury State MA Zip Code 01776 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-79250 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Mildred Ireland Full Name (Last, First, Middle Initial) Mailing Address 1264 Fort Washington Ave. Apt. F21 City Fort Washington State PA Zip Code 19034 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-79251 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	200.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

A. Leelinda Jackson Full Name (Last, First, Middle Initial) Mailing Address 1332 N. Michigan Road City Eaton Rapids State MI Zip Code 48827 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-79252 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Elizabeth Jones Full Name (Last, First, Middle Initial) Mailing Address 104 Gilley Drive City Williamsburg State VA Zip Code 23188 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-79253 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Katharine Johnson Full Name (Last, First, Middle Initial) Mailing Address 69 W. Shore Road City Belvedere State CA Zip Code 94920 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-79254 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 500.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	650.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 877 / 1975

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Leota Jones		Transaction ID: SB28A-79255 Date of Disbursement 10 / 20 / 2005	
Mailing Address 12 Maple Lane		Amount of Each Disbursement this Period 25.00	
City Jeannette State PA Zip Code 15644	Purpose of Disbursement Refund	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Aileen Kassen		Transaction ID: SB28A-79256 Date of Disbursement 10 / 20 / 2005	
Mailing Address 2552 Warwick Road		Amount of Each Disbursement this Period 100.00	
City Shaker Heights State OH Zip Code 44120	Purpose of Disbursement Refund	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Kibbee Granville		Transaction ID: SB28A-79257 Date of Disbursement 10 / 20 / 2005	
Mailing Address 389 Oak Street		Amount of Each Disbursement this Period 25.00	
City Quincy State CA Zip Code 95971	Purpose of Disbursement Refund	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 878 / 1975

<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)
EMILY's List

A. Gerhard King Full Name (Last, First, Middle Initial) Mailing Address 2118 Wilshire Blvd. #1025 City Santa Monica State CA Zip Code 90403 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-79258 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 60.00 Category/Type
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B. Sandra Klasky Full Name (Last, First, Middle Initial) Mailing Address 17323 Citronia Street City Northridge State CA Zip Code 92325 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-79259 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Simone Klugman Full Name (Last, First, Middle Initial) Mailing Address 6012 Margarido Drive City Oakland State CA Zip Code 94618 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-79260 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	260.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)

PAGE 879 / 1975

<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Jane Kubota		Transaction ID: SB28A-79261 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 47-713 Hui lo Place		Amount of Each Disbursement this Period 50.00	
City Kaneohe State HI Zip Code 96744	Purpose of Disbursement Refund Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B. Full Name (Last, First, Middle Initial) Rita Lamb		Transaction ID: SB28A-79262 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 39600 Elna Way		Amount of Each Disbursement this Period 200.00	
City Cathedral City State CA Zip Code 92234	Purpose of Disbursement Refund Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C. Full Name (Last, First, Middle Initial) Carolyn Larocco		Transaction ID: SB28A-79263 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 978 Virginia Avenue NE		Amount of Each Disbursement this Period 100.00	
City Atlanta State GA Zip Code 30306	Purpose of Disbursement Refund Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	350.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 880 / 1975

<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)
EMILY's List

A. Joanne Leonard Full Name (Last, First, Middle Initial) Mailing Address 483 Santa Monica City San Leandro State CA Zip Code 94579 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-79264 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Merle Levy Full Name (Last, First, Middle Initial) Mailing Address 1018 Washington Lane City Rydal State PA Zip Code 19046 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-79265 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 250.00 Category/Type
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C. James Lindstrom Full Name (Last, First, Middle Initial) Mailing Address 2430 Dehesa Road City El Cajon State CA Zip Code 92019 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-79266 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	400.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 881 / 1975

<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)
EMILY's List

<p>A. William Loeb</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 524</p> <p>City South Pasadena State CA Zip Code 01266</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB28A-79267</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="250.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>		

<p>B. Mary Lower</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 2012 Fremont</p> <p>City South Pasadena State CA Zip Code 91030</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB28A-79268</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="10.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>		

<p>C. Virginia Lutton</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 3580 Shaw Avenue Apt. 536</p> <p>City Cincinnati State OH Zip Code 45208</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB28A-79269</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="310.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Frances Matteucci		Transaction ID: SB28A-79270 Date of Disbursement 10 / 20 / 2005
Mailing Address 5921 Widgeon Court		Amount of Each Disbursement this Period 10.00
City Stockton State CA Zip Code 95207	Category/ Type	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jermaine Magnuson		Transaction ID: SB28A-79271 Date of Disbursement 10 / 20 / 2005
Mailing Address 719 W. Lee Street		Amount of Each Disbursement this Period 25.00
City Seattle State WA Zip Code 98119	Category/ Type	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Lois Maggenti		Transaction ID: SB28A-79272 Date of Disbursement 10 / 20 / 2005
Mailing Address 23500 Cristo Rey Drive		Amount of Each Disbursement this Period 25.00
City Cupertino State CA Zip Code 95014	Category/ Type	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	60.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

A. Marianna Matha Full Name (Last, First, Middle Initial) Mailing Address 140 Riverside Drive Apt. 18N City New York State NY Zip Code 10024 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-79273 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 50.00
--	--	--

B. Jacqueline Mancall Full Name (Last, First, Middle Initial) Mailing Address PO Box 498 City Lafayette HI State PA Zip Code 19444 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-79274 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 25.00
---	--	--

C. Joe McCormick Full Name (Last, First, Middle Initial) Mailing Address 851 Galena Drive City Sandy State UT Zip Code 84094 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-79275 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 20.00
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SUBTOTAL of Disbursements This Page (optional) ▶	95.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

A. Hanna Miller Full Name (Last, First, Middle Initial) Mailing Address 1811 Pepperidge Drive City Orlando State FL Zip Code 32806 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-79276 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Karen Miller-Freedom Full Name (Last, First, Middle Initial) Mailing Address 1911 N. Jacques Road City Palm Springs State CA Zip Code 92262 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-79277 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 20.00 Category/Type
--	--	---

C. Fred Minch Full Name (Last, First, Middle Initial) Mailing Address 9108 Pine Lake Drive City Louisville State KY Zip Code 40220 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-79278 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 15.00 Category/Type
--	--	---

SUBTOTAL of Disbursements This Page (optional) ▶	85.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Charlotte Morse		Transaction ID: SB28A-79279 Date of Disbursement 10 / 20 / 2005
Mailing Address 2202 Floyd Avenue		Amount of Each Disbursement this Period 50.00
City Richmond	State VA Zip Code 23220	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Margaret Morales		Transaction ID: SB28A-79280 Date of Disbursement 10 / 20 / 2005
Mailing Address 1530 Leila Court		Amount of Each Disbursement this Period 25.00
City Santa Cruz	State CA Zip Code 95062	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Elizabeth Moore		Transaction ID: SB28A-79281 Date of Disbursement 10 / 20 / 2005
Mailing Address 1594 Fairway Green Circle		Amount of Each Disbursement this Period 25.00
City San Jose	State CA Zip Code 95131	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	100.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Patricia Muller		Transaction ID: SB28A-79282 Date of Disbursement 10 / 20 / 2005
Mailing Address 3605 Parkwood Place		Amount of Each Disbursement this Period 100.00
City La Crosse	State WI	
Zip Code 54601		
Purpose of Disbursement Refund		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Shunji Muso		Transaction ID: SB28A-79283 Date of Disbursement 10 / 20 / 2005
Mailing Address 18320 Sheffiled Lane		Amount of Each Disbursement this Period 100.00
City Northridge	State CA	
Zip Code 91326		
Purpose of Disbursement Refund		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Kristin Nagel		Transaction ID: SB28A-79284 Date of Disbursement 10 / 20 / 2005
Mailing Address 1215 Camp Cardinal Rd.		Amount of Each Disbursement this Period 100.00
City Iowa City	State IA	
Zip Code 52246		
Purpose of Disbursement Refund		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

<p>A. Full Name (Last, First, Middle Initial) Judy Neri</p>		<p>Transaction ID: SB28A-79285 Date of Disbursement</p>
<p>Mailing Address 221 Indian Spring Drive</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/></p>
<p>City Silver Spring State MD Zip Code 20901</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="30.00"/></p>	
<p>Purpose of Disbursement Refund</p>	<p><input type="text"/></p>	
<p>Candidate Name</p>	<p>Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>B. Full Name (Last, First, Middle Initial) Jean Parechian</p>		<p>Transaction ID: SB28A-79286 Date of Disbursement</p>
<p>Mailing Address 18443 Santa Yolanda Circle</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/></p>
<p>City Fountain Valley State CA Zip Code 92708</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="10.00"/></p>	
<p>Purpose of Disbursement Refund</p>	<p><input type="text"/></p>	
<p>Candidate Name</p>	<p>Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>C. Full Name (Last, First, Middle Initial) Anita Pfluger</p>		<p>Transaction ID: SB28A-79287 Date of Disbursement</p>
<p>Mailing Address 175 Pinewood Trail</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/></p>
<p>City Trumbull State CT Zip Code 06611</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="25.00"/></p>	
<p>Purpose of Disbursement Refund</p>	<p><input type="text"/></p>	
<p>Candidate Name</p>	<p>Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="65.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**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)

PAGE 888 / 1975

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Christine Pickford		Transaction ID: SB28A-79288 Date of Disbursement 10 / 20 / 2005
Mailing Address 1104 N. 18th Street		Amount of Each Disbursement this Period 100.00
City Boise	State ID OH Zip Code 83702	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Margaret Preston		Transaction ID: SB28A-79289 Date of Disbursement 10 / 20 / 2005
Mailing Address 2251 Springport Road Apt. 301		Amount of Each Disbursement this Period 35.00
City Jackson	State ID MI Zip Code 49202	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Christine Purves		Transaction ID: SB28A-79290 Date of Disbursement 10 / 20 / 2005
Mailing Address 814 Red Maple Court		Amount of Each Disbursement this Period 50.00
City Bluffton	State ID OH Zip Code 45817	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	185.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

A. Martin Rabinowitz Full Name (Last, First, Middle Initial) Mailing Address 75 Mountainview Road City Milburn State NJ Zip Code 07041 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-79291 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Janet Riley Full Name (Last, First, Middle Initial) Mailing Address 212 S. 400 E City Springville State UT Zip Code 84663 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-79292 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 15.00 Category/Type
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C. John Rowse Full Name (Last, First, Middle Initial) Mailing Address 32 Washington Drive City Acton State MA Zip Code 01720 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-79293 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 25.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	90.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)

PAGE 890 / 1975

<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)
EMILY's List

A. Dorothy Sanchez Full Name (Last, First, Middle Initial) Mailing Address 5615 Danny Kaye Drive City San Antonio State TX Zip Code 78240 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-79294 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 75.00 Category/Type
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B. Dorothy Sager Full Name (Last, First, Middle Initial) Mailing Address PO Box 603 City Altamont State NY Zip Code 12009 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-79295 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Shirley Sanderson Full Name (Last, First, Middle Initial) Mailing Address 556 26th Street NE City Northwood State ND Zip Code 58267 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-79296 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	225.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Charlotte Schroeder		Transaction ID: SB28A-79297 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 365 W. Prospect Street		Amount of Each Disbursement this Period 50.00
City Lake Mills	State WI Zip Code 53551	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Faye Schonbrunn		Transaction ID: SB28A-79298 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 1299 N. Tamiami Trl. Apt. 322		Amount of Each Disbursement this Period 50.00
City Sarasota	State FL Zip Code 34236	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Robert Schumann		Transaction ID: SB28A-79299 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address PO Box 813		Amount of Each Disbursement this Period 500.00
City Madison	State CT Zip Code 06443	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	600.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Suzanne Shapiro		Transaction ID: SB28A-79300 Date of Disbursement 10 / 20 / 2005
Mailing Address 1500 Powell Road		Amount of Each Disbursement this Period 25.00
City Coatesville	State PA Zip Code 19320	
Purpose of Disbursement Refund		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Barbara Sheffler		Transaction ID: SB28A-79301 Date of Disbursement 10 / 20 / 2005
Mailing Address 2501 Chagrin River Road		Amount of Each Disbursement this Period 25.00
City Chagrin Falls	State OH Zip Code 44022	
Purpose of Disbursement Refund		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Abner Shimony		Transaction ID: SB28A-79302 Date of Disbursement 10 / 20 / 2005
Mailing Address 8 Dover Road		Amount of Each Disbursement this Period 10.00
City Wellesley	State MA Zip Code 02482	
Purpose of Disbursement Refund		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	60.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

<p>A. Full Name (Last, First, Middle Initial) Melvin Shure</p>		<p>Transaction ID: SB28A-79303 Date of Disbursement</p>	
<p>Mailing Address PO Box 57</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p>	
<p>City Searsmont</p>	<p>State ME</p>	<p>Zip Code 04973</p>	
<p>Purpose of Disbursement Refund</p>		<p>Amount of Each Disbursement this Period <input type="text" value="25.00"/></p>	
<p>Candidate Name</p>		<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>B. Full Name (Last, First, Middle Initial) Eleanor Singer</p>		<p>Transaction ID: SB28A-79304 Date of Disbursement</p>	
<p>Mailing Address 14 Haverhill Court</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p>	
<p>City Ann Arbor</p>	<p>State MI</p>	<p>Zip Code 48105</p>	
<p>Purpose of Disbursement Refund</p>		<p>Amount of Each Disbursement this Period <input type="text" value="150.00"/></p>	
<p>Candidate Name</p>		<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>C. Full Name (Last, First, Middle Initial) Roberta Silverstein</p>		<p>Transaction ID: SB28A-79305 Date of Disbursement</p>	
<p>Mailing Address 1516 Lincoln Street</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p>	
<p>City Berkeley</p>	<p>State CA</p>	<p>Zip Code 94703</p>	
<p>Purpose of Disbursement Refund</p>		<p>Amount of Each Disbursement this Period <input type="text" value="50.00"/></p>	
<p>Candidate Name</p>		<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="225.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Margie Sinagra		Transaction ID: SB28A-79306 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 1218 Berkshire Avenue		Amount of Each Disbursement this Period 10.00
City Pittsburgh State PA Zip Code 15226		
Purpose of Disbursement Refund Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Martha Smith		Transaction ID: SB28A-79307 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 1001 E. Gaylord		Amount of Each Disbursement this Period 100.00
City Mount Pleasant State MI Zip Code 48858		
Purpose of Disbursement Refund Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Allen Spalt		Transaction ID: SB28A-79308 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 300 James Street		Amount of Each Disbursement this Period 100.00
City Carrboro State ND Zip Code 27510		
Purpose of Disbursement Refund Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	210.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Edna Spencer		Transaction ID: SB28A-79309 Date of Disbursement 10 / 20 / 2005	
Mailing Address 1609 N. New Hampshire Ave.		Amount of Each Disbursement this Period 25.00	
City Tavares State FL Zip Code 32778	Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. John Stearns		Transaction ID: SB28A-79310 Date of Disbursement 10 / 20 / 2005	
Mailing Address 73 Margin St. Apt. 204		Amount of Each Disbursement this Period 75.00	
City Peabody State MA Zip Code 01960	Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Phillip Sturdevant		Transaction ID: SB28A-79311 Date of Disbursement 10 / 20 / 2005	
Mailing Address 210 So. River Avenue		Amount of Each Disbursement this Period 50.00	
City Holland State MI Zip Code 49423	Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

A. Patrick Streidl Full Name (Last, First, Middle Initial) Mailing Address 1005 Nancy Lane City Costa Mesa State CA Zip Code 92627 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-79312 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 28.56 Category/Type
--	--	---

B. Rhoda Sturmak Full Name (Last, First, Middle Initial) Mailing Address 630 W. 246th Street City Bronx State NY Zip Code 10471 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-79313 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 25.00 Category/Type
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C. Jackie Sullivan Full Name (Last, First, Middle Initial) Mailing Address 562 Baughman Avenue City Claremont State CA Zip Code 91711 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-79314 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	103.56
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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Hope Syverson		Transaction ID: SB28A-79315 Date of Disbursement 10 / 20 / 2005
Mailing Address 19360 Magnolia Grove Sq. Unit 215		Amount of Each Disbursement this Period 100.00
City Leesburg State VA Zip Code 20176		
Purpose of Disbursement Refund Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Helen Thomsen		Transaction ID: SB28A-79316 Date of Disbursement 10 / 20 / 2005	
Mailing Address 23442 El Toro Rd. Apt. E343		Amount of Each Disbursement this Period 50.00	
City Lake Forest State CA Zip Code 92630			
Purpose of Disbursement Refund Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Jean Thieme		Transaction ID: SB28A-79317 Date of Disbursement 10 / 20 / 2005	
Mailing Address 3565 Hollansburg Sampson Rd.		Amount of Each Disbursement this Period 100.00	
City Greenville State OH Zip Code 45331			
Purpose of Disbursement Refund Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	250.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 898 / 1975

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Eleanor Thompson		Transaction ID: SB28A-79318 Date of Disbursement 10 / 20 / 2005
Mailing Address 44 Pollards Mills Road		Amount of Each Disbursement this Period 50.00
City Newport State NH Zip Code 03773	Category/ Type	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Phyllis Todd		Transaction ID: SB28A-79319 Date of Disbursement 10 / 20 / 2005
Mailing Address 3030 SW Macvicar Avenue		Amount of Each Disbursement this Period 100.00
City Topeka State KS Zip Code 66611	Category/ Type	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Mary Veder		Transaction ID: SB28A-79320 Date of Disbursement 10 / 20 / 2005
Mailing Address 2371 Indigo Lane		Amount of Each Disbursement this Period 100.00
City Glenview State IL Zip Code 60026	Category/ Type	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	250.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 899 / 1975

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ann Victor		Transaction ID: SB28A-79321 Date of Disbursement 10 / 20 / 2005
Mailing Address 3502 153rd St.		Amount of Each Disbursement this Period 35.00
City Urbandale	State IA Zip Code 50323	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Kathleen Visovatti		Transaction ID: SB28A-79322 Date of Disbursement 10 / 20 / 2005
Mailing Address 731 Watersedge Dr.		Amount of Each Disbursement this Period 75.00
City Ann Arbor	State MI Zip Code 48105	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Joann Vitarelli		Transaction ID: SB28A-79323 Date of Disbursement 10 / 20 / 2005
Mailing Address 48 Patton Drive		Amount of Each Disbursement this Period 40.00
City Cheshire	State CT Zip Code 06410	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Martha Vorenberg		Transaction ID: SB28A-79324 Date of Disbursement 10 / 20 / 2005
Mailing Address 3935 Acorn Hill Drive		Amount of Each Disbursement this Period 50.00
City Canandaigua	State NY	
Zip Code 14424		
Purpose of Disbursement Refund		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Barbara Warren		Transaction ID: SB28A-79325 Date of Disbursement 10 / 20 / 2005
Mailing Address 3441 W. Darmouth Avenue		Amount of Each Disbursement this Period 100.00
City Denver	State CO	
Zip Code 80236		
Purpose of Disbursement Refund		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Kristine Wendt		Transaction ID: SB28A-79326 Date of Disbursement 10 / 20 / 2005
Mailing Address 3955 Velvet Lake Road		Amount of Each Disbursement this Period 75.00
City Rhinelander	State WI	
Zip Code 54501		
Purpose of Disbursement Refund		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

<p>A. Marilyn Wet</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 106 Pine Shadows Drive</p> <p>City Seabrook State TX Zip Code 77586</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB28A-79327</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="75.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>		

<p>B. Joseph Wiesenfarth</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 5401 Grenning Lane</p> <p>City Madison State WI Zip Code 53705</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB28A-79328</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>		

<p>C. Galen William</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 7 Oyster Shores Road</p> <p>City East Hampton State NY Zip Code 11937</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB28A-79329</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="175.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Val Wilson		Transaction ID: SB28A-79330 Date of Disbursement 10 / 20 / 2005	
Mailing Address 4210 Elva Way		Amount of Each Disbursement this Period 20.00	
City Sacramento State CA Zip Code 95821	Purpose of Disbursement Refund	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Marian Wolfson		Transaction ID: SB28A-79331 Date of Disbursement 10 / 20 / 2005	
Mailing Address 20 Iselin Terrace		Amount of Each Disbursement this Period 50.00	
City Larchmont State NY Zip Code 10538	Purpose of Disbursement Refund	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Marie Young		Transaction ID: SB28A-79332 Date of Disbursement 10 / 20 / 2005	
Mailing Address 194 Crestview Ct.		Amount of Each Disbursement this Period 25.00	
City Watsonville State CA Zip Code 95076	Purpose of Disbursement Refund	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	95.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

<p>A. Full Name (Last, First, Middle Initial) Tillie Yurich</p> <p>Mailing Address 12180 London Grove Court</p> <p>City Moorpark State CA Zip Code 93021</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: SB28A-79333</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="25.00"/></p> <p>Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Sharon Murphy</p> <p>Mailing Address 233 Summit Avenue</p> <p>City Saint Paul State MN Zip Code 55105</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: SB28A-80032</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p> <p>Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Carmen Tawil</p> <p>Mailing Address 4806 Balcones Drive</p> <p>City Austin State TX Zip Code 78731</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: SB28A-80033</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p> <p>Category/Type</p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="175.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Phyllis Kluger		Transaction ID: SB28A-80023 Date of Disbursement 10 / 20 / 2005	
Mailing Address 1307 Acton Street		Amount of Each Disbursement this Period 50.00	
City Berkeley State CA Zip Code 94706	Purpose of Disbursement Refund	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dolores Tomusk		Transaction ID: SB28A-80034 Date of Disbursement 10 / 20 / 2005	
Mailing Address 2931 Clipper Cove		Amount of Each Disbursement this Period 50.00	
City Fort Wayne State IN Zip Code 46815	Purpose of Disbursement Refund	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Debby Kremsdorf		Transaction ID: SB28A-80035 Date of Disbursement 10 / 20 / 2005	
Mailing Address 4172 Combe Way		Amount of Each Disbursement this Period 50.00	
City San Diego State CA Zip Code 92122	Purpose of Disbursement Refund	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 905 / 1975

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Carolyn Hulst		Transaction ID: SB28A-80036 Date of Disbursement 10 / 20 / 2005
Mailing Address 121 Sorrento Drive		Amount of Each Disbursement this Period 25.00
City Holland State MI Zip Code 49423	Purpose of Disbursement Refund Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. William Calhoun		Transaction ID: SB28A-80037 Date of Disbursement 10 / 20 / 2005
Mailing Address 7204 Wellington Drive		Amount of Each Disbursement this Period 500.00
City Knoxville State TN Zip Code 37919	Purpose of Disbursement Refund Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Carolyn Koster		Transaction ID: SB28A-80038 Date of Disbursement 10 / 20 / 2005
Mailing Address 850 Powell Street, Apt. 203		Amount of Each Disbursement this Period 50.00
City San Francisco State CA Zip Code 94108	Purpose of Disbursement Refund Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	575.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 906 / 1975

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ralph Stone		Transaction ID: SB28A-80039 Date of Disbursement 10 / 20 / 2005
Mailing Address 80 Lincoln Avenue		Amount of Each Disbursement this Period 200.00
City Florham Park	State NJ	
Zip Code 07932	Category/Type	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Dale Baker		Transaction ID: SB28A-80040 Date of Disbursement 10 / 20 / 2005
Mailing Address 15814 S 13th Place		Amount of Each Disbursement this Period 50.00
City Phoenix	State AZ	
Zip Code 85048	Category/Type	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Lynn Wagman		Transaction ID: SB28A-80024 Date of Disbursement 10 / 20 / 2005
Mailing Address 1115 Prospect Avenue		Amount of Each Disbursement this Period 50.00
City Elkins Park	State PA	
Zip Code 19027	Category/Type	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 907 / 1975

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Patricia Ryan		Transaction ID: SB28A-80041 Date of Disbursement 10 / 20 / 2005
Mailing Address 17 S Ferris Street		Amount of Each Disbursement this Period 50.00
City Irvington State NY Zip Code 10533	Category/ Type	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Susan Kirby		Transaction ID: SB28A-80025 Date of Disbursement 10 / 20 / 2005
Mailing Address 2675 Reynolds Drive		Amount of Each Disbursement this Period 100.00
City Winston State NC Zip Code 27104	Category/ Type	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Alice Clawson		Transaction ID: SB28A-80026 Date of Disbursement 10 / 20 / 2005
Mailing Address 1980 Alameda Ter		Amount of Each Disbursement this Period 100.00
City San Diego State CA Zip Code 92103	Category/ Type	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	250.00
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 Page

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

A. Shirley Wheeler Full Name (Last, First, Middle Initial) Mailing Address 1730 Glen Meadows Drive City Greeley State CO Zip Code 80631 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-80042 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Barb Perell Full Name (Last, First, Middle Initial) Mailing Address 1120 Conn Ave NW Suite 1100 City Washington State DC Zip Code 20036 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-80043 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 5.00 Category/Type
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C. Jane Tyrrell Full Name (Last, First, Middle Initial) Mailing Address 361 School Street City Watertown State MA Zip Code 02472 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-80044 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 25.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	80.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)

PAGE 909 / 1975

<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)
EMILY's List

A. Betty Armistead Full Name (Last, First, Middle Initial) Mailing Address 56 Valencia Rd City Rockledge State FL Zip Code 32955 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-80045 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Lucinda Bunnen Full Name (Last, First, Middle Initial) Mailing Address 3910 Randall Mill Rd NW City Atlanta State GA Zip Code 30327 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-80046 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 1000.00 Category/Type
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C. Amy Puffer Full Name (Last, First, Middle Initial) Mailing Address 7 Longfellow Rd City Arlington State MA Zip Code 02476 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-80027 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	1100.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 910 / 1975

<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

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)
EMILY's List

A. Carol Farthing Full Name (Last, First, Middle Initial) Mailing Address 406 Dale Drive City Silver Spring State MD Zip Code 20910 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-80028 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 100.00 Category/Type
---	--	--

B. Nancy Maihoff Full Name (Last, First, Middle Initial) Mailing Address 1901 Mitten Street City Dover State DE Zip Code 19901 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-80029 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 250.00 Category/Type
--	--	--

C. Sandra Cummings Full Name (Last, First, Middle Initial) Mailing Address 3804 Sweeten Creek Rd City Chapel Hill State NC Zip Code 27514 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB28A-80030 Date of Disbursement 10 / 20 / 2005 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	400.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 911 / 1975

<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)
EMILY's List

<p>A. Full Name (Last, First, Middle Initial) Lee Estes</p>		<p>Transaction ID: SB28A-80031 Date of Disbursement</p>	
<p>Mailing Address 1036 S Los Robles Ave</p>		<p>10 / 20 / 2005</p>	
<p>City Psadena State CA Zip Code 91106</p>	<p>Amount of Each Disbursement this Period</p> <p>25.00</p>		
<p>Purpose of Disbursement Refund</p>	<p>Category/Type</p>		
<p>Candidate Name</p>	<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>		
<p>State: District:</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>B. Full Name (Last, First, Middle Initial) Kathryn Luwe</p>		<p>Transaction ID: SB28A-80047 Date of Disbursement</p>	
<p>Mailing Address 1909 S Nevada Street</p>		<p>10 / 20 / 2005</p>	
<p>City Oceanside State CA Zip Code 92054</p>	<p>Amount of Each Disbursement this Period</p> <p>10.00</p>		
<p>Purpose of Disbursement Refund</p>	<p>Category/Type</p>		
<p>Candidate Name</p>	<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>		
<p>State: District:</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

SUBTOTAL of Disbursements This Page (optional) ►

35.00

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

12200.56

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)

PAGE 912 / 1975

<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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Susanna Supalla Full Name (Last, First, Middle Initial) Mailing Address 920 Highland Ave City Rochester State NY Zip Code 14620 Purpose of Disbursement In Kind Campaign Consultants Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB29-78947 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 1266.72 Category/Type NC Dem State Comm
--	--	---

B. Whitney Kemp Full Name (Last, First, Middle Initial) Mailing Address 2615 Waugh Drive #222 City Houston State TX Zip Code 77006 Purpose of Disbursement In Kind Campaign Consultants Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB29-78948 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 633.36 Category/Type A Parker Controller Houston TX
--	--	---

C. Whitney Kemp Full Name (Last, First, Middle Initial) Mailing Address 2615 Waugh Drive #222 City Houston State TX Zip Code 77006 Purpose of Disbursement In Kind Campaign Consultants Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB29-78949 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 633.36 Category/Type S Lovell City Council Houston TX
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SUBTOTAL of Disbursements This Page (optional) ▶	2533.44
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)

PAGE 913 / 1975

<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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. EMILY's List - Non-Federal #2		Transaction ID: SB29-79431 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 1120 Connecticut Ave NW Suite 1100		Amount of Each Disbursement this Period 100.00
City Washington State DC Zip Code 20036	Category/ Type	
Purpose of Disbursement Transfer to Non-Federal Fund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Sam Clar Office orig reported 09/02/05 line 15

Full Name (Last, First, Middle Initial) B. EMILY's List Non-Federal #3		Transaction ID: SB29-79432 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 1120 Connecticut Ave NW Suite 1100		Amount of Each Disbursement this Period 1385.00
City Washington State DC Zip Code 20036	Category/ Type	
Purpose of Disbursement Transfer to Non-Federal Fund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	J Honig contrib orig report 09/11/05

Full Name (Last, First, Middle Initial) C. Whitney Kemp		Transaction ID: SB29-79553 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 2615 Waugh Drive #222		Amount of Each Disbursement this Period 41.00
City Houston State TX Zip Code 77006	Category/ Type	
Purpose of Disbursement In Kind Health Insurance		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	A Parker Controller Houston TX

SUBTOTAL of Disbursements This Page (optional) ▶	1526.00
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 Page

FOR LINE NUMBER:
(check only one)

PAGE 914 / 1975

<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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Whitney Kemp		Transaction ID: SB29-79554 Date of Disbursement 10 / 27 / 2005	
Mailing Address 2615 Waugh Drive #222		Amount of Each Disbursement this Period 41.00	
City Houston State TX Zip Code 77006	Purpose of Disbursement In Kind Health Insurance		
Candidate Name	Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ S Lovell City Council Houston TX		

Full Name (Last, First, Middle Initial) B. EMILY's List Non-Federal #1		Transaction ID: SB29-792572 Date of Disbursement 10 / 27 / 2005	
Mailing Address 1120 Connecticut Ave NW Suite 1100		Amount of Each Disbursement this Period 1300.00	
City Washington State DC Zip Code 20036	Purpose of Disbursement Transfer to Non-Federal Fund		
Candidate Name	Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Orig contributor S Boyles		

SUBTOTAL of Disbursements This Page (optional)

1341.00

TOTAL This Period (last page this line number only)

5400.44

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

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

FOR LINE NUMBER: PAGE 915 / 1975
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Louisa Abney-Babcock

Mailing Address 1607 Gravel Pike

City State Zip Code
Perkiomenville PA 18074

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

Name of Employer Occupation
Occupation REQUESTED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845699

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Mrs. Elena P. Abrahams

Mailing Address 7 North Street

City State Zip Code
Old Greenwich CT 06870

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

Name of Employer Occupation
Greenwich, CT Board of Education Substitute Teacher/Tutor

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1839206

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Ms. Nina Dodge Abrams

Mailing Address 25520 Sherwood

City State Zip Code
Huntington Woods MI 48070

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

Name of Employer Occupation
Abrams, Yu and Associates Attorney
PC

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 5

Transaction ID: 1843715

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► 1225.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 916 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Eleanor D. Acheson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 425 8th Street, NW #1129		Transaction ID: 1845227
City State Zip Code Washington DC 20004	Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C		
Name of Employer US department of Justice	Occupation Assistant Attorney General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Ms. Nancy A. Adams		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 14518 Shaker Blvd.		Transaction ID: 1841498
City State Zip Code Shaker Heights OH 44120	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

Full Name (Last, First, Middle Initial) C. Ms. Susan S. Addiss		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 8 Spring Road		Transaction ID: 1843241
City State Zip Code Branford CT 06405	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Public Health Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional) ▶	550.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 917 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mrs. Jill Adler		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 230 Val Halla Drive		Transaction ID: 1836725
City State Zip Code Solvang CA 93463	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Dr. Sucheta S. Ahlawat		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 1 Muncee Court		Transaction ID: 1842353
City State Zip Code Holmdel NJ 07733	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Professor	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Mrs. F. Ailes		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 1191 Needle Point Drive		Transaction ID: 1840195
City State Zip Code Cheboygan MI 49721	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 918 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. William G. Albertson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 55075 Main Road		Transaction ID: 1842820
City State Zip Code Southhold NY 11971	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) B. Ms. Mary B. Alexander		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 5920 Flint Ridge Drive		Transaction ID: 1840225
City State Zip Code Flower Mound TX 75028	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) C. Ms. Janet H. Allen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 620 Sugarberry Road		Transaction ID: 1845045
City State Zip Code Chapel Hill NC 27514	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1800.00	

SUBTOTAL of Receipts This Page (optional) ▶	1070.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 919 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. David Allen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 684 W. Harriet Street		Transaction ID: 1842739
City State Zip Code Altadena CA 91001	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Costco Wholesale	Occupation Assistant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

Full Name (Last, First, Middle Initial) B. Ms. Martha B. Alworth		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 415 Hawthorne Road		Transaction ID: 1840833
City State Zip Code Duluth MN 55812	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation CIVIC ACTIVIST	
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) C. Ms. Nancy E Anderson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 23 Teresa Road		Transaction ID: 1838590
City State Zip Code Hopkinton MA 01748	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer retired	Occupation writer/organizer	
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) ▶	325.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 920 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. A. Sigrid Anderson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 5	
Mailing Address 5850 Kiev Place		Transaction ID: 1843767	
City State Zip Code Dulles VA 20189	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer USAID	Occupation Public Health		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

Full Name (Last, First, Middle Initial) B. Mr. Clarence Andresen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 1228 Rossmoor Pkwy Apt 261		Transaction ID: 1842232	
City State Zip Code Walnut Creek CA 94595	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Dr. Emily S Andrews		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 5	
Mailing Address 4817 V Street NW		Transaction ID: 1834943	
City State Zip Code Washington DC 20007	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer US Government	Occupation Economist		
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) ▶	500.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 921 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Carmen G. Anthony		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 301 East 69th Street, 11G		Transaction ID: 1840898
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Writer	
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. Ms. Rima D. Apple		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 2013 Madison Street		Transaction ID: 1843381
City State Zip Code Madison WI 53711	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer University of Wisconsin	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) C. Ms. Judy Aptekar		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 26000 Scarff Way		Transaction ID: 1845057
City State Zip Code Los Altos Hills CA 94022	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation Travel Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 922 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Rosemary E. Armstrong		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 3415 West Mullen Avenue		Transaction ID: 1842677	
City Tampa	State FL	Zip Code 33609	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) B. Ms. Peg Arnold		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 13309 Chestnut Oak Drive		Transaction ID: 1839763	
City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			
Name of Employer Montgomery Public Schools	Occupation SEIA		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

Full Name (Last, First, Middle Initial) C. Dr. James R. Arnold		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 2425 Ellentown Road		Transaction ID: 1843647	
City La Jolla	State CA	Zip Code 92037	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional) ▶	1270.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 923 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Sandra Aronberg, M.D.		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 120 Spalding Drive, # 330		Transaction ID: 1840894
City State Zip Code Beverly Hills CA 90212	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Sandra Aronberg, MD, MPH	Occupation Physician	
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. Ms. Ami Ann Aronson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5
Mailing Address 6917 Anchorage Drive		Transaction ID: 1837854
City State Zip Code Bethesda MD 20817	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Mrs. Marjorie A. Atkinson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 1045 Key Route Blvd		Transaction ID: 1839886
City State Zip Code Albany CA 94706	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Albany USD	Occupation Teacher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	

SUBTOTAL of Receipts This Page (optional) ▶	635.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 924 / 1975						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Lee D. Aurich		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 5108 Cochrane Ave		Transaction ID: 1842485	
City State Zip Code Oakland CA 94618	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Scientific Resources	Occupation Manager		
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) B. Mr. Richard Bachenheimer		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 5	
Mailing Address 91 Southwind Circle		Transaction ID: 1843712	
City State Zip Code Richmond CA 94804	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
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. Mr. Grover Bagby		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 3738 SW Council Crest Drive		Transaction ID: 1842132	
City State Zip Code Portland OR 97239	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

SUBTOTAL of Receipts This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 925 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Carole I. Bailis

Mailing Address 1935 Lafayette Road

City Gladwyne State PA Zip Code 19035

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

Name of Employer Self Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 355.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 5

Transaction ID: 1840857

Amount of Each Receipt this Period
85.00

B. Full Name (Last, First, Middle Initial)
Ms. Diana Bain

Mailing Address 2657 Hemenway Road

City Bridport State VT Zip Code 05734

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

Name of Employer EMC Occupation Computer Programmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845671

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Ms. Jean Baker

Mailing Address 22R Vernon Street

City Brookline State MA Zip Code 02446

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836252

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional)	▶	335.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 926 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Carol Baker		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5
Mailing Address 306 Brentford Road		Transaction ID: 1837995
City State Zip Code Haverford PA 19041	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation Investor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) B. Ms. Coleen A. Baker		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 902 N. Market Street Apt 1014		Transaction ID: 1841074
City State Zip Code Wilmington DE 19801	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Lincoln Financial Group Occupation Financial Services		
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) C. Mrs. Martha D. Baldwin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5
Mailing Address 190 East 72nd Street		Transaction ID: 1841900
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 927 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Cynthia B. Baldwin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 29 Chestnut Woods Road		Transaction ID: 1840542
City State Zip Code Redding CT 06896	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer General Reinsurance Corporation	Occupation Reinsurance Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Ms. Gwen E. Ball		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 311 S. Commerce Street		Transaction ID: 1841067
City State Zip Code Natchez MS 39120	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Professor/Writer	
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) C. Ms. Margaret M. Ballard		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address 5300 Holmes Run Pky Ph 4		Transaction ID: 1837728
City State Zip Code Alexandria VA 22304	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer HDR Engineering	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 928 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Donald H. Ballou		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 256 Weybridge Street		Transaction ID: 1844330
City State Zip Code Middlebury VT 05753	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Ms. Virginia Bandura		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 820 San Francisco Court		Transaction ID: 1837479
City State Zip Code Stanford CA 94305	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	

Full Name (Last, First, Middle Initial) C. Ms. Kathryn E. Barnard		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 11508 Durland Avenue NE		Transaction ID: 1838707
City State Zip Code Seattle WA 98125	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Univ. of Washington Professor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 515.00	

SUBTOTAL of Receipts This Page (optional) ▶	260.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 929 / 1975
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Dr. John D. Barnes

Mailing Address 7710 Chatham Road

City State Zip Code
Chevy Chase MD 20815

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 10 / 2005

Transaction ID: 1837626

Amount of Each Receipt this Period
350.00

B. Full Name (Last, First, Middle Initial)
Ms. Tina Barnett

Mailing Address 607 West End Ave # 15A

City State Zip Code
New York NY 10024

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

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 11 / 2005

Transaction ID: 1837992

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Ms. Eleanor C. Barrett

Mailing Address M M 5 Lane

City State Zip Code
Garden MI 49835

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 17 / 2005

Transaction ID: 1838971

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► **630.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 930 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Robert H. Bates		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 7 Riverwoods Driver Unit C208		Transaction ID: 1841500
City State Zip Code Exeter NH 03833	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1250.00	

Full Name (Last, First, Middle Initial) B. Mr. Stephen R. Baum		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 111 Newell Avenue		Transaction ID: 1839406
City State Zip Code Neeham MA 02492	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Software Engineer Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Dr. Carolyn Baum		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 6314 S. Rosebury Avenue Apt. 3W		Transaction ID: 1839530
City State Zip Code Saint Louis MO 63105	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Professor Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	550.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 931 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Elaine R. Bayus		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address 117 Requa Road		Transaction ID: 1844801	
City State Zip Code Piedmont CA 94611		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Orrick, Herrington & Sutcliffe Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Ms. Kathleen A. Beaulieu		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 1321 No. Sutton Place		Transaction ID: 1841091	
City State Zip Code Chicago IL 60610		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Requested			
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) C. Mr. Curt F. Beck		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 11 September Rd.		Transaction ID: 1841934	
City State Zip Code Storrs CT 06268		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	1600.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 932 / 1975
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Catherine E. Beck

Mailing Address 23 Vallecito Road

City State Zip Code
Santa Fe NM 87506

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

Name of Employer Occupation
Smith Barney Second Vice President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 15 / 2005

Transaction ID: 1840982

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ms. Rachel Beck

Mailing Address 4215 Montgomery Ave

City State Zip Code
Davis CA 95616

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

Name of Employer Occupation
Carlont, Disaaté & Freude Attorney

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 11 / 2005

Transaction ID: 1837973

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Ms. Diana Beck

Mailing Address 5725 Lake Mendota Dr

City State Zip Code
Madison WI 53705

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

Name of Employer Occupation
self homemaker

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 17 / 2005

Transaction ID: 1839748

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► **530.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 933 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Susan Beckerman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 32 West 88th Street		Transaction ID: 1840971
City State Zip Code New York NY 10024	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 4000.00	

Full Name (Last, First, Middle Initial) B. Dr. Helen Bee		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 81 Caprice Lane, PO Box 1076		Transaction ID: 1843407
City State Zip Code Eastsound WA 98245	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Ms. Nancy Beeuwkes		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 1360 Monument St		Transaction ID: 1841412
City State Zip Code Concord MA 01742	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Nurse Aggregate Year-to-Date ▼ 250.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 934 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Prudence R. Beidler		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 20 S. Stone Gate Road		Transaction ID: 1842285
City State Zip Code Lake Forest IL 60045	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer None Occupation Homemaker/Volunteer		
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. Ms. Clelia C. Belfrom		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address 2409 Sunburst Court		Transaction ID: 1836417
City State Zip Code Wilmington NC 28411	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
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. Mrs. Sanra J. Belkind		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 18151 NE 31 Court, # 817		Transaction ID: 1842339
City State Zip Code Aventura FL 33160	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional) ▶	1275.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 935 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Francis S Bellezza		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 161 Morris Avenue		Transaction ID: 1843049
City Athens State OH Zip Code 45701	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Ohio University Occupation Educator	Aggregate Year-to-Date ▼ 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Sue Bell-Friedman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address 2544 Brandermill Place		Transaction ID: 1835619
City Charlottesville State VA Zip Code 22911	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer TJPED Occupation Eco. Dev.	Aggregate Year-to-Date ▼ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Judith E. Bendich		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 1754 N.E. 62nd Street		Transaction ID: 1842280
City Seattle State WA Zip Code 98115	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation Lawyer	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1100.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 936 / 1975
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Betty Bengtson

Mailing Address 1280 E. Paseo Pavon

City State Zip Code
Tucson AZ 85718

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: 1837726

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Robert B. Benjamin

Mailing Address 4300 W. River Pkwy, Apt. 602

City State Zip Code
Minneapolis MN 55406

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838402

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. Magnus B. Bennedsen

Mailing Address 11 Las Mesas Path

City State Zip Code
Orinda CA 94563

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842244

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► 300.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 937 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Lois Bennett		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 1630 Kenilworth Street		Transaction ID: 1841033
City State Zip Code Sarasota FL 34231	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Dianne Bennett		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 5
Mailing Address 2 Mayfair Lane		Transaction ID: 1837591
City State Zip Code Buffalo NY 14201	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer self-employed Occupation attorney	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Pamela Benson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 5359 Nevada Avenue NW		Transaction ID: 1844080
City State Zip Code Washington DC 20015	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Sidwell Friends School Teacher	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1450.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 938 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Beth Bentley		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 8762 25th Place NE		Transaction ID: 1839207	
City Seattle	State WA	Amount of Each Receipt this Period 30.00	
Zip Code 98115			
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		

Full Name (Last, First, Middle Initial) B. Ms. Jayne Bentzen		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 2 / 2 0 0 5	
Mailing Address 137 Riverside Drive		Transaction ID: 1838253	
City New York	State NY	Amount of Each Receipt this Period 5000.00	
Zip Code 10024			
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation artist/gardener/homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) C. Ms. Nancy Beresford		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address 1317 Alexandria Avenue		Transaction ID: 1836733	
City Alexandria	State VA	Amount of Each Receipt this Period 150.00	
Zip Code 22308			
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
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) ▶	5180.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 939 / 1975
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Marjorie Berk

Mailing Address 7 E 14th Street, Apt.1117

City State Zip Code
New York NY 10003

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
440.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1840231

Amount of Each Receipt this Period
85.00

B. Full Name (Last, First, Middle Initial)
Ms. Mary Berkebile

Mailing Address 1717 West Blvd.

City State Zip Code
Rapid City SD 57701

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1844324

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Ms. Martha Berlin

Mailing Address 3510 Livingston St. NW

City State Zip Code
Washington DC 20015

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

Name of Employer Occupation
Westat, Inc. VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842817

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **385.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 940 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Susan Dale Berrington		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 5920 Granby Road		Transaction ID: 1842313
City State Zip Code Derwood MD 20855	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Howard County Public Schools	Occupation Teacher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

B. Full Name (Last, First, Middle Initial) Dr. Marcelle Bessman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 4417 Port Arthur Road		Transaction ID: 1845216
City State Zip Code Jacksonville FL 32224	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Jacksonville University	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

C. Full Name (Last, First, Middle Initial) Mrs. Jenny L. Bethune		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 19306 South Tajauta Avenue		Transaction ID: 1841024
City State Zip Code Carson CA 90746	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Los Angeles County	Occupation Law Enforcement	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

SUBTOTAL of Receipts This Page (optional) ▶	350.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 941 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Lieselotte N. Betterman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 1506 Willow Lane		Transaction ID: 1841998	
City State Zip Code Mt. Prospect IL 60056	Amount of Each Receipt this Period 210.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 420.00		

Full Name (Last, First, Middle Initial) B. Dr. Edna Raye Bick		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 9468 Beecher Road		Transaction ID: 1840858	
City State Zip Code Flushing MI 48433	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Genesee Regional Medical Center Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. Ms. Melinda J. Bickerstaff		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5	
Mailing Address 4817 Linnean Avenue NW		Transaction ID: 1837625	
City State Zip Code Washington DC 20008	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Bristol-Myers Squibb Company Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Vice President Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	610.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 942 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. Stanley Bier		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address PO Box 192		Transaction ID: 1841948	
City Colonia	State NJ	Zip Code 07067	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00		

B. Full Name (Last, First, Middle Initial) Mrs. Marion M. Bierwirth		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 300 Albro Lane		Transaction ID: 1845614	
City Lawrence	State NY	Zip Code 11559	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2100.00		

C. Full Name (Last, First, Middle Initial) Ms. Lynn M. Billington		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 401 N Forest Street		Transaction ID: 1838576	
City Bellingham	State WA	Zip Code 98225	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
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) ▶	1075.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 943 / 1975
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Joan A. Binkow

Mailing Address 3530 W. Huron River Drive

City State Zip Code
Ann Arbor MI 48103

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

Name of Employer Occupation
6TN Industries T.V. Executive

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

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

Transaction ID: 1837747

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Benjamin Lee Bird

Mailing Address PO Box 356

City State Zip Code
Flint Hill VA 22627

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

Name of Employer Occupation
Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	0	5

Transaction ID: 1845030

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mr. Robert W. Birge

Mailing Address 1 Greenwood Common

City State Zip Code
Berkeley CA 94708

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

Name of Employer Occupation
Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 3000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	0	5

Transaction ID: 1845061

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **2050.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 944 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Bonnie Birk		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 216 Endfield Circle		Transaction ID: 1842036	
City State Zip Code Waukesha WI 53186	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Student Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Ms. Mary Black		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 3800 E. McGilvra Street		Transaction ID: 1841467	
City State Zip Code Seattle WA 98112	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) C. Mr. Martin Blank, Jr.		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 1364 Warner Avenue		Transaction ID: 1844421	
City State Zip Code Los Angeles CA 90024	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 945 / 1975						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Ann Bley		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 31080 McKinney Drive		Transaction ID: 1845650	
City State Zip Code Franklin MI 48025	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. C			
Name of Employer US Army	Occupation Program analyst		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. Ms. Chela Blitt		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 1183 Keeler Avenue		Transaction ID: 1841005	
City State Zip Code Berkeley CA 94708	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Journalist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

Full Name (Last, First, Middle Initial) C. Ms. Jean F. Bloch		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 1705 Angelo Drive		Transaction ID: 1844282	
City State Zip Code Beverly Hills CA 90210	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	575.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 946 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Valerie Block		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 50 Glenwood Rd		Transaction ID: 1843210	
City State Zip Code Montclair NJ 07043	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed	Occupation Writer		
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) B. Ms. Elaine Blodgett		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 5090 Arroyo Lane, # 103		Transaction ID: 1842209	
City State Zip Code Simi Valley CA 93063	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Ms. Louise Blondin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 3136 Dapplegray Ln		Transaction ID: 1839867	
City State Zip Code Norco CA 92860	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer County of Orange	Occupation deputy probation officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	370.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 947 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Judith G. Bloom		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 315 Barbara Way		Transaction ID: 1842099
City Hillsborough State CA Zip Code 94010	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer JCF Occupation Development Officer	Aggregate Year-to-Date ▼ 750.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Linda S. Boatman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5
Mailing Address 155 N. Harbor Drive, # 2109		Transaction ID: 1838386
City Chicago State IL Zip Code 60601	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer self-employed Occupation interior designer	Aggregate Year-to-Date ▼ 2000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Barbara Boberg		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 41 Lake Avenue		Transaction ID: 1840433
City Piedmont State CA Zip Code 94611	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1275.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 948 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Jordan Bock		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address P.O. Box 451153		Transaction ID: 1841016	
City Miami	State FL	Zip Code 33245	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Jordan Bock, Inc.	Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) B. Ms. Barbara A. Bodin		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 15340 Quarry Road		Transaction ID: 1841476	
City Lake Oswego	State OR	Zip Code 97035	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1350.00		

Full Name (Last, First, Middle Initial) C. Mrs. Mary P. Bogan		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 1255 N Gulfstream Avenue Apt. 904		Transaction ID: 1842720	
City Sarasota	State FL	Zip Code 34236	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 949 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Aimee B. Boone		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 7127 Casa Loma Ave		Transaction ID: 1839654
City State Zip Code Dallas TX 75214	Amount of Each Receipt this Period 33.00	
FEC ID number of contributing federal political committee. C		
Name of Employer George Washington University	Occupation graduate student	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 296.50	

Full Name (Last, First, Middle Initial) B. Ms. Elaine S. Booth		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 3 Winterbranch		Transaction ID: 1836657
City State Zip Code Irvine CA 92604	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation homemaker/activist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1375.00	

Full Name (Last, First, Middle Initial) C. Ms. Elaine S. Booth		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 3 Winterbranch		Transaction ID: 1840849
City State Zip Code Irvine CA 92604	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation homemaker/activist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1375.00	

SUBTOTAL of Receipts This Page (optional) ▶	483.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 950 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Karen J. Bopp		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address 6505 Lily Dhu Lane		Transaction ID: 1836648	
City Falls Church	State VA	Zip Code 22044	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 775.00		

Full Name (Last, First, Middle Initial) B. Ms. Cindy Bordelon		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 175 N. Harbor Drive, Apt. 5401		Transaction ID: 1841053	
City Chicago	State IL	Zip Code 60601	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Federal Reserve	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1150.00		

Full Name (Last, First, Middle Initial) C. Ms. Sari M. Boren		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 189 Walden Street Apt. 2		Transaction ID: 1838538	
City Cambridge	State MA	Zip Code 02140	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer The Computer Museum	Occupation Exhibits Educator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 951 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Diane Bostow		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 801 Gracelyn Court		Transaction ID: 1840923	
City Blacksburg	State VA	Zip Code 24060	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Ms. Hara Ann Bouganim		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5	
Mailing Address 305 East Mason Avenue		Transaction ID: 1841265	
City Alexandria	State VA	Zip Code 22301	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer Met Life	Occupation Acct. Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) C. Ms. Nancy M. Boughn		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 2071 Capstone Circle		Transaction ID: 1839538	
City Herndon	State VA	Zip Code 20170	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer Cisco Systems	Occupation Executive Assistant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

SUBTOTAL of Receipts This Page (optional) ▶	425.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 952 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Nancy B. Bourne		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 1115 West California Avenue		Transaction ID: 1840862	
City State Zip Code Mill Valley CA 94941	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Miller Brown & Dannis	Occupation Attorney		
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. Ms. Avis Boutell		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 50 Bernal Avenue		Transaction ID: 1845597	
City State Zip Code Moss Beach CA 94038	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
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) C. Ms. Carol L. Bouville		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 16401 Henry Drive		Transaction ID: 1836692	
City State Zip Code Gaithersburg MD 20877	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer self	Occupation artist		
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) ▶	900.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 953 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Barbara Bovee		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address PO Box 233		Transaction ID: 1840344
City State Zip Code Boulder Creek CA 95006	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Michele Bowers		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 85 Ridge Rd		Transaction ID: 1839985
City State Zip Code Fairfax CA 94930	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Computer Programmer	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Barbara Braak		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 3829 82nd Street		Transaction ID: 1844806
City State Zip Code Des Moines IA 50322	Amount of Each Receipt this Period 70.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Nurse	Aggregate Year-to-Date ▼ 290.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	145.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 954 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Joan Braderman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 36 Fruit Street		Transaction ID: 1839614	
City Northampton	State MA	Zip Code 01060	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C			
Name of Employer Hampshire College	Occupation Professor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. Ms. Barbara J. Bradstock		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 620 Highland Drive		Transaction ID: 1842338	
City Point Roberts	State WA	Zip Code 98281	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer Sacramento Unified SD	Occupation School Nurse Admin.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Ms. Barbara J. Bradstock		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address 620 Highland Drive		Transaction ID: 1845074	
City Point Roberts	State WA	Zip Code 98281	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer Sacramento Unified SD	Occupation School Nurse Admin.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional)	130.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 955 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Bonnie Brae		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 603 Ocean Avenue #5 North		Transaction ID: 1844086
City State Zip Code Santa Monica CA 90402	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 3000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Martha Brandriff		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 601 W Holly Avenue, Apt. 63		Transaction ID: 1841222
City State Zip Code Pitman NJ 08071	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Martha Brandriff		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 601 W Holly Avenue, Apt. 63		Transaction ID: 1839263
City State Zip Code Pitman NJ 08071	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1120.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 956 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Frances Brandt		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 112 Ivy Lane		Transaction ID: 1840632
City State Zip Code Lido Beach NY 11561	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Donna D. Brasley		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 35 Hurdle Fence Drive		Transaction ID: 1840436
City State Zip Code Avon CT 06001	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Actuary	Aggregate Year-to-Date ▼ 590.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Jill E. Braufman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 10 Gracie Square		Transaction ID: 1842103
City State Zip Code New York NY 10028	Amount of Each Receipt this Period 4000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Textile/Pillow Dealer	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	4185.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 957 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Clotean H. Brayfield		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 736 Palisado Avenue		Transaction ID: 1840868
City Windsor State CT Zip Code 06095	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
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. Ms. Lydia Breer		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 1981 Regalview Landing		Transaction ID: 1840643
City Dacula State GA Zip Code 30019	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

Full Name (Last, First, Middle Initial) C. Ms. Alana Brenner		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 1330 Radclyffe Rd		Transaction ID: 1837095
City Orlando State FL Zip Code 32804	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Attorney	
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) ▶	1335.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER: PAGE 958 / 1975
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Susan Z. Breyer

Mailing Address 270 Family Farm Rd

City State Zip Code
Woodside CA 94062

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

Name of Employer Self Occupation
Self Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: 1837712

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ms. Marilyn F. Brill

Mailing Address 119 S 3rd Street

City State Zip Code
Lewisburg PA 17837

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

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1844364

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Ms. Elyse Arnow Brill

Mailing Address 12 Fancher Rd.

City State Zip Code
Pound Ridge NY 10576

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

Name of Employer Swig Weiler & Arnow Occupation
Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836653

Amount of Each Receipt this Period
750.00

SUBTOTAL of Receipts This Page (optional) ► **1100.00**

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

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

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

FOR LINE NUMBER: PAGE 959 / 1975
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Herbert Brinberg

Mailing Address 115 E. 87th Street, # 14B

City State Zip Code
New York NY 10128

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

Name of Employer Self Occupation
Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3950.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1845059

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Ms. Janet Brody

Mailing Address 506 Conshohocken State Road

City State Zip Code
Narberth PA 19072

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

Name of Employer Park Plessort, Inc. Occupation
NHA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1838757

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. Frank Brosius

Mailing Address 2569 Bunker Hill Road

City State Zip Code
Ann Arbor MI 48105

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1840200

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► 1125.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 960 / 1975 (check only one) <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Tonia W. Brown Mailing Address 3525 N San Carlos Drive City State Zip Code Eloy AZ 85231 FEC ID number of contributing federal political committee. C	Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5 Transaction ID: 1841955 Amount of Each Receipt this Period 25.00
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 705.00	

B. Full Name (Last, First, Middle Initial) Peggy R. Browning Mailing Address 7373 E. 29th Street N # E205 City State Zip Code Wichita KS 67226 FEC ID number of contributing federal political committee. C	Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5 Transaction ID: 1836445 Amount of Each Receipt this Period 75.00
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00	

C. Full Name (Last, First, Middle Initial) Ms. Ruth E. Bruch Mailing Address 52 Brinker Road City State Zip Code Barrington IL 60010 FEC ID number of contributing federal political committee. C	Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5 Transaction ID: 1841326 Amount of Each Receipt this Period 250.00
Name of Employer Occupation Lucent Technologies Executive 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) ▶	350.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER: PAGE 961 / 1975
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Elizabeth Bryan

Mailing Address 8102 Highwood Drive, # B139

City State Zip Code
Bloomington MN 55438

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 0 5

Transaction ID: 1841839

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Ms. K. Isabelle Buckley

Mailing Address 2409 Stafford Avenue

City State Zip Code
Raleigh NC 27607

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843367

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Ms. Judy M Bullwinkle

Mailing Address 213 Colonial Ct

City State Zip Code
Little Rock AR 72205

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

Name of Employer Occupation
US Army Corps of Engineers Librarian

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1839414

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► 145.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 962 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Judge Ruth C. Burg		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 4200 Massachusetts Ave NW Apt 914		Transaction ID: 1841282
City Washington State DC Zip Code 20016	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation Mediator/Arbitrator	Aggregate Year-to-Date 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Ms. Helen M. Burgener		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 1101 Sunrise Lane		Transaction ID: 1837492
City Estes Park State CO Zip Code 80517	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. Ms. Christa I. Burgoyne		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 2828 Forest Ave		Transaction ID: 1842879
City Berkeley State CA Zip Code 94705	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation prop. mgmt.	Aggregate Year-to-Date 750.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional)	850.00
TOTAL This Period (last page this line number only) .....	.....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 963 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Katherine Burik		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 3025 Croydon Drive NW		Transaction ID: 1840932
City State Zip Code Canton OH 44718	Amount of Each Receipt this Period 65.00	
FEC ID number of contributing federal political committee. C		
Name of Employer MAC Inc.	Occupation human resources	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 295.00	

Full Name (Last, First, Middle Initial) B. Ms. Cheryl C. Burke		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 211 Great Falls Street		Transaction ID: 1839115
City State Zip Code Falls Church VA 22046	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer WMATA	Occupation General Counsel	
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. Ms. Kellye Burke		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 2426-B West Main Street		Transaction ID: 1844642
City State Zip Code Houston TX 77098	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Consultant	
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) ▶	340.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 964 / 1975						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Susan L. Burke		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 3815 The Oak Rd		Transaction ID: 1841012	
City Philadelphia	State PA	Zip Code 19129	Amount of Each Receipt this Period 750.00
FEC ID number of contributing federal political committee. C			
Name of Employer Mintz Levin	Occupation Member		
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. Mr. William T. Burke		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5	
Mailing Address 7735 57th Avenue NE		Transaction ID: 1837904	
City Seattle	State WA	Zip Code 98115	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00		

Full Name (Last, First, Middle Initial) C. Ms. Beth Burnam		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5	
Mailing Address 2662 Santa Maria Road		Transaction ID: 1838264	
City Topanga	State CA	Zip Code 90290	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self		Occupation Investor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional) ▶	5850.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 965 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Nadene Burness		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5	
Mailing Address 3003 Bunfill Drive		Transaction ID: 1845184	
City State Zip Code Santa Maria CA 93455	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 400.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Joyce Bush		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 40 Kendrick Rd.		Transaction ID: 1842844	
City State Zip Code E. Harwich MA 02645	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 475.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Geri Busse		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 3200 Carbon Place Apt. 201		Transaction ID: 1838770	
City State Zip Code Boulder CO 80301	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Accountant	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	230.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 966 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. June A. Butler		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 196 Taylor Road		Transaction ID: 1843053
City State Zip Code Chehalis WA 98532	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Aggregate Year-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) B. Ms. Wane Butler		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 795 Newland Court		Transaction ID: 1844270
City State Zip Code Boulder CO 80303	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) C. Ms. Susan E. Butler-Siler		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5
Mailing Address 464 Windgate Road		Transaction ID: 1841852
City State Zip Code Sacramento CA 95864	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) ▶	1300.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 967 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Colleen Palmer Button

Mailing Address 1518 Stuart Road

City Herndon State VA Zip Code 20170

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

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1840473

Amount of Each Receipt this Period
21.00

B. Full Name (Last, First, Middle Initial)
Ms. Mary Beth Cahill

Mailing Address 4701 Connecticut Ave. NW Apt. 507

City Washington State DC Zip Code 20008

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

Name of Employer Occupation Executive Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842707

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Rafael Calabria

Mailing Address PO Box 550459

City Gastonia State NC Zip Code 28055

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

Name of Employer Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838392

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	▶	1271.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 968 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Karol A. Callaway		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 3027 Esperanza Drive		Transaction ID: 1842116
City State Zip Code Concord CA 94519	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Basic American Foods	Occupation Programmer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Ms. Barbara L. Cambridge		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 4501 Connecticut Ave., NW Apt. 603		Transaction ID: 1839008
City State Zip Code Washington DC 20008	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Indiana University	Occupation Administrator	
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. Ms. Judith E. Campbell		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 54 Samson Avenue		Transaction ID: 1842303
City State Zip Code Madison NJ 07940	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer New York Life Insurance Co.	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) ▶	1225.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 969 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Silvia Cancio		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 445 Ventura Place		Transaction ID: 1845089
City State Zip Code Veron Beach FL 32963	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Relmax Unlimited	Occupation Realtor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Ms. Angelique Cannon		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 7209 Flower Tuft Court		Transaction ID: 1841038
City State Zip Code Springfield VA 22153	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation REQUESTED	
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) C. Dr. Frances C. Cannon		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 7410 NW 131st Street		Transaction ID: 1838577
City State Zip Code Gainesville FL 32653	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
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) ▶	475.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 970 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Barbara Caparulo		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 87 Five Mile River Road		Transaction ID: 1845207
City State Zip Code Putnam CT 06260	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Institute of Prof Psych	Occupation Admin/Psychologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) B. Mr. Gaylord Capes		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 11 Whitehaven Way		Transaction ID: 1844396
City State Zip Code Lewes DE 19958	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 535.00	

Full Name (Last, First, Middle Initial) C. Ms. Colleen M. Carey		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 7661 Bush Lake Drive		Transaction ID: 1842140
City State Zip Code Bloomington MN 55438	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer The Cornerstone Group	Occupation real estate development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) ▶	1200.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 971 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Cynthia S. Carlisle		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 221 E 13th Street		Transaction ID: 1840935
City State Zip Code Tipton IA 52772	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer U of Northern CO	Occupation Professor	
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. Dr. Donna M. Carlon		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 1905 Edgewood Drive		Transaction ID: 1839768
City State Zip Code Edmond OK 73013	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		
Name of Employer University of Central Ok-ahoma	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 490.00	

Full Name (Last, First, Middle Initial) C. Mr. Rex Carr		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 215 N 75th Street		Transaction ID: 1837510
City State Zip Code Belleville IL 62223	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional) ▶	435.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 972 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Nancy G. Carroll		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 549 Hill Terrace Unit 204		Transaction ID: 1838650	
City Winnetka	State IL	Amount of Each Receipt this Period 25.00	
Zip Code 60093			
FEC ID number of contributing federal political committee. C			
Name of Employer Family Resource Center	Occupation Admin. Assistant		
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) B. Ms. Sally Carson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 3153 N 17th Street		Transaction ID: 1843566	
City Arlington	State VA	Amount of Each Receipt this Period 100.00	
Zip Code 22201			
FEC ID number of contributing federal political committee. C			
Name of Employer Dept. of Defense, US Marine Corps	Occupation Program Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1125.00		

Full Name (Last, First, Middle Initial) C. Mr. Andrew Carson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5	
Mailing Address PO Box 709		Transaction ID: 1835650	
City Wilson	State WY	Amount of Each Receipt this Period 50.00	
Zip Code 83014			
FEC ID number of contributing federal political committee. C			
Name of Employer Cony Corp	Occupation mtn guide		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	175.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 973 / 1975						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Terry Carter		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address 17654 SW 12th Street		Transaction ID: 1836723	
City State Zip Code Pembroke Pine FL 33029	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 850.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Kevin A. Cartwright		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 1022 Chestnut Street		Transaction ID: 1840903	
City State Zip Code San Francisco CA 94109	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation volunteer	Aggregate Year-to-Date ▼ 750.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Mr. James Carville		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 329 Maryland Ave, NE		Transaction ID: 1841437	
City State Zip Code Washington DC 20002	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Political Consultant	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 974 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Catherine M. Casas		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 8509 Pringle Way		Transaction ID: 1840605
City Tampa State FL Zip Code 33635	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Raymond James Financial	Occupation Systems Analyst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.00	

Full Name (Last, First, Middle Initial) B. Ms. Sharon Casella-Ashton		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 5
Mailing Address 26966 Laureles Grade Road		Transaction ID: 1844750
City Carmel Valley State CA Zip Code 93942	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Ashton, Casella & Assoc. Inc.	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. Ms. Elaine Casteel		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address PO Box 473		Transaction ID: 1839945
City Ingram State TX Zip Code 78025	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
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) ▶	310.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 975 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Elizabeth W Caswell		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 5002 Quincy Court		Transaction ID: 1841122
City State Zip Code Saline MI 48176	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Creative Memories UL Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Ms. Carolann K. Cavaiola		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 337 River Avenue		Transaction ID: 1839548
City State Zip Code Pt.Pleas Bch NJ 08742	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Solaris Health Systems Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Director Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Mrs. Deanna K. Celico		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 37 Butternut Drive		Transaction ID: 1842811
City State Zip Code North Kingstown RI 02852	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Fabrig Gallery Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Owner Aggregate Year-to-Date ▼ 255.00	

SUBTOTAL of Receipts This Page (optional) ▶	325.00
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 976 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sonia D. Chambers		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 124 11th Ave		Transaction ID: 1839031
City State Zip Code Huntington WV 25701	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer West Virginia Health Care Author	Occupation Manager	
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) B. Ms. Patricia W. Chang		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 211 Clipper Street		Transaction ID: 1844047
City State Zip Code San Francisco CA 94114	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer The Women's Foundation	Occupation Executive Director	
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. Ms. Judith B. Chapman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 1323 Country Club Drive		Transaction ID: 1839045
City State Zip Code Camano Island WA 98282	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
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) ▶	300.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 977 / 1975
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Ruth H. Chapman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address Kendal Apt 1034 80 Lyme Rd		Transaction ID: 1842181
City State Zip Code Hanover NH 03755	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Zeld K. Chester		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 1505 Pelican Point Dr Apt BA272		Transaction ID: 1839061
City State Zip Code Sarasota FL 34231	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. June Chewning		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 3637 Appleton Street, N.W.		Transaction ID: 1840918
City State Zip Code Washington DC 20008	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	375.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 978 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Janet Chilton Mailing Address 665 Beaverbrook Drive City State Zip Code Carmel IN 46032 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5 Transaction ID: 1839492 Amount of Each Receipt this Period 50.00
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		

B. Full Name (Last, First, Middle Initial) Ms. Marilee Chinnici-Zuercher Mailing Address 6043 Glenbarr Place City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5 Transaction ID: 1838759 Amount of Each Receipt this Period 85.00
Name of Employer Occupation FIRSLINK President/CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 777.50		

C. Full Name (Last, First, Middle Initial) Dr. David L. Chittenden Mailing Address 1 Daniel Burnham Ct Ste 365-C City State Zip Code San Francisco CA 94109 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5 Transaction ID: 1839277 Amount of Each Receipt this Period 50.00
Name of Employer Occupation Self Physican Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00		

SUBTOTAL of Receipts This Page (optional)	185.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 979 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Christine B Christensen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 1231 Butler Park Road		Transaction ID: 1841003	
City State Zip Code Washington NJ 07882	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Teacher/consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00		

Full Name (Last, First, Middle Initial) B. Mr. Alan Cisek		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 41 Ridge Road		Transaction ID: 1840502	
City State Zip Code Pleasant Rdg MI 48069	Amount of Each Receipt this Period 21.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) C. Ms. Robin N Clack		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5	
Mailing Address 8601 Georgia Ave #806		Transaction ID: 1835584	
City State Zip Code Silver Spring MD 20910	Amount of Each Receipt this Period 1050.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Precision Communications	Occupation Business Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00		

SUBTOTAL of Receipts This Page (optional) ▶	1321.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 980 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Susan H. Clark		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 105 Woody Creek Road		Transaction ID: 1839501	
City State Zip Code Greer SC 29650	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Furman University Counselor	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Penelope D. Clute		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 5 Cumberland Avenue		Transaction ID: 1838594	
City State Zip Code Plattsburgh NY 12901	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation New York State Judge	Aggregate Year-to-Date ▼ 550.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Mr. Richard Coffman		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address PO Box 252		Transaction ID: 1844192	
City State Zip Code Kalaheo HI 96741	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 255.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	85.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 981 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Anne B. Coggeshall		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5	
Mailing Address 142 Glen Eddy Drive		Transaction ID: 1845213	
City State Zip Code Schenectady NY 12309	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) Mrs. Randy Cohen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 301 Forsythia Court		Transaction ID: 1839365	
City State Zip Code Franklin Lakes NJ 07417	Amount of Each Receipt this Period 21.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 210.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) Ms. Sharon Cohen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 510 Columbus Avenue Apt. 5		Transaction ID: 1841071	
City State Zip Code Boston MA 02118	Amount of Each Receipt this Period 62.50		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Financial Advisor	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	333.50
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 982 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Dee K. Coil		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 3168 Cafeto Drive		Transaction ID: 1840118	
City State Zip Code Walnut Creek CA 94598	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Educational Therapist Aggregate Year-to-Date ▼ 615.00		

Full Name (Last, First, Middle Initial) B. Ms. Lucy Cole		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 1313 Laverock Lane		Transaction ID: 1839531	
City State Zip Code Alamo CA 94507	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) C. Ms. Priscilla A. Coleman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 1422 De Haro Street # 1		Transaction ID: 1840926	
City State Zip Code San Francisco CA 94107	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 700.00		

SUBTOTAL of Receipts This Page (optional) ▶	195.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 983 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mrs. June J. Coleman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 5
Mailing Address 349 Euclid Street		Transaction ID: 1843763
City State Zip Code Santa Monica CA 90402	Amount of Each Receipt this Period 360.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 385.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Ms. Carolyn Coleman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 418 Maple Ave		Transaction ID: 1841463
City State Zip Code Glenside PA 19038	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation RN/Attorney	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Ms. Deborah Colgan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 25 Alden Place		Transaction ID: 1839230
City State Zip Code West Newton MA 02465	Amount of Each Receipt this Period 21.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Human Serv. Adm.	Aggregate Year-to-Date ▼ 210.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	481.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 984 / 1975						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Denice M. Collazo		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 7 Lockwood Road		Transaction ID: 1840258	
City State Zip Code Scarsdale NY 10583	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 590.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Cathy Collier		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 1098 HCR 4251		Transaction ID: 1840265	
City State Zip Code Hillsboro TX 76645	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 525.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Virginia Collins		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 1510 Bradley Avenue		Transaction ID: 1842853	
City State Zip Code Rockville MD 20851	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 875.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	270.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 985 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Judge Marie Bertillion Collins		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 30 Sierra Ave.		Transaction ID: 1844771
City State Zip Code Piedmont CA 94611	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mrs. Leamel Comparette		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5
Mailing Address 3737 Atlantic Ave Apt 1111		Transaction ID: 1842024
City State Zip Code Long Beach CA 90807	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. Elizabeth B. Conant		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 90 Bryant Street		Transaction ID: 1844781
City State Zip Code Buffalo NY 14209	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	3100.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 986 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. Paul A. Coney		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 948 Clinton Road		Transaction ID: 1842234	
City State Zip Code Los Altos CA 94024	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Symmetricom Inc	Occupation Accountant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

B. Full Name (Last, First, Middle Initial) Ms. Lucy Congdon Hanson		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 1775 Fir Street		Transaction ID: 1844314	
City State Zip Code Port Townsend WA 98368	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

C. Full Name (Last, First, Middle Initial) Mr. Raymond Conklin		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 1437 25th Avenue		Transaction ID: 1842040	
City State Zip Code Moline IL 61265	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Winstein Karensky & Wal	Occupation Legal Secretary		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 987 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Janet M. Conn		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5	
Mailing Address 5804 Oak Lane		Transaction ID: 1837637	
City State Zip Code Minneapolis MN 55436	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Target Corporation	Occupation Payroll Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

B. Full Name (Last, First, Middle Initial) Dr. Arlene F. Connolly		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 60 Commerford Road		Transaction ID: 1840980	
City State Zip Code Concord MA 01742	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00		

C. Full Name (Last, First, Middle Initial) Ms. Shelley R. Conrath		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5	
Mailing Address PO Box 573		Transaction ID: 1845202	
City State Zip Code Athens OH 45701	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Athens City Schools		Occupation Elementary Principal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 988 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Roberta A. Conroy		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5
Mailing Address 34 Haldeman Road		Transaction ID: 1844608
City State Zip Code Santa Monica CA 90402	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Capital Group	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Ms. Sharla Cook		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 2728 Tiber Drive		Transaction ID: 1844682
City State Zip Code Sacramento CA 95826	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer The Federal Tech. Center	Occupation Chief Operating Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Ms. Margaret Cook		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 320 Woodland Drive		Transaction ID: 1842745
City State Zip Code Chelsea MI 48118	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional) ▶	1700.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 989 / 1975
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. George Cook

Mailing Address 623 Applegate Lane

City State Zip Code
Grand Blanc MI 48439

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1845100

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Ms. Nancy W. Cook

Mailing Address P.O. Box 516
248 West Grand Avenue

City State Zip Code
Lake Villa IL 60046

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

Name of Employer Occupation
College of Lake County-Re-tired Professor Emeritus

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1838681

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Ms. Angela Perry Cooley

Mailing Address 1314 W. Market Street

City State Zip Code
Crawfordsville IN 47933

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843224

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **375.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 990 / 1975						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Carla Cooper		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 11519 Overbrook		Transaction ID: 1840580	
City State Zip Code Houston TX 77077	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Tenaris Global Services	Occupation Business Development		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00		

Full Name (Last, First, Middle Initial) B. Mayor Pat Cordova		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 23303 La Pierre Drive SW		Transaction ID: 1839829	
City State Zip Code Mountlake Terrace WA 98043	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer City of Mountlake Terrace	Occupation Mayor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		

Full Name (Last, First, Middle Initial) C. Ms. Victoria R. Cordova		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5	
Mailing Address 4414 35th Street, N.W.		Transaction ID: 1837638	
City State Zip Code Washington DC 20008	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

SUBTOTAL of Receipts This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 991 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Marilyn B. Cornish		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 63 Hollybrook Road		Transaction ID: 1840015
City State Zip Code Brockport NY 14420	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Ms. Helen S. Corry		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 10 Yorkshire Court		Transaction ID: 1841289
City State Zip Code Dearborn MI 48126	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Prod. Commod Team Mgr. Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Marcia Cortese		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5
Mailing Address 1815 E. Meadowbrook Avenue		Transaction ID: 1841985
City State Zip Code Phoenix AZ 85016	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Family Therapist Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	175.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 992 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Luene H. Corwin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5
Mailing Address 1119 Loma Vista Way		Transaction ID: 1841877
City State Zip Code Vista CA 92084	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Lisa Cosand		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 6152 Chesebro Road		Transaction ID: 1844321
City State Zip Code Agoura Hills CA 91301	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Boeing Engineer	Aggregate Year-to-Date ▼ 450.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. G. Cosma		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 803 Druid Road S.		Transaction ID: 1841483
City State Zip Code Clearwater FL 33756	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Guillermo W Cosma Physician	Aggregate Year-to-Date ▼ 235.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	325.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 993 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Brunnhilde S. Costanza		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 25155 42nd Avenue		Transaction ID: 1844294	
City Flushing	State NY	Zip Code 11363	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Dr. Mary Lou Courge		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 1905 Princess Street		Transaction ID: 1845921	
City Wilmington	State NC	Zip Code 28405	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Ms. Elizabeth A. Courtenay		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 1800 6th Street		Transaction ID: 1840276	
City Manhattan Beach	State CA	Zip Code 90266	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional)	400.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 994 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. William D. Cox, Jr.		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 338 Santa Helena		Transaction ID: 1842077	
City State Zip Code Solana Beach CA 92075	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Consultant	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Vivian S. Crabtree		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address 2661 Tallant Rd Apt MN724		Transaction ID: 1836650	
City State Zip Code Santa Barbara CA 93105	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Harriet Cramer		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 345 Wister Road		Transaction ID: 1841389	
City State Zip Code Wynnewood PA 19096	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 400.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 995 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Harriet Cramer		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 345 Wister Road		Transaction ID: 1844052
City Wynnewood	State PA	Zip Code 19096
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Ms. Clare B. Crane		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 5950 Avenida Chamnez		Transaction ID: 1842139
City La Jolla	State CA	Zip Code 92037
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) C. Dr. Anna Lee Crawford		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 195 14th Street, NE PH 605		Transaction ID: 1840891
City Atlanta	State GA	Zip Code 30309
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	1450.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 996 / 1975						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Jacqueline Crawley		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 6203 Stratford Road		Transaction ID: 1843277
City State Zip Code Chevy Chase MD 20815	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 225.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Marjorie L. Crede		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 137 Whitethorne Drive		Transaction ID: 1844260
City State Zip Code Moraga CA 94556	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Anne Crichton		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address PO Box 1367		Transaction ID: 1841368
City State Zip Code Washington Grv MD 20880	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 450.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 997 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Joan Criego		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 7030 Donlea Lane		Transaction ID: 1840386
City State Zip Code Eden Prairie MN 55346	Amount of Each Receipt this Period 21.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 210.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Madeline A. Crosby		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 10 Joyce Road		Transaction ID: 1839660
City State Zip Code Wayland MA 01778	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Scientific Database Curator	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Alyce G. Crouter		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 250 Pantops Mtn. Road #5403		Transaction ID: 1837577
City State Zip Code Charlottesville VA 22911	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Housewife	Aggregate Year-to-Date ▼ 450.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	146.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 998 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Nancy Crow		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 28600 Pacific Coast Highway		Transaction ID: 1842868
City State Zip Code Malibu CA 90265	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation Investments		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) B. Ms. Areta Crowell		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 2934 Beachwood Drive		Transaction ID: 1840846
City State Zip Code Los Angeles CA 90068	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
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) C. Mr. Julian Crowell		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 48 Biltmore Street		Transaction ID: 1840144
City State Zip Code Springfield MA 01108	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
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) ▶	525.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 999 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Amy Slaven Crown

Mailing Address 157 N. Sierra Vista Drive

City Tucson State AZ Zip Code 85719

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

Name of Employer self Occupation nutritionist and yoga teacher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843055

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Ms. Helen C. Crump

Mailing Address PO Box 123

City Church Creek State MD Zip Code 21622

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 5

Transaction ID: 1843748

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Ms. Leslie Culver

Mailing Address 408 W. Liberty, # 1

City Ann Arbor State MI Zip Code 48103

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

Name of Employer Arbor Hospice and Homecare Occupation RN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1840196

Amount of Each Receipt this Period
32.50

SUBTOTAL of Receipts This Page (optional)	▶	1332.50
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1000 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Elizabeth K Cunningham		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 17273 State Route 104		Transaction ID: 1837310
City State Zip Code Chillicothe OH 45601	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Veterans Administration	Occupation Physician Assistant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

Full Name (Last, First, Middle Initial) B. Ms. Elizabeth K Cunningham		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 17273 State Route 104		Transaction ID: 1845716
City State Zip Code Chillicothe OH 45601	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Veterans Administration	Occupation Physician Assistant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

Full Name (Last, First, Middle Initial) C. Mrs. Thomas Cunningham		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 9570 Mandus Olson Road NE		Transaction ID: 1842175
City State Zip Code Bainbridge Is WA 98110	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	230.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1001 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Nancy Curriden		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5
Mailing Address 640 Sapphire Avenue		Transaction ID: 1842070
City State Zip Code Billings MT 59105	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer USDA Forest Service	Occupation Civil Servant	
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) B. Mr. Thomas R. Curtis		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 1903 Rolling Hills Avenue SE		Transaction ID: 1839189
City State Zip Code Renton WA 98055	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		
Name of Employer State of Washington	Occupation Social Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	

Full Name (Last, First, Middle Initial) C. Ms. Hope A. Curtis		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address PO Box 4023		Transaction ID: 1837589
City State Zip Code Santa Fe NM 87502	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Photographer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

SUBTOTAL of Receipts This Page (optional) ▶	435.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1002 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Hope A. Curtis		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address PO Box 4023		Transaction ID: 1842185
City State Zip Code Santa Fe NM 87502	Amount of Each Receipt this Period 400.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation Photographer	Aggregate Year-to-Date ▼ 1300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Linda Curtiss		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 1238 Park Avenue		Transaction ID: 1843464
City State Zip Code Hoboken NJ 07030	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Church Life Insurance Corp. Occupation General manager	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Lynn G. Cutler		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address 1526 N. Mohawk 1-S		Transaction ID: 1835579
City State Zip Code Chicago IL 60610	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Holland Knight Occupation Sr. Policy Advisor	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1650.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1003 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Nicole A. Cyphers		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 19049 Kodiak Lane		Transaction ID: 1840460	
City Mankato	State MN	Zip Code 56001	Amount of Each Receipt this Period 21.00
FEC ID number of contributing federal political committee. C			
Name of Employer Taylor Corporation	Occupation DBA		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

B. Full Name (Last, First, Middle Initial) Ms. Dolores Dacosta		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 4015 Trowbridge Avenue		Transaction ID: 1841475	
City Cleveland	State OH	Zip Code 44109	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Lockhead Martin	Occupation Supervisor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

C. Full Name (Last, First, Middle Initial) Dr. Beverly A. Dale		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5	
Mailing Address 245 Del Monte Avenue		Transaction ID: 1835656	
City Los Altos	State CA	Zip Code 94022	Amount of Each Receipt this Period 250.00
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 ▼ 2800.00		

SUBTOTAL of Receipts This Page (optional) ▶	521.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1004 / 1975						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Saralyn Daly		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 6211 Gyral Drive		Transaction ID: 1844386	
City State Zip Code Tujunga CA 91042	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Retired		
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) B. Ms. Cecilia Daniels		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 166 Mt. Pleasant Road		Transaction ID: 1843007	
City State Zip Code Newtown CT 06470	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00		

Full Name (Last, First, Middle Initial) C. Ms. Arlene K. Daniels		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 177 19th Street #9C		Transaction ID: 1841873	
City State Zip Code Oakland CA 94612	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 570.00		

SUBTOTAL of Receipts This Page (optional) ▶	700.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1005 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Jane Danowitz		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 2760 Bon Haven Lane		Transaction ID: 1841851	
City State Zip Code Annapolis MD 21401	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer National Environmental Trust	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1750.00		

Full Name (Last, First, Middle Initial) B. Ms. Daria L. Darnell		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address US Embassy Unit 1550		Transaction ID: 1842773	
City State Zip Code APO AP 96205	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer U.S. Department of State	Occupation Foreign Service Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Mr. Allen E. Davenport		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 24436 9th Place South		Transaction ID: 1843402	
City State Zip Code Des Moines WA 98198	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	1350.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1006 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Cheryl L. Davenport		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5	
Mailing Address 42 E. Fort Avenue		Transaction ID: 1841296	
City State Zip Code Baltimore MD 21230	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Nationwide Insurance Co.	Occupation Securities		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) B. Ms. Kristin A.B. Davidson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 2525 Pine Street		Transaction ID: 1840827	
City State Zip Code Philadelphia PA 19103	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer University of Pennsylvania	Occupation University administration		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Ms. Beth J. Davidson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5	
Mailing Address 407 N Midland Avenue		Transaction ID: 1837593	
City State Zip Code Nyack NY 10960	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Jan Krukowski & Co.	Occupation Vice President		
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) ▶	420.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1007 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Anita J.B. Davis		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 1105 Lakeview Drive		Transaction ID: 1842693	
City Hillsborough State CA Zip Code 94010	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00		

Full Name (Last, First, Middle Initial) B. Ms. Nanette L. Davis		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 2502 Taylor Avenue		Transaction ID: 1841488	
City Alexandria State VA Zip Code 22302	Amount of Each Receipt this Period 190.00		
FEC ID number of contributing federal political committee. C			
Name of Employer US D.O.J.	Occupation Trial Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00		

Full Name (Last, First, Middle Initial) C. Dr. Isabel Davis		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 309 East 87th Street Apt. 6N		Transaction ID: 1839417	
City New York State NY Zip Code 10128	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

SUBTOTAL of Receipts This Page (optional) ▶	540.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1008 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Janice Davis		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 96 Merriman Road Apt. 4		Transaction ID: 1840181	
City Akron State OH Zip Code 44303	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) B. Ms. Minnie Dean		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 112 2nd Street		Transaction ID: 1839102	
City Radford State VA Zip Code 24141	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 515.00		

Full Name (Last, First, Middle Initial) C. Dr. Kay Deaux		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 20 East 9th Street, #20E		Transaction ID: 1840876	
City New York State NY Zip Code 10003	Amount of Each Receipt this Period 1150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer City Univ. of New York Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Professor Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional) ▶	1260.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1009 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Elizanda Delasota		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 6112 Oliver Loving Trail		Transaction ID: 1840622	
City State Zip Code Austin TX 78749	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Psychologist Aggregate Year-to-Date ▼ 280.00		

Full Name (Last, First, Middle Initial) B. Mr. Robert DeMar		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 5234 S. Woodlawn Avenue		Transaction ID: 1844267	
City State Zip Code Chicago IL 60615	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Ms. Joan E. Demarest		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 3090 N.W. Christine Street		Transaction ID: 1840867	
City State Zip Code Corvallis OR 97330	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Investor Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	370.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1010 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. Robert D. Dengler		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address PO Box 391		Transaction ID: 1844344
City Morro Bay	State CA	Zip Code 93443
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B. Full Name (Last, First, Middle Initial) Ms. Janice G. Dennis		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 719 Lincoln Avenue		Transaction ID: 1841094
City Linwood	State NJ	Zip Code 08221
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C. Full Name (Last, First, Middle Initial) Ms. Laura B. Dennison		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 7004 Saddleback Drive		Transaction ID: 1840845
City Bakersfield	State CA	Zip Code 93309
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer	Occupation Retired	
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) ▶	400.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1011 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Morton Deutsch		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 161 West 86th Street		Transaction ID: 1843352
City State Zip Code New York NY 10024	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired	
Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. Ms. Verda M. Deutscher		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 4740 Connecticut Avenue, NW #1007		Transaction ID: 1837042
City State Zip Code Washington DC 20008	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired	
Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Ms. Virginia M Diamond		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5
Mailing Address 4779 Gainsborough Dr		Transaction ID: 1837872
City State Zip Code Fairfax VA 22032	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Diamond Insight (self employed) Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Consultant and Coach	
Aggregate Year-to-Date ▼ 675.00		

SUBTOTAL of Receipts This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1012 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Virginia M Diamond		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 4779 Gainsborough Dr		Transaction ID: 1840496	
City State Zip Code Fairfax VA 22032	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Diamond Insight (self employed)	Occupation Consultant and Coach		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00		

Full Name (Last, First, Middle Initial) B. Mrs. Leah D. Dick		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 1001 SW B Avenue Ste. 120		Transaction ID: 1842110	
City State Zip Code Lawton OK 73501	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Psychologist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) C. Mr. S. Whitney Dickey		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address PO Box 933		Transaction ID: 1845670	
City State Zip Code Mount Desert ME 04660	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	685.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1013 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Rise Dimson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 1016 5th Avenue		Transaction ID: 1843238	
City State Zip Code New York NY 10028	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) B. Mr. James A. Dingus		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 20600 Chagrin Blvd. # 701		Transaction ID: 1842087	
City State Zip Code Shaker Heights OH 44122	Amount of Each Receipt this Period 98.10		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 441.10		

Full Name (Last, First, Middle Initial) C. Ms. Madeleine Disario		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 5	
Mailing Address 4100 Ingomar Street NW		Transaction ID: 1843726	
City State Zip Code Washington DC 20015	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Thomson Financial Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Services Aggregate Year-to-Date ▼ 1120.00		

SUBTOTAL of Receipts This Page (optional) ▶	698.10
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1014 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Madeleine Disario		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 4100 Ingomar Street NW		Transaction ID: 1845717	
City State Zip Code Washington DC 20015	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Thomson Financial	Occupation Information Services		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1120.00		

Full Name (Last, First, Middle Initial) B. Ms. Barbara J. Dobson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5	
Mailing Address 554 E. Dolphin Drive		Transaction ID: 1844560	
City State Zip Code Freeland WA 98249	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) C. Mrs. Janice Docman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 10216 W 50th Ter		Transaction ID: 1844286	
City State Zip Code Shawnee Msn KS 66203	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	270.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1015 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Anthony Dorta		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 1655 Post Road E. Unit 18		Transaction ID: 1840602	
City State Zip Code Westport CT 06880	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Toys R us	Occupation Maint.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 740.00		

Full Name (Last, First, Middle Initial) B. Mrs. Sydney M. Dotson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 30 Bunker Court		Transaction ID: 1838827	
City State Zip Code Rotonda West FL 33947	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
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. Ms. Carol Doty		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 1921 Curtiss Street		Transaction ID: 1842142	
City State Zip Code Downers Grove IL 60515	Amount of Each Receipt this Period 125.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00		

SUBTOTAL of Receipts This Page (optional) ▶	235.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1016 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Susan R. Dowd		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 234 Parkman Ave.		Transaction ID: 1841179
City State Zip Code Pittsburgh PA 15213	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Carnegie-Mellon University	Occupation Chemist	
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) B. Ms. Anne T. Dowling		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 5
Mailing Address 299 West 12th Street, # 4J		Transaction ID: 1843717
City State Zip Code New York NY 10014	Amount of Each Receipt this Period 1500.00	
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 ▼ 3500.00	

Full Name (Last, First, Middle Initial) C. Ms. Laraine Downer		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 4828 Foxglove Ct		Transaction ID: 1840956
City State Zip Code Santa Rosa CA 95405	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Vineyard Industry Products Co.	Occupation co-owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1030.00	

SUBTOTAL of Receipts This Page (optional) ▶	1780.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1017 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Vesta S. Downer		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 509 Hillwood Ave		Transaction ID: 1841444
City State Zip Code Falls Church VA 22042	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4400.00	

Full Name (Last, First, Middle Initial) B. Mr. William Doyle		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 6 Tyler Road		Transaction ID: 1844434
City State Zip Code Hanover NH 03755	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Ms. Imogene M. Draper		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 1601 Britton Place Bldg. 0		Transaction ID: 1843307
City State Zip Code Voorhees NJ 08043	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional) ▶	1075.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1018 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Diane B. Drayson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 3750 Tremont Lane		Transaction ID: 1840831
City State Zip Code Ann Arbor MI 48105	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Psychotherapist	
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. Ms. Barbara Dreher		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address PO Box 421235		Transaction ID: 1838802
City State Zip Code SummrInd Key FL 33042	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

Full Name (Last, First, Middle Initial) C. Ms. Beryl Drexler		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 755 Stephen Road		Transaction ID: 1840164
City State Zip Code Warminster PA 18974	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional) ▶	295.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1019 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Nancy Drosd Mailing Address 21 East 90th Street City State Zip Code New York NY 10128 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5 Transaction ID: 1843045 Amount of Each Receipt this Period 500.00
Name of Employer Occupation Self Artist Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		

B. Full Name (Last, First, Middle Initial) Dr. Nancy E. Duckles Mailing Address 9048 Hemingway Grove Circle City State Zip Code Knoxville TN 37922 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5 Transaction ID: 1840962 Amount of Each Receipt this Period 50.00
Name of Employer Occupation Children's Anesthesiologists, P.C. Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		

C. Full Name (Last, First, Middle Initial) Ms. Ruth A. Dudgeon Mailing Address 6703 4th Street, NW City State Zip Code Washington DC 20012 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5 Transaction ID: 1836240 Amount of Each Receipt this Period 250.00
Name of Employer Occupation History Associates, Inc. Historian Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		

SUBTOTAL of Receipts This Page (optional)	800.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1020 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Lois M. Dummett		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 5344 Highlight Place		Transaction ID: 1842240
City State Zip Code Los Angeles CA 90016	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Ms. Lois J. Dunne		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5
Mailing Address PO Box 590		Transaction ID: 1838404
City State Zip Code Lukeville AZ 85341	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) C. Ms. Constance K. Duprey		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 4312 Lealand Lane		Transaction ID: 1843226
City State Zip Code Nashville TN 37204	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional) ▶	500.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1021 / 1975						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Dianne Durrwachter		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5	
Mailing Address 809 West 5th Street		Transaction ID: 1844582	
City State Zip Code Port Angeles WA 98363	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Ms. June Dutton		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 88 Central Avenue		Transaction ID: 1845467	
City State Zip Code Sausalito CA 94965	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Determined Industries Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Publisher	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. Ms. Eva B. Edelstein		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 135 Mayberry Drive		Transaction ID: 1842838	
City State Zip Code Monroeville PA 15146	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired	Aggregate Year-to-Date ▼ 380.00	

SUBTOTAL of Receipts This Page (optional) ▶	2100.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1022 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Catherine Ednie		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 64 Knickerbocker Avenue		Transaction ID: 1839009
City State Zip Code Stamford CT 06907	Amount of Each Receipt this Period 21.00	
FEC ID number of contributing federal political committee. C		
Name of Employer General Reinsurance	Occupation Project Mgr.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) B. Ms. Laura B. Edwards		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 406 West Patterson Place		Transaction ID: 1842480
City State Zip Code Chapel Hill NC 27516	Amount of Each Receipt this Period 87.50	
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Video Producer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

Full Name (Last, First, Middle Initial) C. Ms. Ann D. Egan		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 6438 Willow Lane		Transaction ID: 1836651
City State Zip Code Mission Hills KS 66208	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional) ▶	158.50
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1023 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Ardyth J Eisenberg		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 5
Mailing Address 7320 Lake Street, # 5		Transaction ID: 1840863
City River Forest	State IL	Zip Code 60305
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer self-employed	Occupation attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Ms. Marjorie L. Elder		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 1181 Cork Road		Transaction ID: 1837294
City Victor	State NY	Zip Code 14564
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. Mr. James Elder		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 299 Ashlar Drive		Transaction ID: 1839288
City Napa	State CA	Zip Code 94558
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer	Occupation Retired	
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)	▶	1270.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1024 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Lucy Elgin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 1756 El Paso Avenue		Transaction ID: 1842387
City State Zip Code Clovis CA 93611	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Kaiser Permanente	Occupation Nurse Practitioner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

Full Name (Last, First, Middle Initial) B. Ms. Judith Laikin Elkin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 3 Southwick Court		Transaction ID: 1840832
City State Zip Code Ann Arbor MI 48105	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer University of Michigan	Occupation Historian	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	

Full Name (Last, First, Middle Initial) C. Mrs. Patricia J. Ellis		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 12670 No. 2000 Road		Transaction ID: 1838932
City State Zip Code Good Hope IL 61438	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.00	

SUBTOTAL of Receipts This Page (optional) ▶	370.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1025 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Margaret K. Ellis		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 13517 134th Avenue KPN		Transaction ID: 1843406
City State Zip Code Gig Harbor WA 98329	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Janet S. Ellis		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 401 Regents Park Lane		Transaction ID: 1846393
City State Zip Code Noblesville IN 46062	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Self Attorney	Aggregate Year-to-Date ▼ 325.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. George F. Ellison		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address PO Box 1144		Transaction ID: 1837048
City State Zip Code Truro MA 02666	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 225.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	575.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1026 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. George M. Elsener		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address 730 S. Beverly Lane		Transaction ID: 1837718
City State Zip Code Arlington Hts IL 60005	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mrs. Lucinda B. Emmet		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 40040 little outlands lane		Transaction ID: 1842302
City State Zip Code Leesburg VA 20175	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 2300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Elfriede Engel		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address PO Box 526		Transaction ID: 1836755
City State Zip Code Northport MI 49670	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1100.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1027 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Elfriede Engel		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address PO Box 526		Transaction ID: 1842211	
City Northport	State MI	Amount of Each Receipt this Period 100.00	
Zip Code 49670		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Occupation Retired		Amount of Each Receipt this Period 100.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Mrs. Gail Engelberg		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5	
Mailing Address 1050 N. Lake Way		Transaction ID: 1837613	
City Palm Beach	State FL	Amount of Each Receipt this Period 1500.00	
Zip Code 33480		Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00	
Name of Employer Occupation Housewife		Amount of Each Receipt this Period 1500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 4000.00	

Full Name (Last, First, Middle Initial) C. Ms. Belinda Engelmann		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 265 High Branch Way		Transaction ID: 1837016	
City Roswell	State GA	Amount of Each Receipt this Period 200.00	
Zip Code 30075		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer Bay Area Legal Services Occupation Attorney		Amount of Each Receipt this Period 200.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	1800.00
TOTAL This Period (last page this line number only)	1800.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1028 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Dianne Engleke		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 283 Silver Mt. Road		Transaction ID: 1839793	
City State Zip Code Millerton NY 12546	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer self-employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation artist/ naturalist Aggregate Year-to-Date ▼ 330.00		

Full Name (Last, First, Middle Initial) B. Ms. Dianne Engleke		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5	
Mailing Address 283 Silver Mt. Road		Transaction ID: 1844638	
City State Zip Code Millerton NY 12546	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer self-employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation artist/ naturalist Aggregate Year-to-Date ▼ 330.00		

Full Name (Last, First, Middle Initial) C. Ms. Janice Enright		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 1300 Connecticut Avenue NW # 600		Transaction ID: 1842706	
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	560.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1029 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Jennifer Epelbaum		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 187 Saint Johns Place		Transaction ID: 1839924
City State Zip Code Brooklyn NY 11217	Amount of Each Receipt this Period 21.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Aggregate Year-to-Date ▼ 272.00	

Full Name (Last, First, Middle Initial) B. Ms. Lisa Erdberg		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 164 Avila Street		Transaction ID: 1844819
City State Zip Code San Francisco CA 94123	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Translator/Teacher Aggregate Year-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) C. Dr. Niki Erlenmeyer-Kimling		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5
Mailing Address 1 Briarwood Lane		Transaction ID: 1844562
City State Zip Code Stamford CT 06903	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer NYS Psychiatric Inst. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Research Director Aggregate Year-to-Date ▼ 3050.00	

SUBTOTAL of Receipts This Page (optional) ▶	1521.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1030 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sue Errington		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 3200 West Brook Drive		Transaction ID: 1838704	
City State Zip Code Muncie IN 47304	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Planned Parenthood	Occupation Development Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 590.00		

Full Name (Last, First, Middle Initial) B. Ms. Cynthia Ersher		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 1312 Paseo Alamos		Transaction ID: 1841847	
City State Zip Code San Dimas CA 91773	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Homemaker		
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) C. Ms. Stephanie L. Ertel		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 664 Enchanted Isles Drive		Transaction ID: 1840840	
City State Zip Code Mabank TX 75156	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Richard R. Ertel, P.C.	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2300.00		

SUBTOTAL of Receipts This Page (optional) ▶	535.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1031 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Linda J. Ervin		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 2731 St Regis Ave		Transaction ID: 1842613	
City State Zip Code Brentwood CA 94513	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Dr. Edward T. Esty		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 4608 Drummond Avenue		Transaction ID: 1842517	
City State Zip Code Chevy Chase MD 20815	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Consultant	Aggregate Year-to-Date ▼ 350.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Maxene P. Eubanks		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 13023 W Butterfield Drive		Transaction ID: 1845938	
City State Zip Code Sun City West AZ 85375	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	500.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1032 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Cynthia Evans		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 123 Greenbriar Drive		Transaction ID: 1845700	
City State Zip Code Wexford PA 15090	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Medical Center Clinic, PC	Occupation Physician		
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. Dr. Audrey E. Evans		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5	
Mailing Address 2010 Spruce Street		Transaction ID: 1837734	
City State Zip Code Philadelphia PA 19103	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer U of PA	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) C. Ms. Mildred H. Fagen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 11367 SW 85th Lane		Transaction ID: 1839225	
City State Zip Code Miami FL 33173	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Coldwell Banker	Occupation RE Broker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

SUBTOTAL of Receipts This Page (optional) ▶	700.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1033 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. G. Thomas Fairclough		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 1215 Douglas Street Apt. 2		Transaction ID: 1842165
City State Zip Code Sioux City IA 51105	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Ms. Jennifer IL. Fallon		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 203 Stratford, # 2		Transaction ID: 1840142
City State Zip Code Houston TX 77006	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation lab tech Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Monique Farag		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 900 Montgomery Avenue Apt 403		Transaction ID: 1845690
City State Zip Code Bryn Mawr PA 19010	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Teacher Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	120.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1034 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Hugh Farris		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address PO Box 1149		Transaction ID: 1840049	
City Montreat	State NC	Zip Code 28757	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For:	Occupation REQUESTED	Aggregate Year-to-Date ▼ 250.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms Katherine Farris		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 811 E Salem Avenue		Transaction ID: 1841008	
City Indianola	State IA	Zip Code 50125	Amount of Each Receipt this Period 83.33
FEC ID number of contributing federal political committee. C			
Name of Employer Chariton Comm. School	Occupation Teacher	Aggregate Year-to-Date ▼ 433.32	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Mary B. Faulkner		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 504 Gleneagle Drive		Transaction ID: 1839051	
City Fredericksburg	State VA	Zip Code 22405	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For:	Occupation REQUESTED	Aggregate Year-to-Date ▼ 240.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	118.33
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1035 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Danah Fayman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address 700 Front St Unit 1103		Transaction ID: 1845038	
City State Zip Code San Diego CA 92101	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 750.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Mrs. Marjorie Feder		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 9 Oxford Road		Transaction ID: 1839213	
City State Zip Code White Plains NY 10605	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Myra B. Fein		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 224 Longmeadow Street		Transaction ID: 1841010	
City State Zip Code Longmeadow MA 01106	Amount of Each Receipt this Period 84.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 672.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	609.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1036 / 1975						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mrs. Frances Feldman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 16 Blake Road		Transaction ID: 1838601	
City State Zip Code Lexington MA 02420		Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Harvard University Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 540.00	

B. Full Name (Last, First, Middle Initial) Ms. Karen M. Feldman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 38 Pleasantview Drive		Transaction ID: 1840866	
City State Zip Code Hudson NY 12534		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Self Attorney-Consultant			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00	

C. Full Name (Last, First, Middle Initial) Ms. Ruth K. Felmus		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 1730 Clearview Drive		Transaction ID: 1840829	
City State Zip Code Beverly Hills CA 90210		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
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) ▶	585.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1037 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Diane Felsen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 45 76th Street		Transaction ID: 1841015	
City State Zip Code Brooklyn NY 11209	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Cornell	Occupation SCIENTIST		
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. Mr. Norborn M. Felton		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 1440 Bent Drive		Transaction ID: 1844116	
City State Zip Code Campbell CA 95008	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Ms. Elizabeth A. Fender		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 7129 Fairway Vista Drive		Transaction ID: 1842614	
City State Zip Code Charlotte NC 28226	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

SUBTOTAL of Receipts This Page (optional) ▶	550.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1038 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Ellen S. Fenner		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 11408 Berwick Street		Transaction ID: 1840879
City State Zip Code Los Angeles CA 90049	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Actress Aggregate Year-to-Date ▼ 1300.00	

Full Name (Last, First, Middle Initial) B. Dr. Lajos F. Fenster		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 2360 43rd E, # 404		Transaction ID: 1844640
City State Zip Code Seattle WA 98112	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Rita Ferrer		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 4530 Stonebrooke Street PO Box 20543		Transaction ID: 1840603
City State Zip Code Kalamazoo MI 49019	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Director of Finance Aggregate Year-to-Date ▼ 230.00	

SUBTOTAL of Receipts This Page (optional) ▶	520.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1039 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Jean Ferson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 1211 Pine Street		Transaction ID: 1839933	
City Philadelphia	State PA	Zip Code 19107	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

B. Full Name (Last, First, Middle Initial) Ms. Marti Fessenden		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 202 West Benson Street		Transaction ID: 1838717	
City Decatur	State GA	Zip Code 30030	Amount of Each Receipt this Period 28.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00		

C. Full Name (Last, First, Middle Initial) Mr. Donn Fichter		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 50 Parkwood Street		Transaction ID: 1842044	
City Albany	State NY	Zip Code 12208	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00		

SUBTOTAL of Receipts This Page (optional) ▶	153.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1040 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Frederick A Ficken		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5	
Mailing Address 25 Old Tilton Road		Transaction ID: 1841295	
City State Zip Code Canterbury NH 03224	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Builder	Aggregate Year-to-Date ▼ 1150.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Elizabeth L. Field		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 59 Ward Avenue		Transaction ID: 1839646	
City State Zip Code Rumson NJ 07760	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 240.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Adrienne Fields		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 3900 Watson Place, NW #1D-B		Transaction ID: 1842786	
City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	280.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1041 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Arthur Finch		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address PO Box 2628		Transaction ID: 1842722
City State Zip Code Sag Harbor NY 11963	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dr. Sylvia A. Fine, M.D.		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 6 Avon Place		Transaction ID: 1840815
City State Zip Code Cambridge MA 02140	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Physician	Aggregate Year-to-Date ▼ 1250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. Sylvia A. Fine, M.D.		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 6 Avon Place		Transaction ID: 1841799
City State Zip Code Cambridge MA 02140	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Physician	Aggregate Year-to-Date ▼ 1250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1042 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Barbara Finegan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 106 N. Brown Street		Transaction ID: 1840096	
City State Zip Code Gloucester NJ 08030		Amount of Each Receipt this Period 16.50	
FEC ID number of contributing federal political committee. C			
Name of Employer Our Lady of Lourdes Medical Center		Occupation RN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 215.00	

Full Name (Last, First, Middle Initial) B. Dr. Joanne E. Finley		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 4201 Underwood Rd.		Transaction ID: 1838592	
City State Zip Code Baltimore MD 21218		Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self		Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 345.00	

Full Name (Last, First, Middle Initial) C. Ms. Marilyn Fischbach		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 1611 Brummel Street		Transaction ID: 1840955	
City State Zip Code Evanston IL 60202		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer John Grane, Inc.		Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1100.00	

SUBTOTAL of Receipts This Page (optional) ▶	301.50
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1043 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. James E. Fisher		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 171 Farnsworth Blvd.		Transaction ID: 1836742
City State Zip Code Soldotna AK 99669	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00	

Full Name (Last, First, Middle Initial) B. Mr. J. David Flemming		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 309 Jackson Street		Transaction ID: 1843359
City State Zip Code Denver CO 80206	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Liberty Media Corp Tax Accountant		
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. Ms. Susan R. Fletcher		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 9906 Wildwood Road		Transaction ID: 1845228
City State Zip Code Kensington MD 20895	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

SUBTOTAL of Receipts This Page (optional) ▶	275.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1044 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. MaryAnne A Flournoy		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 6675 Baker Road		Transaction ID: 1841031	
City Athens State OH Zip Code 45701	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Ohio University	Occupation part-time instructor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00		

Full Name (Last, First, Middle Initial) B. Mr. Michael S. Folkman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 23600 Mercantile Road Unit E		Transaction ID: 1839132	
City Beachwood State OH Zip Code 44122	Amount of Each Receipt this Period 17.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Michael S. Folkman & Assoc., Inc.	Occupation Real Estate Appraiser		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00		

Full Name (Last, First, Middle Initial) C. Ms. Carol J. Folsom		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 147 45th Street		Transaction ID: 1842075	
City Sacramento State CA Zip Code 95819	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	367.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1045 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Gonzalee Ford		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 555 Banyan Tree Lane, # 205		Transaction ID: 1837038
City State Zip Code Delray Beach FL 33483	Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation Antique Dealer	Aggregate Year-to-Date ▼ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Lindsay M. Forgash		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 314 Continental Lane		Transaction ID: 1839522
City State Zip Code Paoli PA 19301	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Richard Foster		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 327 Chisholm Road		Transaction ID: 1844143
City State Zip Code Antwerp NY 13608	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1380.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1046 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Kristin Fowler		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 15541 SW 144th Ter		Transaction ID: 1839695	
City Portland	State OR	Zip Code 97224	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED		Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Charlotte Fowler		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 1800 Stonelake Drive		Transaction ID: 1844322	
City Cleveland	State OH	Zip Code 44122	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED		Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Mr. Wyman B. Fowler		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 2107 Mallard Drive		Transaction ID: 1845977	
City Lancaster	State PA	Zip Code 17601	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Intermediate Unit # 13 Occupation Adult Education Instructor		Aggregate Year-to-Date ▼ 2000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	2125.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1047 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Terry W. Francis		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 23 Foreman Drive		Transaction ID: 1839389
City State Zip Code Glen Carbon IL 62034	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 425.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Deborah Franczek		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 5555 S. Everett		Transaction ID: 1836705
City State Zip Code Chicago IL 60637	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation University of Chicago Dir. Alumni Relations	Aggregate Year-to-Date ▼ 3000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. David Frane		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 150 Castle Crest Road		Transaction ID: 1844420
City State Zip Code Alamo CA 94507	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1335.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1048 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Claire L. Frankel		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 137 East 36th Street, # 17A		Transaction ID: 1840883	
City State Zip Code New York NY 10016	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Goldman Sachs	Occupation IT Specialist		
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. Mr. Lemuel Fraser		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 5741 Elder Place		Transaction ID: 1844433	
City State Zip Code Madison WI 53705	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
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. Dr. Ralph Frates, Jr.		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5	
Mailing Address 3602 University Boulevard		Transaction ID: 1845212	
City State Zip Code Houston TX 77005	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer U of Texas	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1049 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Martha C. Frede		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 3420 Pinnacle Road		Transaction ID: 1837089
City State Zip Code Austin TX 78746	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Stephanie Free		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 1120 Cornell, Apt. One		Transaction ID: 1840674
City State Zip Code Albany CA 94706	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Kaiser Permanente Research Assistant	Aggregate Year-to-Date ▼ 230.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mrs. Anne Freedman		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 543 Riverside Drive East		Transaction ID: 1842846
City State Zip Code Princeton NJ 08540	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	320.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1050 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Ellen C. Freidin		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 3182 Monroe Drive		Transaction ID: 1840852	
City State Zip Code Coconut Grove FL 33133	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Akerman Senterfitt & Edison	Occupation Lawyer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00		

B. Full Name (Last, First, Middle Initial) Dr. Morris Freidin		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 5606 Hill Oak Drive		Transaction ID: 1844285	
City State Zip Code Los Angeles CA 90068	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

C. Full Name (Last, First, Middle Initial) Ms. Ruth King Freymann		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 2 Catalpa Court		Transaction ID: 1839327	
City State Zip Code Avon CT 06001	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 435.00		

SUBTOTAL of Receipts This Page (optional) ▶	385.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1051 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Dr. Richard Friedberg		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address PO Box 776		Transaction ID: 1841344	
City New York	State NY	Zip Code 10033	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Barnard College	Occupation Physicist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

B. Full Name (Last, First, Middle Initial) Mr. Bern Friedelson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 103 Brets Rd		Transaction ID: 1844212	
City Brattleboro	State VT	Zip Code 05301	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

C. Full Name (Last, First, Middle Initial) Ms. Maryann K. Friedman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 700 New Hampshire Ave., NW # 102		Transaction ID: 1837291	
City Washington	State DC	Zip Code 20037	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00		

SUBTOTAL of Receipts This Page (optional) ▶	1400.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 1052 / 1975
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Kay Friedman

Mailing Address 9321 Menard Avenue

City State Zip Code
Morton Grove IL 60053

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837064

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Ms. Delyte Frost

Mailing Address 430 Oak Lane

City State Zip Code
Media PA 19063

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

Name of Employer Occupation
Cygnus Inc. consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1839737

Amount of Each Receipt this Period
30.00

C. Full Name (Last, First, Middle Initial)
Ms. Patti L. Fry

Mailing Address 1045 Wallea Drive

City State Zip Code
Menlo Park CA 94025

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 5

Transaction ID: 1840874

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **380.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1053 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Nancy Fuller		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 6560 Itchy Acres Road		Transaction ID: 1844088
City State Zip Code Granite Bay CA 95746	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer State of California	Occupation State Park Ranger	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

Full Name (Last, First, Middle Initial) B. Rep. Elaine E. Fuller		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address PO Box 187		Transaction ID: 1839075
City State Zip Code Manchester ME 04351	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation REQUESTED	
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. Ms. Laurie S. Fulton		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5
Mailing Address 510 Cameron St		Transaction ID: 1838354
City State Zip Code Alexandria VA 22314	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Williams & Connolly	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	625.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1054 / 1975
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Mary Ellen Furstenberg		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 3566 LLoyd Drive		Transaction ID: 1838564	
City State Zip Code Ft Lauderdale FL 33309	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Nurse Anesthetist	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Dr. Kathleen A. Gaffney		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address 590 Concord Ave		Transaction ID: 1836259	
City State Zip Code Williston Park NY 11596	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Columbia University Occupation Professor	Aggregate Year-to-Date ▼ 1300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Dorothy Gage		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5	
Mailing Address 8000 SW 54th Avenue		Transaction ID: 1844538	
City State Zip Code Portland OR 97219	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 850.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	580.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1055 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Mary Gaggino		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address PO Box 685		Transaction ID: 1840006
City State Zip Code Throckmorton TX 76483	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Homemaker	Aggregate Year-to-Date ▼ 840.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Mary Gaggino		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address PO Box 685		Transaction ID: 1842369
City State Zip Code Throckmorton TX 76483	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Homemaker	Aggregate Year-to-Date ▼ 840.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Marie Lee Gaillard		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5
Mailing Address P.O. Box 227		Transaction ID: 1841928
City State Zip Code Fishers Isle NY 06390	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 700.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	285.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1056 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Catherine M. Gale		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 11651 E Camino Lejano		Transaction ID: 1840420
City State Zip Code Tucson AZ 85748	Amount of Each Receipt this Period 21.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 260.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Diane Gallivan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 4339 Squire Heath Road		Transaction ID: 1844355
City State Zip Code Portage MI 49024	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Office	Aggregate Year-to-Date ▼ 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Georgine Gambler		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address 505 Pawnee Street		Transaction ID: 1836420
City State Zip Code Bethlehem PA 18015	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Case Worker	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	221.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1057 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Mary Gardner		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 61 Ellenwood Avenue		Transaction ID: 1840408
City State Zip Code Los Gatos CA 95030	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 575.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mrs. Barbara Friedson Garrett		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address 301 Casuarina Concourse		Transaction ID: 1837737
City State Zip Code Coral Gables FL 33143	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Executive VP for Sales	Aggregate Year-to-Date ▼ 3500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Miss Alice Marie Garrison		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 3737 Atlantic Avenue Apt. 1405		Transaction ID: 1845191
City State Zip Code Long Beach CA 90807	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1185.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1058 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Rose Gasner		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 188 6th Avenue		Transaction ID: 1842465
City State Zip Code Brooklyn NY 11217	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer NYC Dept of Health & Mental Hygiene	Occupation policy director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B. Full Name (Last, First, Middle Initial) Ms. Catherine Gaspar		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 2016 E. Republican Street		Transaction ID: 1845071
City State Zip Code Seattle WA 98112	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation General Contractor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

C. Full Name (Last, First, Middle Initial) Ms. Fay Gaul		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 1290 Kennedy Rd		Transaction ID: 1839386
City State Zip Code Arnoldsville GA 30619	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Agatha's Search	Occupation Private Investigator	
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) ▶	775.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1059 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Richard Gause		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 8813 Williamson Dr		Transaction ID: 1839604
City Elk Grove	State CA	Zip Code 95624
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer	Occupation Retired	
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) B. Ms. Jean Gelardo		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 350 Ponca Place Apt. 432		Transaction ID: 1840309
City Boulder	State CO	Zip Code 80303
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer	Occupation REQUESTED	
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. Mrs. Beverly P. Gelwick		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 12 Prosser Road		Transaction ID: 1839490
City S Harpswell	State ME	Zip Code 04079
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional) ▶	90.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1060 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Anne C. Gentil-Archer		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 1744 115th Street		Transaction ID: 1840308
City State Zip Code West Liberty IA 52776	Amount of Each Receipt this Period 24.50	
FEC ID number of contributing federal political committee. C		
Name of Employer SEIU	Occupation Union Representative	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

Full Name (Last, First, Middle Initial) B. Ms. Mary Jane Gentry		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 680 Eaton Street		Transaction ID: 1844263
City State Zip Code Memphis TN 38120	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Karen Ostrum George		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 2328 Rice Blvd.		Transaction ID: 1840947
City State Zip Code Houston TX 77005	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Ralph S. O'Connor & Associates	Occupation Financial consultant	
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) ▶	724.50
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1061 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Jean Gerhardt		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5	
Mailing Address 11479 Dutchman Creek		Transaction ID: 1841232	
City Lovettsville	State VA	Zip Code 20180	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00		

Full Name (Last, First, Middle Initial) B. Mr. Donald P. Germain		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 7019 Sonora Court		Transaction ID: 1840292	
City Ventura	State CA	Zip Code 93003	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 395.00		

Full Name (Last, First, Middle Initial) C. Ms. Beatrice Gersh		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address 804 North Foothill Road		Transaction ID: 1836762	
City Beverly Hills	State CA	Zip Code 90210	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer The Gersh Agency	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	120.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1062 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Rhonda Gerson		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 10913 Roaring Brook Lane		Transaction ID: 1840853	
City State Zip Code Houston TX 77024	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Jeanne K. Gerson		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 333 N. Palm Drive, Apt. 105		Transaction ID: 1844298	
City State Zip Code Beverly Hills CA 90210	Amount of Each Receipt this Period 125.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Administrative Asst.	Aggregate Year-to-Date ▼ 425.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Renate Gerulaitis		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 4 Southwick Court		Transaction ID: 1837293	
City State Zip Code Ann Arbor MI 48105	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Professor	Aggregate Year-to-Date ▼ 275.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1063 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Renate Gerulaitis		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 4 Southwick Court		Transaction ID: 1844341	
City State Zip Code Ann Arbor MI 48105		Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Oakland University Professor			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) B. Ms. Margaret F. M. Getaz		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 921 Harvard Avenue		Transaction ID: 1844308	
City State Zip Code Swarthmore PA 19081		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) C. Dr. Beverly J. Gibbs		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address P.O. Box 279		Transaction ID: 1844242	
City State Zip Code Manchaca TX 78652		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1064 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Frankie A. Gibson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 9989 Oakton Terrace Road		Transaction ID: 1839532
City State Zip Code Oakton VA 22124	Amount of Each Receipt this Period 18.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 330.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Mary E. Giddens		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address PO Box 328		Transaction ID: 1844279
City State Zip Code LaBelle FL 33975	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Diamond G Ranch Cattle Rancher	Aggregate Year-to-Date ▼ 800.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Hon. Kay A Giese		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 157 Gibbons Place		Transaction ID: 1840942
City State Zip Code Athens GA 30605	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Athens-Clarke County, Georgia Municipal Court Judge	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	368.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1065 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Leah Myers Giessing		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 1716 Stone Ridge Trail		Transaction ID: 1842325	
City State Zip Code Saint Louis MO 63122	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Actor	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Mr. James Giglio		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address 6237 Calhoun Street		Transaction ID: 1845070	
City State Zip Code Dearborn MI 48126	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Lucia A. Gilbert		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 4402 Balcones Drive		Transaction ID: 1840854	
City State Zip Code Austin TX 78731	Amount of Each Receipt this Period 375.00		
FEC ID number of contributing federal political committee. C			
Name of Employer University of Texas - Austin Occupation Professor	Aggregate Year-to-Date ▼ 1500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	525.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1066 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Charlotta Gilbride		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 3 Murchison Place		Transaction ID: 1840678
City State Zip Code White Plain NY 10605	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation Nurse Investigator	Aggregate Year-to-Date ▼ 370.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Trudy S. Gildea		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 220 3rd Street South		Transaction ID: 1841221
City State Zip Code Columbus MS 39701	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Gwen J. Gillis		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 4722 Amberwood Court		Transaction ID: 1842473
City State Zip Code Carlsbad CA 92008	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 450.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1067 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Dr. Priscilla A. Gilman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 4537 Deer Run		Transaction ID: 1840927	
City State Zip Code Evans GA 30809		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Medical College of GA		Occupation Physician educator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1450.00	

B. Full Name (Last, First, Middle Initial) Ms. Rachel Ginsburg		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 1970 Broadway Ste. 1200		Transaction ID: 1844208	
City State Zip Code Oakland CA 94612		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self		Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

C. Full Name (Last, First, Middle Initial) Ms. Joan S. Girgus		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 306 Ridgeview Road		Transaction ID: 1844225	
City State Zip Code Princeton NJ 08540		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Princeton University		Occupation Professor	
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) ▶	450.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1068 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Edna Glaessel		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address PO Box 629		Transaction ID: 1836729
City State Zip Code Sugar Hill NH 03586	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 1150.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Ms. Sarah B. Glickenhau		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 100 Dorchester Road		Transaction ID: 1841479
City State Zip Code Scarsdale NY 10583	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Speech and Hearing Therapist	Aggregate Year-to-Date ▼ 850.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Mrs. Ana Goldberg		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 36 Glen Garry Drive		Transaction ID: 1837313
City State Zip Code Aspen CO 81611	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Homemaker	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	6250.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1069 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Lesley E. Goldberg		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 822 Greenwich Street, # 2A		Transaction ID: 1841023
City State Zip Code New York NY 10014	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer JPMorgan Chase Bank, N.A.	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) B. Ms. Lynne Gold-Bikin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 307 Hughes Road		Transaction ID: 1841162
City State Zip Code King of Prussia PA 19406	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Wolf Block Schorr & Solis-Cohen	Occupation Attorney	
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. Ms. Janice L. Goldblum		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5
Mailing Address 10501 Wilshire Blvd. Unit 701		Transaction ID: 1841885
City State Zip Code Los Angeles CA 90024	Amount of Each Receipt this Period 125.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

SUBTOTAL of Receipts This Page (optional) ▶	625.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1070 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. David M. Golden		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 460 El Capitan Place		Transaction ID: 1837093
City State Zip Code Palo Alto CA 94306	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Stanford University	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) B. Ms. Lee Golden		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 47 Thouchstone Way		Transaction ID: 1838571
City State Zip Code Millwood NY 10546	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		
Name of Employer		Occupation REQUESTED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

Full Name (Last, First, Middle Initial) C. Ms. Muriel E. Goldman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 1280 SW Mary Failing Drive		Transaction ID: 1844287
City State Zip Code Portland OR 97219	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer		Occupation REQUESTED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

SUBTOTAL of Receipts This Page (optional) ▶	585.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1071 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Phyllis Goldman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5
Mailing Address 72 Mamaroneck Road		Transaction ID: 1844564
City State Zip Code Scarsdale NY 10583	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer New Israel Fund	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Mrs. Margot L. Goldsmith		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 2255 Tanglewood Drive		Transaction ID: 1838638
City State Zip Code Aurora IL 60506	Amount of Each Receipt this Period 125.00	
FEC ID number of contributing federal political committee. C		
Name of Employer self-employed	Occupation freelance editor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) C. Dr. Lynne Rooth Golomb		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5
Mailing Address 999 N Lake Shore Dr # 2B		Transaction ID: 1842031
City State Zip Code Chicago IL 60611	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation Psychologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

SUBTOTAL of Receipts This Page (optional) ▶	1625.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1072 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Margaret Goodart		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5
Mailing Address PO Box 1048		Transaction ID: 1838411
City State Zip Code Quincy CA 95971	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CSU - Sacramento	Occupation History Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Ms. Ann V. Gordon		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 1108 Dalebrook Drive		Transaction ID: 1844382
City State Zip Code Alexandria VA 22308	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Sydna H. Gordon		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 1309 Carriage Lane		Transaction ID: 1841431
City State Zip Code Garland TX 75043	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Gay & McCall, Inc.	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) ▶	5200.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1073 / 1975						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Judith S. Gordon		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 1483 Buck Creek Drive		Transaction ID: 1842343	
City State Zip Code Yardley PA 19067		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Richard D. Gordon, M.D., P.A.		Occupation Busines Manager	
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) B. Ms. Susan G. Gordon		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 3 Cooper Morris Drive		Transaction ID: 1838869	
City State Zip Code Pomona NY 10970		Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 690.00	

Full Name (Last, First, Middle Initial) C. Ms. Eily Gorman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 1018 21st Street Apt. D		Transaction ID: 1842766	
City State Zip Code Santa Monica CA 90403		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional) ▶	335.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1074 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Leslie Gould		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address 165 Brattle Street		Transaction ID: 1844717	
City State Zip Code Cambridge MA 02138	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Artist		
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) B. Ms. Margery A. Gould		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 5671 Spreading Oak Drive		Transaction ID: 1839394	
City State Zip Code Los Angeles CA 90068	Amount of Each Receipt this Period 17.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		

Full Name (Last, First, Middle Initial) C. Mrs. Ethel Gould		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 757 Flume Court		Transaction ID: 1842538	
City State Zip Code Milpitas CA 95035	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Santa Clara Medical Center	Occupation RN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

SUBTOTAL of Receipts This Page (optional) ▶	292.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1075 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Mary R. Granger		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5
Mailing Address 8 Primrose St.		Transaction ID: 1844551
City State Zip Code Chevy Chase MD 20815	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Ms. Koene R. Graves		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address 2525 Old Grove Lane		Transaction ID: 1837715
City State Zip Code Paso Robles CA 93446	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Executive	Aggregate Year-to-Date ▼ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Ms. Shannon Graving		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 535 N. Longfellow Street		Transaction ID: 1844217
City State Zip Code Arlington VA 22203	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1076 / 1975
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Otis T. Gray		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 392 Cecilia Drive		Transaction ID: 1838142	
City State Zip Code Memphis TN 38117	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Small Business	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Barbara T. Gray		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 921 SW 69th Terrace		Transaction ID: 1840848	
City State Zip Code Plantation FL 33317	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Vitas Healthcare Occupation Healthcare Exec.	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Dr. Gail B. Greenblatt		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 621 Millers Dam Court		Transaction ID: 1839453	
City State Zip Code Ponte Vedra Beach FL 32082	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 230.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	620.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1077 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Anita U. Greene		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address 561 Station Road		Transaction ID: 1836758	
City Amherst	State MA	Zip Code 01002	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED		Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Judith Greene		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 7 / 2 0 0 5	
Mailing Address 80 Central Park W. Apt. 6B		Transaction ID: 1845199	
City New York	State NY	Zip Code 10023	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired		Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Paula L. Greeno		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 100 Dhu Varren Road		Transaction ID: 1840939	
City Ann Arbor	State MI	Zip Code 48105	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer University of Michigan Occupation Consultant		Aggregate Year-to-Date ▼ 750.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	450.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1078 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sally Greenspan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 139 West 19th Street Apt. 5NE		Transaction ID: 1841432
City State Zip Code New York NY 10011	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1100.00	

Full Name (Last, First, Middle Initial) B. Ms. Fay Greenwald		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 258 Evandale Road		Transaction ID: 1845198
City State Zip Code Scarsdale NY 10583	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Nancy Greenwood		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 486 N State Street		Transaction ID: 1838772
City State Zip Code Concord NH 03301	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		
Name of Employer nancy greenwood smith insurance agency Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Insurance Sales Aggregate Year-to-Date ▼ 405.00	

SUBTOTAL of Receipts This Page (optional) ▶	285.00
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1079 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Maryann I Gregory		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5	
Mailing Address 1429 n dearborn 4n		Transaction ID: 1841280	
City State Zip Code Chicago IL 60610		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Anxiety Treatment Center		Occupation Psychologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2200.00	

Full Name (Last, First, Middle Initial) B. Ms. Cheryl L Gregory		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 4551 Sawgrass Court		Transaction ID: 1837288	
City State Zip Code Alexandria VA 22312		Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C			
Name of Employer EMILY's List		Occupation Development Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Ms. Linda Greider		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 5931 Utah Avenue NW		Transaction ID: 1841018	
City State Zip Code Washington DC 20015		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1100.00	

SUBTOTAL of Receipts This Page (optional) ▶	1600.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1080 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Laura Griesedieck		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 7712 Missy Court		Transaction ID: 1836751
City State Zip Code Saint Louis MO 63123	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer YMCA	Occupation Fitness Instructor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Ms. Mary Ann Grilli		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 328 Oxford Avenue		Transaction ID: 1843309
City State Zip Code Palo Alto CA 94306	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Santa Clara County	Occupation Judge	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Dr. Marcy Gringlas		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 727 Merion Square Rd		Transaction ID: 1844368
City State Zip Code Gladwyne PA 19035	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Thomas Jefferson University	Occupation Psychologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	850.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1081 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Nancy Grosfeld		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 420 Martell Drive		Transaction ID: 1836974	
City State Zip Code Bloomfield Hills MI 48304	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Aggregate Year-to-Date ▼ 850.00		

Full Name (Last, First, Middle Initial) B. Ms. Jennifer Gross		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 265 Wyoming Street West		Transaction ID: 1841993	
City State Zip Code Saint Paul MN 55107	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 750.00		

Full Name (Last, First, Middle Initial) C. Ms. Kathy Gross		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address 4180 Dimholt Court		Transaction ID: 1845028	
City State Zip Code Winston Salem NC 27104	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 225.00		

SUBTOTAL of Receipts This Page (optional) ▶	700.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1082 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Janet Gross		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 4648 Pleasant View Drive		Transaction ID: 1841050
City State Zip Code Coopersburg PA 18036	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Ms. Jill Grossberg		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 38 Green Street		Transaction ID: 1842527
City State Zip Code Milton MA 02186	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Rochelle F. Grossman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 8050 Baxter Avenue Apt. 3D		Transaction ID: 1842236
City State Zip Code Elmhurst NY 11373	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1083 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Jodi L. Gunther		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 3108 Oak Terrace		Transaction ID: 1842000	
City State Zip Code Island Lake IL 60042	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Northwest Comm Hospital	Occupation RN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. Ms. Margaret J. Gurau		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 1115 N. Hyland Avenue		Transaction ID: 1842901	
City State Zip Code Ames IA 50014	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

Full Name (Last, First, Middle Initial) C. Mr. Howard F. Gustafson		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 324 N. Park Avenue		Transaction ID: 1844326	
City State Zip Code Indianapolis IN 46202	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
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) ▶	700.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1084 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Lynn Hackney		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5	
Mailing Address 1761 Church St., NW		Transaction ID: 1844624	
City Washington	State DC	Zip Code 20036	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer Hoover Partners	Occupation Attorney		
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) B. Dr. Gay B. Hadley		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 248 West Poplar		Transaction ID: 1838593	
City Columbus	State OH	Zip Code 43215	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Mr. Harry Haiblum		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address 5100 Washington Street Apartment 301		Transaction ID: 1845060	
City Hollywood	State FL	Zip Code 33021	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional) ▶	1200.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1085 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Ruth R. Hailperin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5
Mailing Address 175 W. North Street, Apt. 234C		Transaction ID: 1842008
City State Zip Code Nazaret PA 18064	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Ms. Maxine C. Hairston		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 1809 Rockmoor Avenue		Transaction ID: 1844777
City State Zip Code Austin TX 78703	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1200.00	

Full Name (Last, First, Middle Initial) C. Mr. Charles E. Haley		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 15426 W. Fairmount Avenue		Transaction ID: 1841398
City State Zip Code Goodyear AZ 85338	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1086 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Janet Hall		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5
Mailing Address 111 Emerson St Apt 1441		Transaction ID: 1842059
City State Zip Code Denver CO 80218	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Kathleen D. Hall		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 2034 N Old Stage Rd		Transaction ID: 1839923
City State Zip Code Mount Shasta CA 96067	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Self Sales	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Kathleen B. Halloran		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 825 17th Street S.E.		Transaction ID: 1840871
City State Zip Code Cedar Rapids IA 52403	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	365.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1087 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Lee Halprin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 104 Irving Street		Transaction ID: 1843016
City State Zip Code Cambridge MA 02138	Amount of Each Receipt this Period 3000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation Writer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) B. Mrs. Barbara Hamilton		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 2884 SE Treasure Island Road		Transaction ID: 1844252
City State Zip Code Port St. Lucie FL 34952	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) C. Mrs. Earl Hamlin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 5818 Ivanhoe Road		Transaction ID: 1846087
City State Zip Code Oakland CA 94618	Amount of Each Receipt this Period 125.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional) ▶	3150.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1088 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Eileen Hamper		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 1300 Burrows Road		Transaction ID: 1838861	
City State Zip Code Campbell CA 95008		Amount of Each Receipt this Period 17.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Becton Dickinson Biosciences Cytometrist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.50	

Full Name (Last, First, Middle Initial) B. Ms. Martha H. Hanrott		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 1424 33rd Street, NW		Transaction ID: 1843203	
City State Zip Code Washington DC 20007		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Self Writer			
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. Ms. Kristen G. Hansen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 3301 W. Spring Mountain Rd. Suite 8		Transaction ID: 1840886	
City State Zip Code Las Vegas NV 89102		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Self - Kristen & Friends Sales			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	517.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1089 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Dr. Helen E Hansen

Mailing Address 455 Otis Avenue

City State Zip Code
St. Paul MN 55104

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

Name of Employer Occupation
University of Minnesota Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837105

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Ms. Amy Axt Hanson

Mailing Address 923 N. Lawrence Street

City State Zip Code
Tacoma WA 98406

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

Name of Employer Occupation
Self-employed Writer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1840302

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Ms. Margaret S. Hansson

Mailing Address 2220 Norwood Ave

City State Zip Code
Boulder CO 80304

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

Name of Employer Occupation
Adrop Inc. CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1841490

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional)	▶	250.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1090 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Carol Harding		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 1100 S Hickory Trail		Transaction ID: 1840396	
City State Zip Code Avon Park FL 33825	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 440.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Deborah A. Harding		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 2500 Q Street NW		Transaction ID: 1837041	
City State Zip Code Washington DC 20007	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 400.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Frances Harmon		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 3714 Inwood		Transaction ID: 1841499	
City State Zip Code Houston TX 77019	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Homemaker	Aggregate Year-to-Date ▼ 1450.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	485.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1091 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Susan Harrington		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5	
Mailing Address 8848 Dawson Country Lane		Transaction ID: 1845182	
City State Zip Code Grass Lake MI 49240	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Mr. Robert D. Harris		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 640 N. Eisenhower Street Apt. 318		Transaction ID: 1844233	
City State Zip Code Moscow ID 83843	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Dr. Linda R. Harris		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5	
Mailing Address 743 North Phoenix Road		Transaction ID: 1841261	
City State Zip Code Medford OR 97504	Amount of Each Receipt this Period 375.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Physician	Aggregate Year-to-Date ▼ 375.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	675.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1092 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Nancy G. Harter		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 201 South Glenwood Ave		Transaction ID: 1840899
City State Zip Code Columbia MO 65203	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00	

Full Name (Last, First, Middle Initial) B. Ms. Carol E. Hartman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5
Mailing Address 626 N. Dearborn Street #111		Transaction ID: 1841875
City State Zip Code Redlands CA 92374	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED Occupation registered nurse		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) C. Dr. Hollister Hartman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 7621 Tremayne Place Apartment #112		Transaction ID: 1839250
City State Zip Code McLean VA 22102	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		
Name of Employer VDO Car Communication Occupation Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 490.00	

SUBTOTAL of Receipts This Page (optional) ▶	285.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1093 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Katherine Hartnett		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 40 Thurston Pond Road		Transaction ID: 1838696
City State Zip Code Deerfield NH 03037	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 275.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Harry Harvin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 2600 Croasdaile Farm Pkwy A310 The Homestead		Transaction ID: 1839520
City State Zip Code Durham NC 27705	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 290.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Mary M. Harwood		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 1230 Woodland Lane		Transaction ID: 1842796
City State Zip Code Bountiful UT 84010	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 275.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	130.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1094 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Phyllis Havener		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 1859 Beford Road		Transaction ID: 1841283
City State Zip Code Columbus OH 43212	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 410.00	

Full Name (Last, First, Middle Initial) B. Ms. Mildred Hawley		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 4426 Pepperwood Avenue		Transaction ID: 1839110
City State Zip Code Long Beach CA 90808	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 440.00	

Full Name (Last, First, Middle Initial) C. Mrs. Claire L. Healy		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5
Mailing Address 1126 Broadmoor Drive		Transaction ID: 1842010
City State Zip Code Napa CA 94558	Amount of Each Receipt this Period 110.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional) ▶	245.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1095 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Josephine W Heath		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5	
Mailing Address 2455 Vassar Dr		Transaction ID: 1835597	
City State Zip Code Boulder CO 80305	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer The Community Foundation	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00		

Full Name (Last, First, Middle Initial) B. Mr. J. Michael Heaton		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 30 N. LaSalle Suite 4100		Transaction ID: 1837094	
City State Zip Code Chicago IL 60603	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer St. Anthonious School	Occupation Teacher		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) C. Ms. Joan M. Hebert		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 5455 8th Street Unit 66		Transaction ID: 1839540	
City State Zip Code Carpinteria CA 93013	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
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) ▶	5525.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1096 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Ann F. Hecht		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 1152 Laruel Street		Transaction ID: 1844810
City State Zip Code Berkeley CA 94708	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation writer/activist/homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) B. Ms. Lana Heckenberg		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 14221 Summit Lane		Transaction ID: 1840925
City State Zip Code Laurel MD 20708	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
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) C. Ms. Margaret A. Hefner		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 715 N Price Road		Transaction ID: 1843371
City State Zip Code Olivette MO 63132	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer St. Louis University School of Medicine Occupation Genetic Counselor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	1350.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1097 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Edith Heilman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 5682 Spreading Oak Drive		Transaction ID: 1845613	
City State Zip Code Los Angeles CA 90068	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Charles Schwab	Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) B. Dr. Susan Sage Heinzelman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 6106 cherrylawn circle		Transaction ID: 1840035	
City State Zip Code austin TX 78723	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer university of texas	Occupation Professor of English		
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. Ms. Allene Helgeson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 12618 N. Via Del Sol		Transaction ID: 1841956	
City State Zip Code Fountain Hills AZ 85268	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	1125.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1098 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Jean M. Helliesen		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 4418 Juniper Street		Transaction ID: 1842889	
City State Zip Code La Crosse WI 54601	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 350.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Mr. Bruce Hellmer		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 4000 Pleasant Valley		Transaction ID: 1842744	
City State Zip Code Brighton MI 48114	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 235.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Katherine Henderson		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 7 / 2 0 0 5	
Mailing Address 5435 Aylesboro Avenue		Transaction ID: 1837731	
City State Zip Code Pittsburgh PA 15217	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 450.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	330.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1099 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Jane L. Henner		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 10 Brown Pelican Road		Transaction ID: 1842880
City State Zip Code Hilton Head SC 29928	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Aggregate Year-to-Date ▼ 1250.00	

Full Name (Last, First, Middle Initial) B. Mrs. Barbara Henry		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 2700 Broadway		Transaction ID: 1842363
City State Zip Code San Francisco CA 94115	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Real Estate Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) C. Mr. John Henry		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 54 Riverside Drive, Apt. 16B		Transaction ID: 1837545
City State Zip Code New York NY 10024	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Freelance Writer Aggregate Year-to-Date ▼ 1500.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1100 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Deborah R Hensler		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 1001 Smith Road		Transaction ID: 1836666	
City State Zip Code Watsonville CA 95076	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Stanford University	Occupation law professor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00		

Full Name (Last, First, Middle Initial) B. Ms. Catherine Winkler Herman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 4900 Seminary Road, 9th Fl		Transaction ID: 1837588	
City State Zip Code Alexandria VA 22311	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Ms. Catherine Winkler Herman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 4900 Seminary Road, 9th Fl		Transaction ID: 1837576	
City State Zip Code Alexandria VA 22311	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	550.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1101 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Beatrice B. Herrick		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 888 Robb Road		Transaction ID: 1840830
City State Zip Code Palo Alto CA 94306	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Santa Clara County	Occupation Mediator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) B. Ms. Mary B. Hewlett		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5
Mailing Address 64 Main Street		Transaction ID: 1841924
City State Zip Code Dover MA 02030	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Constance C. Hickey		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 11905 Jubal Early Court		Transaction ID: 1844189
City State Zip Code Potomac MD 20854	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional) ▶	550.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1102 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Cornelia Higginson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 410 East 57th Street Number 3D		Transaction ID: 1841178
City State Zip Code New York NY 10022	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer American Express	Occupation Executive	
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) B. Mrs. D. Highiet		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 3113 Grey Eagle Drive		Transaction ID: 1839932
City State Zip Code Walnut Creek CA 94595	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Eleanor M. Hill		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 1020 W Oak Street		Transaction ID: 1840873
City State Zip Code Fort Collins CO 80521	Amount of Each Receipt this Period 68.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation unemployed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 554.00	

SUBTOTAL of Receipts This Page (optional) ▶	348.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1103 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. April B. Hill		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5	
Mailing Address 1620 Meadowview Drive		Transaction ID: 1844576	
City State Zip Code Medford OR 97504	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) Ms. Jennifer A. Hillman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 4719 Sedgwick Street, N.W.		Transaction ID: 1842478	
City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation U.S. International Trade Commissioner	Aggregate Year-to-Date ▼ 1100.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) Ms. Dorothy S. Hines		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address PO Box 274		Transaction ID: 1844085	
City State Zip Code Warren VT 05674	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation self Homemaker	Aggregate Year-to-Date ▼ 3000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	1350.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1104 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Jean C. Hink		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 8108 Pennsylvania Road S.		Transaction ID: 1838986
City State Zip Code Minneapolis MN 55438	Amount of Each Receipt this Period 21.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Phillips Eye Inst.	Occupation C.R.N.A.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

B. Full Name (Last, First, Middle Initial) Ms. Carol Hires		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 255 James Street		Transaction ID: 1839736
City State Zip Code Morristown NJ 07960	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer The Hires Wellness Center, LLC	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C. Full Name (Last, First, Middle Initial) Mrs. Jeanne Hirschberg		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 8719 Walmer St		Transaction ID: 1838896
City State Zip Code Overland Park KS 66212	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	76.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1105 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. George A. Hisert		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 454 Cragmont Avenue		Transaction ID: 1844292
City State Zip Code Berkeley CA 94708	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Brobeck, Phleger & Harris	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) B. Ms. Cindy Hodges		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 4948 W Drummond Pl		Transaction ID: 1840454
City State Zip Code Chicago IL 60639	Amount of Each Receipt this Period 24.50	
FEC ID number of contributing federal political committee. C		
Name of Employer Murphy, Peters and Davis	Occupation Investigator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

Full Name (Last, First, Middle Initial) C. Ms. Mary Alice Hoffman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 1428 Johnnys Way		Transaction ID: 1839983
City State Zip Code West Chester PA 19382	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	274.50
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1106 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Janet Hofmann		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 3889 Harvest Drive		Transaction ID: 1845656	
City State Zip Code Redwood City CA 94061	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 254.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) Ms. Joan H. Holland		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address 1600 Green Bay Road Apt. 301		Transaction ID: 1845095	
City State Zip Code Highland Park IL 60035	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 400.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) Ms. Ruth M. Holland		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 24 Peacock Court		Transaction ID: 1840837	
City State Zip Code San Rafael CA 94901	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation President	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	675.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1107 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Albert Holland		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 2831 Granville Avenue		Transaction ID: 1842841	
City State Zip Code Schenectady NY 12306	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Ms. Jane Holmes		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 3105 Fellowship Rd		Transaction ID: 1838816	
City State Zip Code Basking Ridge NJ 07920	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Ms. Rhoda L. Honigman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5	
Mailing Address PO Box 294		Transaction ID: 1837820	
City State Zip Code Oilville VA 23129	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 1500.00		

SUBTOTAL of Receipts This Page (optional) ▶	1275.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1108 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Lynn M Hooker		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 1003 South Palmer Ave.		Transaction ID: 1840199	
City State Zip Code Bloomington IN 47401	Amount of Each Receipt this Period 16.50		
FEC ID number of contributing federal political committee. C			
Name of Employer Indiana University	Occupation Professor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00		

Full Name (Last, First, Middle Initial) B. Ms. Alison B. Hooker		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 4814 Essex Ave.		Transaction ID: 1844439	
City State Zip Code Chevy Chase MD 20815	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Ernst & Young	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. Ms. Joyce J. Hooper		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 1629 Keystone Court		Transaction ID: 1841880	
City State Zip Code Clearwater FL 33756	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

SUBTOTAL of Receipts This Page (optional) ▶	366.50
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1109 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Barbara A. Hopfinger		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 773 N. 1st Street		Transaction ID: 1837455
City State Zip Code El Cajon CA 92021	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Ms. Janice H. Horn		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 32 Barber Street		Transaction ID: 1839962
City State Zip Code Clarion PA 16214	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired faculty Aggregate Year-to-Date ▼ 615.00	

Full Name (Last, First, Middle Initial) C. Ms. Eleanor Horton		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5
Mailing Address 500 Knollwood Road		Transaction ID: 1837880
City State Zip Code Ridgewood NJ 07450	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 235.00	

SUBTOTAL of Receipts This Page (optional) ▶	80.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1110 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Donna Howard		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 2005 Lakeshore Drive		Transaction ID: 1846058	
City Austin State TX Zip Code 78746	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Mr. James W. Howard		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 9939 W Riviera Drive		Transaction ID: 1840347	
City Sun City State AZ Zip Code 85351	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 365.00		

Full Name (Last, First, Middle Initial) C. Dr. Julianne R. Howell		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 2201 N Street, NW # 504		Transaction ID: 1843042	
City Washington State DC Zip Code 20037	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer UCSD Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Planner Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	885.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1111 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Dale M. Howey		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address PO Box 130876		Transaction ID: 1841022	
City State Zip Code Roseville MN 55113		Amount of Each Receipt this Period 70.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 610.00	

Full Name (Last, First, Middle Initial) B. Ms. B.J. Hoyt		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 4304 Ulrich Way		Transaction ID: 1843392	
City State Zip Code Sacramento CA 95822		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Ms. Leslie S. Hudson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 1525 Classen Drive		Transaction ID: 1842089	
City State Zip Code Oklahoma City OK 73106		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Unemployed Occupation Epidemiologist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	570.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1112 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Frances Huffman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 2400 Hoyt Street		Transaction ID: 1843301
City State Zip Code Winston Salem NC 27103	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Housewife	Aggregate Year-to-Date ▼ 725.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Frances Huffman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 2400 Hoyt Street		Transaction ID: 1845696
City State Zip Code Winston Salem NC 27103	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Housewife	Aggregate Year-to-Date ▼ 725.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. Kathy N. Hull		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 11 Sierra Avenue		Transaction ID: 1836951
City State Zip Code Piedmont CA 94611	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Self Psychologist	Aggregate Year-to-Date ▼ 1150.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	275.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1113 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Holley Humphrey		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5
Mailing Address 233 Rogue River Highway #173		Transaction ID: 1838391
City State Zip Code Grants Pass OR 97527	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Speaker/Trainer Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Ms. Betty Cochran Hunt		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 117 Shady Lane Court		Transaction ID: 1843308
City State Zip Code Roseville CA 95747	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 315.00	

Full Name (Last, First, Middle Initial) C. Mr. Richard Hunter		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 1310 Birch Lane		Transaction ID: 1843423
City State Zip Code Wilmington DE 19809	Amount of Each Receipt this Period 60.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 260.00	

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

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

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

FOR LINE NUMBER: PAGE 1114 / 1975
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Irene M. Hunter

Mailing Address RR2 Box 2640

City State Zip Code
Manchester Ctr VT 05255

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

Name of Employer Occupation
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
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838256

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
Dr. Evelyn Hurd

Mailing Address 3100 Shore Drive, Apt. 855

City State Zip Code
Virginia Beach VA 23451

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1839577

Amount of Each Receipt this Period
21.00

C. Full Name (Last, First, Middle Initial)
Ms. Marion Hussong

Mailing Address 223 Twin Lakes Road, Apt. F

City State Zip Code
North Branford CT 06471

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1840291

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional) ► **5056.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1115 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Mary Jo Hutton		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 5
Mailing Address 3131 NW Loop 410 #200		Transaction ID: 1843632
City State Zip Code San Antonio TX 78230	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Hulton Co. Inc. REQUESTED		
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. Ms. Jeanette W. Hyde		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 2405 Glenwood Avenue		Transaction ID: 1845695
City State Zip Code Raleigh NC 27608	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation US Government US Ambassador		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. Ms. Susan Iscol		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 1815 Francisco Street		Transaction ID: 1841529
City State Zip Code Berkeley CA 94703	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	2200.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 1116 / 1975
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Joseph S. Iseman

Mailing Address 211 East 70th Street
Apt. 33-C

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
Retired

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 5

Transaction ID: 1840928

Amount of Each Receipt this Period
625.00

B. Full Name (Last, First, Middle Initial)
Ms. Susan D Isgar

Mailing Address 7393 Villa D'Este Dr.

City State Zip Code
Sarasota FL 34238

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

Name of Employer Occupation
Retired

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 0 5

Transaction ID: 1841796

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mrs. Velda M Ishizaki

Mailing Address 513 2nd St

City State Zip Code
Manhattan Bch CA 90266

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

Name of Employer Occupation
LAUSD Teacher

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1846597

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **775.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1117 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sharon Jackson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 1211 Lexham Drive		Transaction ID: 1839938	
City State Zip Code Marietta GA 30068	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Mercer	Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. Mr. Alfred G. Jackson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5	
Mailing Address 210 East 18th Street		Transaction ID: 1841284	
City State Zip Code New York NY 10003	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) C. Ms. Sandra G. Jackson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 5200 Pocohontas Street		Transaction ID: 1840902	
City State Zip Code Bellaire TX 77401	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Psychotherapist		
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) ▶	5280.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1118 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Israel Jacobs		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 2455 Nott Street E		Transaction ID: 1837049	
City State Zip Code Schenectady NY 12309	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Physicist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) B. Dr. Geraldine Jacobson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address 3041 Newport Road NE		Transaction ID: 1836711	
City State Zip Code Iowa City IA 52240	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer University of Iowa	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1400.00		

Full Name (Last, First, Middle Initial) C. Ms. Catherine Jacobson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5	
Mailing Address 316 W 57th St		Transaction ID: 1838394	
City State Zip Code Hinsdale IL 60521	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer St. Luke's Medical Ctr	Occupation Chief Financial Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

SUBTOTAL of Receipts This Page (optional) ▶	850.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1119 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Meg Jandl

Mailing Address 45 Mt Vernon Street

City State Zip Code
Boston MA 02108

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837290

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ms. Meg Jandl

Mailing Address 45 Mt Vernon Street

City State Zip Code
Boston MA 02108

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1845044

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Ms. Delores F Jeffers

Mailing Address 5110 Stonehurst Road

City State Zip Code
Tampa FL 33647

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

Name of Employer Occupation
USF Faculty Administrator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 5

Transaction ID: 1841076

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1120 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Marguerite Jehle		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address 4717 Collinos Way		Transaction ID: 1836639	
City State Zip Code Oceanside CA 92056	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Barbara B. Jennings		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 7 / 2 0 0 5	
Mailing Address 4169 Silver Lake Road		Transaction ID: 1837647	
City State Zip Code Linden MI 48451	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 400.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Marla D. Jensen		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 1615 Bittern Court		Transaction ID: 1840943	
City State Zip Code Carlsbad CA 92011	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 1100.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1121 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Marilyn Jody		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 264 Dillard Road		Transaction ID: 1839228	
City State Zip Code Sylva NC 28779	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) B. Ms. Sylvia J. Johanns		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 528 Mission Santa Fe Circle		Transaction ID: 1844230	
City State Zip Code Chico CA 95926	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) C. Ms. Susan Johnson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 13757 400th Street		Transaction ID: 1840993	
City State Zip Code North Branch MN 55056	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Writer Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	375.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1122 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Alwyn N. Johnson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 4601 Rue Belle Mer		Transaction ID: 1836681	
City State Zip Code Sanibel FL 33957	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Housewife	Aggregate Year-to-Date ▼ 525.00	

Full Name (Last, First, Middle Initial) B. Ms. Alwyn N. Johnson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 4601 Rue Belle Mer		Transaction ID: 1842484	
City State Zip Code Sanibel FL 33957	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Housewife	Aggregate Year-to-Date ▼ 525.00	

Full Name (Last, First, Middle Initial) C. Shirley T. Johnson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 600 Driftwood Drive		Transaction ID: 1839003	
City State Zip Code Murray KY 42071	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Artist	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 1123 / 1975
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Vava M. Johnson

Mailing Address 7502 Loganberry Drive

City State Zip Code
Austin TX 78745

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845631

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Ms. Mary Johnston

Mailing Address 45 Hornbeck Lane

City State Zip Code
Accord NY 12404

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1839718

Amount of Each Receipt this Period
30.00

C. Full Name (Last, First, Middle Initial)
Ms. Mari J Joiner

Mailing Address 3333 E. Florida Avenue, # 92

City State Zip Code
Denver CO 80210

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 0 5

Transaction ID: 1844446

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **155.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1124 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Mary Robbins B. Jones		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address 1208 Berkeley		Transaction ID: 1844845	
City Richardson	State TX	Zip Code 75081	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1350.00	

Full Name (Last, First, Middle Initial) B. Mrs. Joan S. Jones		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 2209 Falcon Hill Place		Transaction ID: 1841951	
City Lynchburg	State VA	Zip Code 24503	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Mrs. Margaret L. Jones		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 2600 Baracks Road		Transaction ID: 1843400	
City Charlottesville	State VA	Zip Code 22901	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional)	480.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1125 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Deborah P. Jones-Steele		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 1128 Beacon St		Transaction ID: 1842747	
City State Zip Code Brookline MA 02446	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer TOWN OF BROOKLINE, MA	Occupation Parent Liason		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) B. Ms. Sarah Jordan-Holmes		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 3825 Henderson Blvd. Suite 402		Transaction ID: 1840847	
City State Zip Code Tampa FL 33629	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Prevent Blindness FL	Occupation Pres. & CEO		
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) C. Ms. Lavohn Josten		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 3864 Stratford Street		Transaction ID: 1842224	
City State Zip Code Lake Havasu City AZ 86404	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
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) ▶	450.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1126 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Mary Jourdan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5
Mailing Address 2140 Santa Cruz Avenue # E202		Transaction ID: 1841869
City State Zip Code Menlo Park CA 94025	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Maryanne J. Joyce		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5
Mailing Address 142 Nyac Avenue		Transaction ID: 1838390
City State Zip Code Pelham NY 10803	Amount of Each Receipt this Period 3500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Attorney	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Barry I. Judis		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 4201 Hayvenhurst Drive		Transaction ID: 1841052
City State Zip Code Encino CA 91436	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Mortgage Banker	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	3950.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1127 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Emily Mason Kahn		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 32 W 20th Street		Transaction ID: 1843223	
City State Zip Code New York NY 10011	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Artist	Aggregate Year-to-Date ▼ 3000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Shirley Kalb		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 1255 North Avenue		Transaction ID: 1843342	
City State Zip Code New Rochelle NY 10804	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Hadassah 50W.58 NY Occupation Administrator	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Glad Kaletta		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 4730 W 77th Street		Transaction ID: 1839001	
City State Zip Code Prairie Vlg KS 66208	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 450.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	1150.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1128 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Margaret Kaminski		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 22333 Hanson Court		Transaction ID: 1844295
City State Zip Code St. Clair Shores MI 48080	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Ms. Anastasia Kamp		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 218 Bellvale Lakes Road		Transaction ID: 1840487
City State Zip Code Warwick NY 10990	Amount of Each Receipt this Period 21.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) C. Dr. Madeleine A. Kane		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 1345 Birch Street		Transaction ID: 1845632
City State Zip Code Denver CO 80220	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional) ▶	191.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1129 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Rita J. Kaplan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 860 U.N. Plaza #25E		Transaction ID: 1841202
City State Zip Code New York NY 10017	Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation Executive	Aggregate Year-to-Date ▼ 550.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Betty Karnette		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 2805 Chestnut Avenue		Transaction ID: 1842705
City State Zip Code Long Beach CA 90806	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer State of CA Occupation Legislator	Aggregate Year-to-Date ▼ 850.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. Marvin Karno		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 4836 Oak Park Avenue		Transaction ID: 1838547
City State Zip Code Encino CA 91316	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 2000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	700.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1130 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. William B. Kash		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 33 Green Acre Lane		Transaction ID: 1839640
City State Zip Code Westport CT 06880	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 452.00	

Full Name (Last, First, Middle Initial) B. Ms. Gladys S. Kashdin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 441 Biltmore Avenue		Transaction ID: 1842752
City State Zip Code Temple Terrace FL 33617	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Ann Kaslow		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 1025 E 16th Street		Transaction ID: 1836268
City State Zip Code Brooklyn NY 11230	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	275.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1131 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Ann Kaslow		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 1025 E 16th Street		Transaction ID: 1838825
City State Zip Code Brooklyn NY 11230	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Amalie M. Kass		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 166 Todd Pond Road		Transaction ID: 1837298
City State Zip Code Lincoln MA 01773	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 2000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. Jane Frank Katcher		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 4197 South Douglas Road		Transaction ID: 1840895
City State Zip Code Miami FL 33133	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Banker	Aggregate Year-to-Date ▼ 1250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	2260.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1132 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sue R. Katoll		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 3838 LaMarque Ct.		Transaction ID: 1840295
City State Zip Code Columbus OH 43232	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation Free-Lance Writer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Ms. Ada Katz		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 435 W. Broadway		Transaction ID: 1843462
City State Zip Code New York NY 10012	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Alice C. Katzung		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 65 Knoll Road		Transaction ID: 1836617
City State Zip Code San Rafael CA 94901	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1133 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Tim Kauffman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 815 McGrann Blvd.		Transaction ID: 1840554
City State Zip Code Lancaster PA 17601	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Physical Occupation Self		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) B. Ms. Susan Kaufman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 6840 SW 11th Drive		Transaction ID: 1841201
City State Zip Code Portland OR 97219	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) C. Mr. Carl Kaysen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 41 Holden Street		Transaction ID: 1841494
City State Zip Code Cambridge MA 02138	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

SUBTOTAL of Receipts This Page (optional) ▶	530.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1134 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Phyllis Kayten		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 96 Churchill Ave		Transaction ID: 1838550	
City State Zip Code Palo Alto CA 94306		Amount of Each Receipt this Period 24.50	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Stanford University Reference Specialist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 245.00	

Full Name (Last, First, Middle Initial) B. Ms. Pamela J. Kedderis		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 42 Northwoods Road		Transaction ID: 1843311	
City State Zip Code Farmington CT 06032		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) C. Ms. Suzanne C. Keers		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 3 / 2 0 0 5	
Mailing Address 1946 W. Potomac, # 2W		Transaction ID: 1843043	
City State Zip Code Chicago IL 60622		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Innoveer Solutions Consulting Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2250.00	

SUBTOTAL of Receipts This Page (optional) ▶	1124.50
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1135 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Suzanne C. Keers		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 5	
Mailing Address 1946 W. Potomac, # 2W		Transaction ID: 1843633	
City State Zip Code Chicago IL 60622	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Innoveer Solutions	Occupation Consulting Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2250.00		

Full Name (Last, First, Middle Initial) B. Ms. Dennie R. Kelley		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5	
Mailing Address 4720 Santala Drive		Transaction ID: 1845190	
City State Zip Code Knoxville TN 37909	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer REQUESTED	Occupation REQUESTED		
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. Mr. Ralph H. Kellogg		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 1400 Geary Blvd Apt. 2103		Transaction ID: 1841871	
City State Zip Code San Francisco CA 94109	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	700.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1136 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Jason L. Kemp		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 16 Addison Rd		Transaction ID: 1840364
City Wilbraham	State MA	Zip Code 01095
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 24.50
Name of Employer None	Occupation Law Student	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 495.00	

Full Name (Last, First, Middle Initial) B. Mr. Jason L. Kemp		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 16 Addison Rd		Transaction ID: 1843638
City Wilbraham	State MA	Zip Code 01095
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer None	Occupation Law Student	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 495.00	

Full Name (Last, First, Middle Initial) C. Ms. Claudia Kennedy		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 36 Prospect Avenue		Transaction ID: 1836536
City Sausalito	State CA	Zip Code 94965
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	374.50
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1137 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Carol Kerievsky		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 11 Fieldstone Court		Transaction ID: 1843255	
City State Zip Code Randolph NJ 07869	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CarolSystems Inc.,	Occupation Systems Analyst		
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) B. Ms. Jane S. Kersenbrock		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 603 Pool Drive		Transaction ID: 1843011	
City State Zip Code Norton KS 67654	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00		

Full Name (Last, First, Middle Initial) C. Ms. Julia Ketcham		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 1420 Salt Springs Rd		Transaction ID: 1838629	
City State Zip Code Syracuse NY 13214	Amount of Each Receipt this Period 21.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

SUBTOTAL of Receipts This Page (optional) ▶	171.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1138 / 1975						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Joyce A. Kidd		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 9982 Reevesbury Drive		Transaction ID: 1840951	
City State Zip Code Beverly Hills CA 90210	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Student Aggregate Year-to-Date ▼ 3800.00		

Full Name (Last, First, Middle Initial) B. Ms. GERALYN A. KIDERA		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 10208 Waterside Oaks Drive		Transaction ID: 1839240	
City State Zip Code Tampa FL 33647	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation lawyer Health Care Lawyers, PLC Aggregate Year-to-Date ▼ 1300.00		

Full Name (Last, First, Middle Initial) C. Ms. Sarah H. Kiefhaber		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5	
Mailing Address 1400 1st St Unit B		Transaction ID: 1836447	
City State Zip Code Longmont CO 80501	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	330.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1139 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Merritt E. Kimball		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 7591 Tayside Court		Transaction ID: 1842875
City State Zip Code San Jose CA 95135	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1200.00	

Full Name (Last, First, Middle Initial) B. Mrs. Elizabeth Betsy King		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 1155 Harvard Road		Transaction ID: 1839586
City State Zip Code Piedmont CA 94610	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Research Assistant Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Barbara King		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 1178 Chillem Drive		Transaction ID: 1843005
City State Zip Code Batavia IL 60510	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	1130.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1140 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. F. Allene King		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 1619 Castle Court		Transaction ID: 1840828	
City State Zip Code Houston TX 77006	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Dr. Lucy King		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 2625 N Meridian Street Apartment 311		Transaction ID: 1843372	
City State Zip Code Indianapolis IN 46208	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) C. Ms. Lisa Kirkland		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 513 East 86th Street, # 1B		Transaction ID: 1842819	
City State Zip Code New York NY 10028	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	650.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1141 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Martha Kirkpatrick		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 988 Bluegrass Lane		Transaction ID: 1838565
City State Zip Code Los Angeles CA 90049	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Prof. Corp.	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	

Full Name (Last, First, Middle Initial) B. Mr. David R. Kitchen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 4161 Lakewood Drive		Transaction ID: 1837091
City State Zip Code Waterford MI 48329	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

Full Name (Last, First, Middle Initial) C. Ms. Jennie Kixmiller		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 1678 8th Avenue		Transaction ID: 1839104
City State Zip Code Brooklyn NY 11215	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

SUBTOTAL of Receipts This Page (optional) ▶	220.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1142 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Annette W. Kleeman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 756 Kingman Avenue		Transaction ID: 1845657
City State Zip Code Santa Monica CA 90402	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) B. Ms. Maxene Kleier		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address PO Box 507		Transaction ID: 1840958
City State Zip Code Bloomfield KY 40008	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Writer Aggregate Year-to-Date ▼ 2049.96	

Full Name (Last, First, Middle Initial) C. Ms. Maxene Kleier		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address PO Box 507		Transaction ID: 1843639
City State Zip Code Bloomfield KY 40008	Amount of Each Receipt this Period 166.66	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Writer Aggregate Year-to-Date ▼ 2049.96	

SUBTOTAL of Receipts This Page (optional) ▶	516.66
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1143 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Fredrica A. Klemm		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 36 Sterling Lane		Transaction ID: 1844243
City State Zip Code Haverhill MA 01835	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Swix Sport USA, Inc	Occupation Controller	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Mr. Micki Kluge		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 1945 Pine View Avenue		Transaction ID: 1845128
City State Zip Code Virginia Bch VA 23456	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
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. Mrs. Malynda H. Knight		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 105 Boyce Sink Court		Transaction ID: 1845637
City State Zip Code Thomasville NC 27360	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	

SUBTOTAL of Receipts This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1144 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. John Knox		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 229 Bishop Avenue		Transaction ID: 1836996
City Richmond	State CA	Zip Code 94801
Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

B. Full Name (Last, First, Middle Initial) Mr. Mel Knox		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5
Mailing Address 505 29th Avenue		Transaction ID: 1837997
City San Francisco	State CA	Zip Code 94121
Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

C. Full Name (Last, First, Middle Initial) Ms. Sybil J. Kohl		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5
Mailing Address 18103 NE 159th Ave		Transaction ID: 1838396
City Brush Prairie	State WA	Zip Code 98606
Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		
Name of Employer Edgewood	Occupation Social worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional) ▶	550.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1145 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Anne P. Kortlander		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 945 Peninsula Way		Transaction ID: 1840890
City State Zip Code Menlo Park CA 94025	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Visa International	Occupation Marketing Manager	
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. Ms. Sherley H. Koteen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address 2604 Tilden Place, N.W.		Transaction ID: 1837745
City State Zip Code Washington DC 20008	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Art Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Mrs. Amanda Kowal Kenyon		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 6766 108th St Apt C6		Transaction ID: 1840275
City State Zip Code Forest Hills NY 11375	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Stromberg Consulting	Occupation Management Consultant	
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) ▶	425.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1146 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Melinda S. Krei		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 318 E. Chicago Street, # 4A		Transaction ID: 1840896	
City State Zip Code Milwaukee WI 53202	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer self-employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation consultant Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Mrs. Julia A. Kriss		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 7100 Woodland Drive		Transaction ID: 1839896	
City State Zip Code Springfield VA 22151	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer McEneaney Associates Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Real Estate Broker Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Mrs. Letitia L. Kruger		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 175 E. Delaware Place, # 7810		Transaction ID: 1840897	
City State Zip Code Chicago IL 60611	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1500.00		

SUBTOTAL of Receipts This Page (optional) ▶	550.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1147 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Kathryn Kuehl		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 3400 Sullivan Court Apt.175		Transaction ID: 1838710
City Modesto	State CA Zip Code 95356	
Amount of Each Receipt this Period 30.00		Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C		
Name of Employer California Department of Corrections	Occupation Personnel Analyst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Mrs. B. Kay Kullas		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 6506 Warriors Run		Transaction ID: 1845197
City Littleton	State CO Zip Code 80125	
Amount of Each Receipt this Period 199.00		Amount of Each Receipt this Period 199.00
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 398.00	

Full Name (Last, First, Middle Initial) C. R. Kwong		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 822 Seal Pointe Drive		Transaction ID: 1842734
City Redwood City	State CA Zip Code 94065	
Amount of Each Receipt this Period 200.00		Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	429.00
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1148 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Loretta W. Lacasse		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 14 E. Possum Hollow Road		Transaction ID: 1839398
City State Zip Code Wallingford PA 19086	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 225.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Jean Lacey		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 11 Burton Hills Blvd. # S267		Transaction ID: 1842776
City State Zip Code Nashville TN 37215	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Unemployed	Aggregate Year-to-Date ▼ 450.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Susan L. LaFrance		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 13039 Stricklands Landing Dr		Transaction ID: 1841059
City State Zip Code Perry FL 32348	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 1200.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	525.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1149 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sally Lu Lake		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 304 Cushman Road		Transaction ID: 1840885
City State Zip Code Patterson NY 12563	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation IBM Attorney	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Alma Lakin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 4640 Oley Turnpike Road		Transaction ID: 1842723
City State Zip Code Reading PA 19606	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Boscov's Dept. Stores Travel Consultant	Aggregate Year-to-Date ▼ 450.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Jeffrey C. Lamkin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 2963 Hudson Aurora Road		Transaction ID: 1840723
City State Zip Code Hudson OH 44236	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Ohio Retina Associates Ophthalmologist	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	550.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1150 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Joan L. Lamnek		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 3702 Westerdale Drive		Transaction ID: 1843382	
City State Zip Code Fulshear TX 77441	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) B. Dr. Juliet A. Lamont		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 7 / 2 0 0 5	
Mailing Address 2249 Glen Avenue		Transaction ID: 1844641	
City State Zip Code Berkeley CA 94709	Amount of Each Receipt this Period 1500.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Self Environmental Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3500.00		

Full Name (Last, First, Middle Initial) C. Ms. Betty F. Landberg		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address P.O. Box 794		Transaction ID: 1836716	
City State Zip Code Friday Harbor WA 98250	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	1700.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1151 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Diane Lander-Simon		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5	
Mailing Address 623 N. Oakhurst Dr.		Transaction ID: 1841274	
City State Zip Code Beverly Hills CA 90210		Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Writer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00	

B. Full Name (Last, First, Middle Initial) Donald Landis		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 17 Glenbrooke Dr		Transaction ID: 1848253	
City State Zip Code White Plains NY 10605		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Requested			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

C. Full Name (Last, First, Middle Initial) Ms. Anne T. Landre		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 2024 N. Hi Mount Blvd		Transaction ID: 1840548	
City State Zip Code Milwaukee WI 53208		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Community Insurance Information Center Ins Consumer Affairs			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	2550.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1152 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Carolyn A. Landwehr		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 202 Hawthorne		Transaction ID: 1841996	
City Elmhurst	State IL	Amount of Each Receipt this Period 100.00	
Zip Code 60126		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Occupation Retired		Amount of Each Receipt this Period 100.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Ms. Mabel Lang		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 905 New Gulph Road		Transaction ID: 1841918	
City Bryn Mawr	State PA	Amount of Each Receipt this Period 250.00	
Zip Code 19010		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Occupation Retired		Amount of Each Receipt this Period 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Mr. David P. Langford		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 5	
Mailing Address 50 Queets Street		Transaction ID: 1837628	
City Steilacoom	State WA	Amount of Each Receipt this Period 100.00	
Zip Code 98388		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Occupation Retired		Amount of Each Receipt this Period 100.00	
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)	450.00
TOTAL This Period (last page this line number only)	450.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1153 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Terilynn Langsev		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 1 Wintercreek		Transaction ID: 1840940	
City State Zip Code Portola Valley CA 94028	Amount of Each Receipt this Period 625.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) B. Ms. Deborah Slaner Larkin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5	
Mailing Address 237 Loring Avenue		Transaction ID: 1838258	
City State Zip Code Pelham NY 10803	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Executive Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) C. Ms. Janna Laudato		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 3910 Jenifer Street NW		Transaction ID: 1840964	
City State Zip Code Washington DC 20015	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Financial Analyst Aggregate Year-to-Date ▼ 950.00		

SUBTOTAL of Receipts This Page (optional) ▶	5875.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1154 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Miriam W. Laughlin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 7739 Southdown Road		Transaction ID: 1841508
City State Zip Code Alexandria VA 22308	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation Writer	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Robert Laz		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 5402 Wonderland Road		Transaction ID: 1839696
City State Zip Code Snohomish WA 98290	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Aili L. Lazaar		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 1640 Forest Creek Drive		Transaction ID: 1841014
City State Zip Code Blue Bell PA 19422	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Univ of Pennsylvania Occupation Physician	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	780.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1155 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Huguette Le Gall		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 190 Heatherwood Lane		Transaction ID: 1839826	
City Athens State GA Zip Code 30606	Amount of Each Receipt this Period 21.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) B. Ms. Suzanne Leagjeld		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 7 / 2 0 0 5	
Mailing Address 34146 Old County Road 16		Transaction ID: 1837721	
City Pequot Lakes State MN Zip Code 56472	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Resort Owner/Farmer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Mrs. Jane Acomb Leake		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address 7716 Creekwood Lane		Transaction ID: 1836757	
City Cincinnati State OH Zip Code 45237	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer U of Cincinnati	Occupation Professor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00		

SUBTOTAL of Receipts This Page (optional) ▶	271.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1156 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Mary P. Lechevalier		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 131 Goddard Nisbet Road		Transaction ID: 1842301	
City State Zip Code Morrisville VT 05661	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired (formerly rutgers U.	Occupation Professor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2100.00		

B. Full Name (Last, First, Middle Initial) Ms. Nancy L. Lee		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 1130 Laureles Drive		Transaction ID: 1845644	
City State Zip Code Los Altos CA 94022	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Rite Aid	Occupation Pharmacist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

C. Full Name (Last, First, Middle Initial) Dr. R. E. Lee		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 1617 Hendersonville Road Apt. 130		Transaction ID: 1840467	
City State Zip Code Asheville NC 28803	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00		

SUBTOTAL of Receipts This Page (optional) ▶	1215.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1157 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. K. A. Leedham		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 28 Oakwood Road		Transaction ID: 1844257	
City State Zip Code Orinda CA 94563	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer American Packaging	Occupation Business Owner		
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) B. Ms. Sylvia A. Leftwich		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 4555 24th Street N		Transaction ID: 1844385	
City State Zip Code Arlington VA 22207	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Ms. Carlee Leftwich		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address P.O. Box 3210		Transaction ID: 1839448	
City State Zip Code Yountville CA 94599	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
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) ▶	225.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1158 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Caroline L. LeGette		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 1510 Harbor Ct		Transaction ID: 1842382	
City State Zip Code Fort Myers FL 33908	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Housewife Aggregate Year-to-Date ▼ 500.00		

B. Full Name (Last, First, Middle Initial) Ms. Mary E. Lerza		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 2600 Overland Avenue #101		Transaction ID: 1845963	
City State Zip Code Los Angeles CA 90064	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 2200.00		

C. Full Name (Last, First, Middle Initial) Ms. Mary E. Lerza		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 2600 Overland Avenue #101		Transaction ID: 1846585	
City State Zip Code Los Angeles CA 90064	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 2200.00		

SUBTOTAL of Receipts This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1159 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Stacy H Lesartre		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 619 Castle Ridge Court		Transaction ID: 1839447
City State Zip Code Fort Collins CO 80525	Amount of Each Receipt this Period 32.50	
FEC ID number of contributing federal political committee. C		
Name of Employer FCSO	Occupation Musician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 575.00	

Full Name (Last, First, Middle Initial) B. Ms. Helena Leshler		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address 7225 SE 32nd Avenue		Transaction ID: 1836223
City State Zip Code Portland OR 97202	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Property Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. Mrs. Janice W. Letson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 935 Riverside Drive		Transaction ID: 1842398
City State Zip Code Los Altos CA 94024	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional) ▶	1132.50
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 1160 / 1975
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Karen Letterman

Mailing Address 468 Valley Road

City State Zip Code
Fairfield CT 06825

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 17 / 2005

Transaction ID: 1840001

Amount of Each Receipt this Period
21.00

B. Full Name (Last, First, Middle Initial)
Ms. Elizabeth Letzler

Mailing Address 1 Berkeley Street

City State Zip Code
Baldwin NY 11510

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

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1800.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 13 / 2005

Transaction ID: 1841204

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ms. Judith Levin

Mailing Address 16055 Camino Del Cerro

City State Zip Code
Los Gatos CA 95032

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 24 / 2005

Transaction ID: 1843112

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **721.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1161 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Shellie Sachs Levin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 22800 SW 157th Avenue		Transaction ID: 1840910	
City State Zip Code Miami FL 33170		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Self Attorney/Consultant			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) B. Mr. Edmund C. Levin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5	
Mailing Address 38 Seagull Drive		Transaction ID: 1844606	
City State Zip Code Richmond CA 94804		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Self MD			
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. Ms. Debra Fried Levin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5	
Mailing Address 6155 31st Place, N.W.		Transaction ID: 1841197	
City State Zip Code Washington DC 20015		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Self Fundraiser			
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) ▶	1350.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 1162 / 1975
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Jane Levy

Mailing Address 168 W. 86th Street # 12A

City State Zip Code
New York NY 10024

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 5

Transaction ID: 1843746

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Muriel Levy

Mailing Address 35 E 75th St 2D

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
205.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842822

Amount of Each Receipt this Period
35.00

C. Full Name (Last, First, Middle Initial)
Ms. Dorothy M. Lewis

Mailing Address 2427 W. Nellie Sisson Road

City State Zip Code
Morgantown IN 46160

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
450.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842884

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **135.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1163 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Gwenyth Lewis		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 34 Miller Avenue		Transaction ID: 1838562	
City State Zip Code Berwyn PA 19312		Amount of Each Receipt this Period 23.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation legal services plan provi			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) B. Ms. Eleanor G. Lewis		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 4000 Cathedral Avenue, N.W. Apt. 736-B		Transaction ID: 1840870	
City State Zip Code Washington DC 20016		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1150.00	

Full Name (Last, First, Middle Initial) C. Mr. Ann F. Lewis		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5	
Mailing Address 4550 N. Park Avenue, # 708		Transaction ID: 1838222	
City State Zip Code Chevy Chase MD 20815		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Friends of Hillary Occupation Communications Director			
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) ▶	1273.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1164 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Lee Ann Lewis		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5	
Mailing Address 70 Sea Vista Terrace		Transaction ID: 1841534	
City State Zip Code Port Ludlow WA 98365	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Mr. Michael K. Lewis		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address PO Box 1512		Transaction ID: 1843218	
City State Zip Code Block Island RI 02807	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Attorney	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Carol B. Liebman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5	
Mailing Address 322 Central Park West #6A		Transaction ID: 1836213	
City State Zip Code New York NY 10025	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Professor	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	1050.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1165 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Francine Lifton		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5
Mailing Address 6948 Queenferry Circle		Transaction ID: 1841940
City State Zip Code Boca Raton FL 33496	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Kathryn L. Lima		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 555 Carley Avenue		Transaction ID: 1842257
City State Zip Code Sharon PA 16146	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Owner / President	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Helen B. Lindquist		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address 126 Rivo Alto Canal		Transaction ID: 1837648
City State Zip Code Long Beach CA 90803	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1166 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Judy Link		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address PO Box 818		Transaction ID: 1841058
City State Zip Code Diablo CA 94528	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Mrs. Eliza M. Linley		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 1027 Euclid Avenue		Transaction ID: 1839431
City State Zip Code Berkeley CA 94708	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Episcopal Priest Aggregate Year-to-Date ▼ 440.00	

Full Name (Last, First, Middle Initial) C. Ms. Catherine F. Linton		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address 3000 Abell Road		Transaction ID: 1836247
City State Zip Code Lake Placid FL 33852	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	435.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1167 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Linda Lipsett		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 5	
Mailing Address 4915 Hillbrook Lane, N.W.		Transaction ID: 1843723	
City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 300.00		
Name of Employer Occupation Bernstein & Lipsett, P.C. Attorney	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Cindy Lochte		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 5207 Caladium Drive		Transaction ID: 1840906	
City State Zip Code Dallas TX 75229	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 1250.00		
Name of Employer Occupation Moncrief Radiation Center Asst. Admin. of Operations	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mrs. Linda Locke		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 6925 Cornell		Transaction ID: 1840218	
City State Zip Code St. Louis MO 63130	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 850.00		
Name of Employer Occupation MasterCard International Public Relations	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	635.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1168 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Judith Loeb		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 50 East 89th Street #6E		Transaction ID: 1842101	
City State Zip Code New York City NY 10128	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer EMILY's List	Occupation Fundraiser		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) B. Dr. Robert Lottfield		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 707 Fairway Road NW		Transaction ID: 1843364	
City State Zip Code Albuquerque NM 87107	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) C. Ms. Kathleen Nies Lohr		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 30086 Britt		Transaction ID: 1844221	
City State Zip Code Chapel Hill NC 27517	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer RTI	Occupation Health Analyst		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1169 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sue Long		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 108 Ridgely Road		Transaction ID: 1842026	
City State Zip Code Glen Burnie MD 21061	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Ruth Ann Lorentzen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address 3411 East Mercer Street		Transaction ID: 1844786	
City State Zip Code Seattle WA 98112	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Microsoft Software	Aggregate Year-to-Date ▼ 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Mrs. Dorothy Lorenzo		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 22 River Road		Transaction ID: 1842762	
City State Zip Code Rollinsford NH 03869	Amount of Each Receipt this Period 65.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 245.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	5165.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1170 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Mary Lowe		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 4214 West Northwest Highway		Transaction ID: 1842333
City State Zip Code Dallas TX 75220	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mrs. Sandra Lubert		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 28 Rose Avenue		Transaction ID: 1839610
City State Zip Code Great Neck NY 11021	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Teacher	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Amy Luciano		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 496 Strafield Road		Transaction ID: 1841124
City State Zip Code Fairfield CT 06825	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	625.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1171 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Emily Lucius		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 3529 Lowell Street		Transaction ID: 1839756
City State Zip Code San Diego CA 92106	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Ms. Robin Ludmer		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 266 Sundown Terrace		Transaction ID: 1843417
City State Zip Code Orinda CA 94563	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Teacher - Librarian Aggregate Year-to-Date ▼ 850.00	

Full Name (Last, First, Middle Initial) C. Ms. Deva Lund		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 174 Vista De Oeste		Transaction ID: 1842164
City State Zip Code Palm Springs CA 92264	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Accounting Rep. Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	175.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1172 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Joanne Lyman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 163 East 81st Street, # 9B		Transaction ID: 1838567
City State Zip Code New York NY 10028	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation MET Jewelry Designer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2590.00	

Full Name (Last, First, Middle Initial) B. Ms. Joanne Lyman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5
Mailing Address 163 East 81st Street, # 9B		Transaction ID: 1844567
City State Zip Code New York NY 10028	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation MET Jewelry Designer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2590.00	

Full Name (Last, First, Middle Initial) C. Mr. Eugene Lynch		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 10 Squire Hill		Transaction ID: 1843263
City State Zip Code Old Lyme CT 06371	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Groton Bd. Of Educ. Education Admn.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional) ▶	685.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1173 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Linda MacCracken

Mailing Address 7814 126th Avenue SE

City Renton State WA Zip Code 98056

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

Name of Employer Occupation Housewife

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837996

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Ms. Susan T. Macfarlan

Mailing Address 1408 Sunshine Canyon

City Boulder State CO Zip Code 80302

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843412

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
Mr. John A. MacLeod

Mailing Address 5 Rural Lane

City Cincinnati State OH Zip Code 45220

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

Name of Employer Self Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1844255

Amount of Each Receipt this Period
100.00

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1174 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Margaret Macneill		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 90 Sulfrin Road		Transaction ID: 1841893	
City State Zip Code New Providence NJ 07974	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Bol Architecture	Occupation admin. asst.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

B. Full Name (Last, First, Middle Initial) Ms. Margaret C. Madeira		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5	
Mailing Address 226 Joseph's Way		Transaction ID: 1845224	
City State Zip Code Frazer PA 19355	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Unisys Corp.	Occupation Customer Service		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00		

C. Full Name (Last, First, Middle Initial) Ms. Jo Anne Huntley Magee		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 75 Cambridge Pkwy # W901		Transaction ID: 1841477	
City State Zip Code Cambridge MA 02142	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Health Care Management		
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) ▶	550.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1175 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Lesley R. Mahaffey		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 1013 N. Mountain View Place		Transaction ID: 1846596
City Fullerton State CA Zip Code 92831	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Ms. Mary T. Mahler		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 8410 Eustisfarm Lane		Transaction ID: 1843264
City Cincinnati State OH Zip Code 45243	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 1050.00	

Full Name (Last, First, Middle Initial) C. Ms. Janet Majerus		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address PO Box 1722		Transaction ID: 1840961
City El Prado State NM Zip Code 87529	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Writer/Author Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	850.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1176 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Joan Makurat		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5	
Mailing Address 10816 Verde Vista Drive		Transaction ID: 1837863	
City State Zip Code Fairfax VA 22030	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Hartford Ins	Occupation Claim adjuster		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00		

Full Name (Last, First, Middle Initial) B. Ms. Louise R. Malakoff		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 142 Yorkshire Drive		Transaction ID: 1842102	
City State Zip Code Pittsburgh PA 15208	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Graduate Student		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00		

Full Name (Last, First, Middle Initial) C. Mrs. Barbara H. Malcolm		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 4775 S Harbor Dr Apt 101		Transaction ID: 1841365	
City State Zip Code Vero Beach FL 32967	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3750.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1177 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Edward Malin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 216 Caravel Drive		Transaction ID: 1842152
City State Zip Code Bear DE 19701	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. June A. Malina		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 20 Waterside Court		Transaction ID: 1841263
City State Zip Code Germantown MD 20874	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 650.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Anita A. Mandelbaum		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 5376 Desert Mountain Court		Transaction ID: 1838958
City State Zip Code Boulder CO 80301	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation CPA	Aggregate Year-to-Date ▼ 525.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	335.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1178 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Caroline Mangelsdorf		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 7140 Ljubljana Place		Transaction ID: 1840279
City State Zip Code Dulles VA 20189	Amount of Each Receipt this Period 32.50	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation US Department of State Diplomat		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) B. Ms. Pauline Mann		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 1908 W. Carolina Way		Transaction ID: 1839172
City State Zip Code Roswell NM 88201	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) C. Ms. Emily Kosstrin Mann		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 350 East Palisade Avenue		Transaction ID: 1844807
City State Zip Code Englewood NJ 07631	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional) ▶	2547.50
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1179 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Peggy Smythe March		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address 1511 South Lakeshore Drive		Transaction ID: 1836195
City State Zip Code Sarasota FL 34231	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Jean Ann Marcus		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 15 Madison Avenue		Transaction ID: 1841089
City State Zip Code Summit NJ 07901	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation GAF Materials Corporation Attorney	Aggregate Year-to-Date ▼ 700.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Barbara Scott Margolis		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 55 South Birch Street		Transaction ID: 1840819
City State Zip Code Denver CO 80246	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Self Political Consultant	Aggregate Year-to-Date ▼ 2000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	850.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1180 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Norma B. Marin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 150 East 69th Street #18P		Transaction ID: 1840875
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 625.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Artist's Agent Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. Ms. Maria Markley		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 6513 Callander Drive		Transaction ID: 1841471
City State Zip Code Bethesda MD 20817	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Crafter Aggregate Year-to-Date ▼ 255.00	

Full Name (Last, First, Middle Initial) C. Ms. Julie Marsh		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 30 Paloma Ave		Transaction ID: 1838692
City State Zip Code San Francisco CA 94127	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Inter Works Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation President Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional) ▶	700.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1181 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Mary E. Marshall		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 4133 42nd Avenue NE		Transaction ID: 1842701
City State Zip Code Seattle WA 98105	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

Full Name (Last, First, Middle Initial) B. Mrs. Carol L. Marshall		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 8409 N. 17th Street		Transaction ID: 1839917
City State Zip Code Phoenix AZ 85020	Amount of Each Receipt this Period 21.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) C. Ms. Marcia A. Marshall		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5
Mailing Address PO Box 3324		Transaction ID: 1838244
City State Zip Code Annapolis MD 21403	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer self Occupation consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2450.00	

SUBTOTAL of Receipts This Page (optional) ▶	371.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1182 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Lynn Martell		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 440 W End Avenue		Transaction ID: 1842202
City State Zip Code New York NY 10024	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 650.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. David B. Martens		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 2214 22nd Street		Transaction ID: 1839153
City State Zip Code Anacortes WA 98221	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Vice President	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Ellen Martin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5
Mailing Address 1159 Moores Mill Road NW		Transaction ID: 1837887
City State Zip Code Atlanta GA 30327	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Nurse-midwife	Aggregate Year-to-Date ▼ 220.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1183 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Tina Rose Martin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 2510 Stirrup Drive		Transaction ID: 1844198	
City State Zip Code Florissant MO 63033	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Hazelwood School District	Occupation Educator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Ms. Kiki Martin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 509 Spirit Rd		Transaction ID: 1840959	
City State Zip Code Lopez Island WA 98261	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
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) C. Ms. Valerie Martin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 5103 Grayson Place		Transaction ID: 1842874	
City State Zip Code Decatur GA 30030	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Cathy Cox for Gov.	Occupation Finance Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	900.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1184 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Lynne Martinez		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 5	
Mailing Address 306 Leslie Street		Transaction ID: 1844823	
City State Zip Code Lansing MI 48912	Amount of Each Receipt this Period 1000.00		
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. Mr. Robert L. Mason		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 1415 Broadway		Transaction ID: 1838671	
City State Zip Code Fargo ND 58102	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Ms. Priscilla Mason		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5	
Mailing Address 4000 Cathedral Avenue NW Apt. 117B		Transaction ID: 1844536	
City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
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) ▶	1520.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1185 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Diana Mason		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 455 West44th Street, Apt. 22		Transaction ID: 1840904	
City State Zip Code New York NY 10036	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Beth Israel Med. Center	Occupation Nurse		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00		

Full Name (Last, First, Middle Initial) B. Ms. Sandra Mast		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 5	
Mailing Address 8229 Wynne Avenue		Transaction ID: 1843162	
City State Zip Code Reseda CA 91335	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer LAUSD	Occupation Teacher		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00		

Full Name (Last, First, Middle Initial) C. Ms. Judith W. Matasar		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5	
Mailing Address 5169 Nob Hill Court		Transaction ID: 1844578	
City State Zip Code Bloomfield MI 48302	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	525.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1186 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Warren E. Mathews		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5	
Mailing Address 1010 Centinela Avenue		Transaction ID: 1845170	
City State Zip Code Santa Monica CA 90403	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) B. Ms. Antonia Matthew		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 1307 S. Grant Street		Transaction ID: 1839471	
City State Zip Code Bloomington IN 47401	Amount of Each Receipt this Period 21.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 235.00		

Full Name (Last, First, Middle Initial) C. Ms. Veronica Matzner		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 5880 SW 97th Street Suite 120		Transaction ID: 1841037	
City State Zip Code South Miami FL 33156	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Medical Equip Co. Owner Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	1271.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1187 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. M. Allison Maus		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5
Mailing Address 4906 102nd Lane, N.E.		Transaction ID: 1844563
City State Zip Code Kirkland WA 98033	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 2000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Scott Mauvais		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 1157 Rainier Avenue		Transaction ID: 1840566
City State Zip Code Pacifica CA 94044	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation MSFT Analyst	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Tracy Maxwell		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address P.O. Box 2444		Transaction ID: 1838747
City State Zip Code Hobe Sound FL 33475	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Delta Airlines Flight Attendant	Aggregate Year-to-Date ▼ 225.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1050.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1188 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Gloria May Mailing Address 1219 Oakdyke Ave City State Zip Code La Habra Hgts CA 90631 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5 Transaction ID: 1839127 Amount of Each Receipt this Period 25.00
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B. Full Name (Last, First, Middle Initial) Ms. Alexa Mayner Mailing Address 200 7th Ave S City State Zip Code Clear Lake IA 50428 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5 Transaction ID: 1838570 Amount of Each Receipt this Period 25.00
Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C. Full Name (Last, First, Middle Initial) Ms. Mary C. Mazure Mailing Address 819 W. University Drive City State Zip Code Rochester MI 48307 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5 Transaction ID: 1839663 Amount of Each Receipt this Period 20.00
Name of Employer Occupation Utica Community Schools Teacher Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

SUBTOTAL of Receipts This Page (optional)	▶	70.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1189 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Leonor E. McAlpine		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 130 West Parkhurst		Transaction ID: 1845041
City State Zip Code Detroit MI 48203	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 1500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Leonor E. McAlpine		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 130 West Parkhurst		Transaction ID: 1848199
City State Zip Code Detroit MI 48203	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 1500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Maureen McCarthy		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 126 Waverly Place, Apt. 3E		Transaction ID: 1842777
City State Zip Code New York NY 10011	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Patterson, Belknap, Webb & Tyler Lawyer	Aggregate Year-to-Date ▼ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1150.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1190 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Margaret McCarthy		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 3326 Alpine Drive		Transaction ID: 1838635	
City State Zip Code Ann Arbor MI 48108	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 625.00		

Full Name (Last, First, Middle Initial) B. Ms. Sharon Flynn McClymonds		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5	
Mailing Address 281 W Hills Rd		Transaction ID: 1845143	
City State Zip Code New Canaan CT 06840	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Ms. Sylvia McCollor		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 19 S. 1st Street, Apt. B1201		Transaction ID: 1838889	
City State Zip Code Minneapolis MN 55401	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer State of MN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Unit Supervisor Aggregate Year-to-Date ▼ 205.00		

SUBTOTAL of Receipts This Page (optional) ▶	355.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 1191 / 1975
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Jean McCoy

Mailing Address 4100 Well Spring Drive
Apt. 2306

City Greensboro State NC Zip Code 27410

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: 1837645

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Ms. Melinda McCune

Mailing Address 1315 N Spaulding Ave

City Los Angeles State CA Zip Code 90046

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

Name of Employer Self Occupation Property Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 625.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1838642

Amount of Each Receipt this Period
85.00

C. Full Name (Last, First, Middle Initial)
Ms. Karen McCurdy

Mailing Address 11643 Melones Circle

City Gold River State CA Zip Code 95670

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

Name of Employer USA Properties Fund, Inc. Occupation Real Estate Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1839137

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► 205.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1192 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Wendy McDaniel		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 51 Water Street		Transaction ID: 1842138
City State Zip Code Saint Augustine FL 32084	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Mary Ann McDonald		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 315 N. Grove Street		Transaction ID: 1839188
City State Zip Code Ypsilanti MI 48198	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Director of Public Affairs	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Virginia M. McDowell		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 101 Shady Valley Drive		Transaction ID: 1845953
City State Zip Code Chesterfield MO 63017	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Sr VP Sales & Marketing	Aggregate Year-to-Date ▼ 450.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	475.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1193 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Suzanne R. McDowell		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 4821 Fort Sumner Drive		Transaction ID: 1840950	
City State Zip Code Bethesda MD 20816	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Steptoe & Johnson LLP	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

B. Full Name (Last, First, Middle Initial) Ms. Dusa McDuff		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 3 Laurel Lane		Transaction ID: 1845677	
City State Zip Code Setauket NY 11733	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer SUNY	Occupation Professor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

C. Full Name (Last, First, Middle Initial) Ms. Jane Ann McFarlain		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 2014 Golf Terrace Drive		Transaction ID: 1839650	
City State Zip Code Tallahassee FL 32301	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Adventure in Travel	Occupation Travel Agent		
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) ▶	465.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1194 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Louise McFarland		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 6362 Goldbranch Road		Transaction ID: 1842318
City State Zip Code Columbia SC 29206	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Ms. Patricia McGarry		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 3 Grand Oak Farm Rd		Transaction ID: 1841054
City State Zip Code Hadley MA 01035	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED		
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) C. Dr. Mary Joyce McGinnis		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 739 Saint Marks Lane		Transaction ID: 1840944
City State Zip Code Niskayuna NY 12309	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Women's Health Care Group M.D. - Ob-GYN		
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) ▶	600.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1195 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Anne T. McGonigle		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 1210 16th Ave. E.		Transaction ID: 1836684
City State Zip Code Seattle WA 98112	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 800.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Jennings McKee		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 3 Janice Drive		Transaction ID: 1836719
City State Zip Code Iberia MO 65486	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Martha E. McKenna		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 913 S. Decker Avenue		Transaction ID: 1837289
City State Zip Code Baltimore MD 21224	Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Political Tracker	Aggregate Year-to-Date ▼ 550.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	550.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1196 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Maureen K. McKeough		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address 1568 Kirkwood Drive		Transaction ID: 1844989	
City State Zip Code Geneva IL 60134	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer School District V-46	Occupation Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Ms. Sylvia McLaughlin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5	
Mailing Address 1450 Hawthorne Terrace		Transaction ID: 1844575	
City State Zip Code Berkeley CA 94708	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Ms. Laura R. McNeill		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5	
Mailing Address 77 Peachtree Place NE Unit 509 Cotting Court		Transaction ID: 1841200	
City State Zip Code Atlanta GA 30309	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1150.00		

SUBTOTAL of Receipts This Page (optional) ▶	500.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1197 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Joan McNichols		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 2854 Alta Vista Drive		Transaction ID: 1840102	
City State Zip Code Newport Beach CA 92660	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation EDUCATOR Aggregate Year-to-Date ▼ 440.00		

Full Name (Last, First, Middle Initial) B. Dr. Patricia M. McShane		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 124 Washington Street		Transaction ID: 1841049	
City State Zip Code Wellesley MA 02481	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Reproductive Science Ctr. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) C. Ms. June McWilliams-Ford		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 9929 East Colette Street		Transaction ID: 1842066	
City State Zip Code Tucson AZ 85748	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Univ. Of AZ Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Pre-Law Student Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	635.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1198 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Eugene L Meade		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 16000 Fern Way		Transaction ID: 1838739	
City State Zip Code Guerneville CA 95446	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Importer	Aggregate Year-to-Date ▼ 450.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Mr. Denny Mehner		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address PO Box 81037		Transaction ID: 1844348	
City State Zip Code Fairbanks AK 99708	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 450.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Miss Margit Meissner		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 8323 Still Spring Court		Transaction ID: 1837062	
City State Zip Code Bethesda MD 20817	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 1150.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	260.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1199 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. Michael L. Mellor		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 81 5th Avenue		Transaction ID: 1842695
City State Zip Code San Francisco CA 94118	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 300.00	

B. Full Name (Last, First, Middle Initial) Ms. Linda A. Melphy		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 5251 S Cody St		Transaction ID: 1843437
City State Zip Code Littleton CO 80123	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 250.00	

C. Full Name (Last, First, Middle Initial) Mrs. Linda Melski		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5
Mailing Address 1136 W Ives Street		Transaction ID: 1838237
City State Zip Code Marshfield WI 54449	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Aggregate Year-to-Date ▼ 275.00	

SUBTOTAL of Receipts This Page (optional) ▶	175.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1200 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Carol Mendenhall		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 3 / 2 0 0 5	
Mailing Address 6703 E. Sugarloaf Street		Transaction ID: 1836427	
City State Zip Code Mesa AZ 85215		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

B. Full Name (Last, First, Middle Initial) Ms. Mari Mennel-Bell		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 2 / 2 0 0 5	
Mailing Address 1524 Bayview Drive		Transaction ID: 1838223	
City State Zip Code Fort Lauderdale FL 33304		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation self-employed educator			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 700.00	

C. Full Name (Last, First, Middle Initial) Mr. George Menzoian		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address 1730 S Amphlett Blvd #209		Transaction ID: 1845002	
City State Zip Code San Mateo CA 94402		Amount of Each Receipt this Period 60.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Bay Area Realty Real Estate			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 420.00	

SUBTOTAL of Receipts This Page (optional)	410.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1201 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Steven Mercado		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 1628 Peapond Road		Transaction ID: 1839965
City State Zip Code North Bellmore NY 11710	Amount of Each Receipt this Period 21.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 210.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dr. Stephanie A. Mercier		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 6155L Edsall Road		Transaction ID: 1841484
City State Zip Code Alexandria VA 22304	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Economist	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Gerald Merfish		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 5
Mailing Address 2720 Pittsburg Street		Transaction ID: 1843635
City State Zip Code Houston TX 77005	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Pipe Manufacture/Distribution	Aggregate Year-to-Date ▼ 3500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	2621.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1202 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Joan Moore Mernitz		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 625 E 84th Street		Transaction ID: 1840917	
City Indianapolis	State IN	Zip Code 46240	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
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. Mr. Charles Merrill, Jr.		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 5 Chestnut Street		Transaction ID: 1841495	
City Boston	State MA	Zip Code 02108	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00		

Full Name (Last, First, Middle Initial) C. Ms. Cynthia A Metzler		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5	
Mailing Address 202 N. Broad Street		Transaction ID: 1838224	
City Allentown	State PA	Zip Code 18104	Amount of Each Receipt this Period 350.00
FEC ID number of contributing federal political committee. C			
Name of Employer The Metzler Group	Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

SUBTOTAL of Receipts This Page (optional) ▶	1100.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1203 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Doris B. Meyer		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 701 Ocean Avenue, # 208		Transaction ID: 1844428
City State Zip Code Santa Monica CA 90402	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) B. Dr. Carole Meyers		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 9261 Harvest Rush Road		Transaction ID: 1843284
City State Zip Code Owings Mills MD 21117	Amount of Each Receipt this Period 115.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 215.00	

Full Name (Last, First, Middle Initial) C. Ms. Mary Ann Michel		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 719 Christine Drive		Transaction ID: 1839759
City State Zip Code Palo Alto CA 94303	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	240.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1204 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Alice V. Mikel		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 339 17th Ave. North		Transaction ID: 1845032
City State Zip Code South St. Paul MN 55075	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Ms. Ariadna Miller		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 1100 Connecticut Ave NW Suite 725		Transaction ID: 1841234
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 2150.00	

Full Name (Last, First, Middle Initial) C. Ms. Ariadna Miller		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 1100 Connecticut Ave NW Suite 725		Transaction ID: 1841433
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 2150.00	

SUBTOTAL of Receipts This Page (optional) ▶	1200.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1205 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Luana S. Miller		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 142 Maywood Way		Transaction ID: 1843681	
City State Zip Code San Rafael CA 94901	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Mr. David Miller		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 7 / 2 0 0 5	
Mailing Address 36090 Easterday Way		Transaction ID: 1837740	
City State Zip Code Fremont CA 94536	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Geologist Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) C. Ms. Maya P. Miller		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 6185 Franktown Road		Transaction ID: 1842674	
City State Zip Code Carson City NV 89704	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 3000.00		

SUBTOTAL of Receipts This Page (optional) ▶	1350.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1206 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Audrey Miller		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address P.O. Box 888		Transaction ID: 1839617
City Ferndale	State CA	Zip Code 95536
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 85.00
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 590.00	

B. Full Name (Last, First, Middle Initial) Ms. Carol Milligan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 8429 Hunt Valley Drive		Transaction ID: 1843420
City Vienna	State VA	Zip Code 22182
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C. Full Name (Last, First, Middle Initial) Mr. Harvey S. Millman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5
Mailing Address 822 Dodge Avenue		Transaction ID: 1842027
City Evanston	State IL	Zip Code 60202
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional) ▶	385.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1207 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Joyanne B. Mills		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 40W665 Grand Monde Drive		Transaction ID: 1840872	
City State Zip Code Elburn IL 60119	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 4800.00		

Full Name (Last, First, Middle Initial) B. Ms. Eleanore Milosovic		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 213 N Main Street		Transaction ID: 1840229	
City State Zip Code New City NY 10956	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) C. Ms. Cynthia P. Minor		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address One Azalea Court		Transaction ID: 1842852	
City State Zip Code Princeton NJ 08540	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Freelance Writer Aggregate Year-to-Date ▼ 275.00		

SUBTOTAL of Receipts This Page (optional) ▶	625.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1208 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Paul Mintz		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 200 Reading Blvd		Transaction ID: 1839587	
City State Zip Code Wyomissing PA 19610		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Reading Anesthesia Associates		Occupation Anesthesiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Ms. Barbara Mishkin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 5610 Wisconsin Avenue #402		Transaction ID: 1845678	
City State Zip Code Chevy Chase MD 20815		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Hogan & Hartson		Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Ms. Nancy C. Mitchell		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 1701 E 91st St		Transaction ID: 1839295	
City State Zip Code Chicago IL 60617		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self		Occupation Consultant	
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) ▶	295.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1209 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Madeline H. Mixer		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address 76 Bonnie Lane		Transaction ID: 1836649	
City State Zip Code Berkeley CA 94708	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) B. Ms. Sharon K. Mohler		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 1050 Carolan Avenue, Apt. 110		Transaction ID: 1841472	
City State Zip Code Burlingame CA 94010	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) C. Ms. Augusta Moldawan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5	
Mailing Address 5028 Silverthorne Court		Transaction ID: 1837720	
City State Zip Code Oldsmar FL 34677	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 390.00		

SUBTOTAL of Receipts This Page (optional) ▶	1250.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1210 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Mary Monaghan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 1122 Lafayette Drive		Transaction ID: 1839892	
City State Zip Code Papillion NE 68046	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Ms. Elizabeth M. Montgomery		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 26 Union Avenue		Transaction ID: 1839957	
City State Zip Code Norwalk CT 06851	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 270.00		

Full Name (Last, First, Middle Initial) C. Ms. Martha M. Montgomery		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 28330 Alycekey Street		Transaction ID: 1840377	
City State Zip Code Farmington Hls MI 48334	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 350.00		

SUBTOTAL of Receipts This Page (optional) ▶	75.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1211 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Mary C. Moody		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 130 Williamsburg Way		Transaction ID: 1841036	
City State Zip Code Fayetteville GA 30214		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation KPMG LLP Associate Director, HR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 847.50	

Full Name (Last, First, Middle Initial) B. Ms. Debra Plousha Moore		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5	
Mailing Address 13 Lyonsgate		Transaction ID: 1845200	
City State Zip Code Bexley OH 43209		Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation University of Dayton Administrator			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Ms. Linda J. Moore		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address W4504 Mary Hill Park Drive		Transaction ID: 1844366	
City State Zip Code Fond Du Lac WI 54935		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Homemaker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional) ▶	650.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1212 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Shelagh Moran		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 1824 Missouri Street		Transaction ID: 1843383	
City State Zip Code Houston TX 77006	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Occupation REQUESTED		
Name of Employer 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) B. Ms. Jacqueline Morby		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 116 Woodland Road		Transaction ID: 1836995	
City State Zip Code Pittsburgh PA 15232	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation TA Associates Investments		
Name of Employer 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) C. Dr. Marie L. Morgan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address 622 SW Arboretum Circle		Transaction ID: 1844772	
City State Zip Code Portland OR 97221	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Self Artist		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 775.00		

SUBTOTAL of Receipts This Page (optional) ▶	1350.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1213 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Victoria Morris		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 300 Mt. Holly Road		Transaction ID: 1840869
City State Zip Code Katonah NY 10536	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation Wardrobe Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

B. Full Name (Last, First, Middle Initial) Ms. Julie Morris		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 5300 Sunset Drive Apt. 1		Transaction ID: 1839740
City State Zip Code Kansas City MO 64112	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation Volunteer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	

C. Full Name (Last, First, Middle Initial) Ms. Ann Morse		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 1840 Mintwood Place, NW Apt. G-2		Transaction ID: 1838574
City State Zip Code Washington DC 20009	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer NCSL Occupation Program Director		
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) ▶	310.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1214 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Eleanor E. Morton		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 11151 Black Oak Road		Transaction ID: 1842163	
City State Zip Code Moreno Valley CA 92555		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Retired Antique Dealer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00	

B. Full Name (Last, First, Middle Initial) Mrs. Marcia S. Morton		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 9 Darlington Court		Transaction ID: 1840978	
City State Zip Code Pittsburgh PA 15217		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2650.00	

C. Full Name (Last, First, Middle Initial) Mrs. Evelyn L. Moss		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 1240 Ulfian Way		Transaction ID: 1842702	
City State Zip Code Martinez CA 94553		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional) ▶	350.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1215 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Kenneth Mountcastle		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 37 Oenoke Lane		Transaction ID: 1842675
City State Zip Code New Canaan CT 06840	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) B. Mr. William Moyers		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 873 Fairmount Avenue		Transaction ID: 1842545
City State Zip Code Saint Paul MN 55105	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Ms. Mary Muellenbach		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address PO Box 135		Transaction ID: 1839592
City State Zip Code Stockbridge WI 53088	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	1280.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1216 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Virginia S. Mueller		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 106 L Street Old Sacramento		Transaction ID: 1842887	
City State Zip Code Sacramento CA 95814	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Lawyer Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Mr. Jeffrey Munger		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 50 Riverside Dr PH C		Transaction ID: 1844094	
City State Zip Code New York NY 10024	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Mr. Mike Murdock		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 1642 Lexington Street		Transaction ID: 1839824	
City State Zip Code Santa Clara CA 95050	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Teacher/ Investor Aggregate Year-to-Date ▼ 225.00		

SUBTOTAL of Receipts This Page (optional) ▶	375.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1217 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Gwendolyn C. Murphree Mailing Address 102 Loyola Rd City State Zip Code St Augustine FL 32086 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5 Transaction ID: 1844281 Amount of Each Receipt this Period 100.00
Name of Employer Occupation Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 300.00		

B. Full Name (Last, First, Middle Initial) Ms. Terri L. Murtland Mailing Address 7250 Park Lake Drive City State Zip Code Dexter MI 48130 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5 Transaction ID: 1838908 Amount of Each Receipt this Period 85.00
Name of Employer Occupation Univ of Michigan Nurse-Midwife Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 440.00		

C. Full Name (Last, First, Middle Initial) Mr. William Myers Mailing Address 10 Weathered Rock Drive City State Zip Code Landrum SC 29356 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5 Transaction ID: 1842767 Amount of Each Receipt this Period 50.00
Name of Employer Occupation Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 450.00		

SUBTOTAL of Receipts This Page (optional)	235.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1218 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Sondra Myers		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5	
Mailing Address 2555 Pennsylvania Avenue NW Apt.710		Transaction ID: 1841199	
City Washington	State DC	Zip Code 20037	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

B. Full Name (Last, First, Middle Initial) Mr. Robert J. Myers		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 5210 N. Eisenhower		Transaction ID: 1841931	
City Roswell	State NM	Zip Code 88201	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

C. Full Name (Last, First, Middle Initial) Dr. Maureen C. Nash		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 1717 SW Park Ave Apt 104		Transaction ID: 1840669	
City Portland	State OR	Zip Code 97201	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer Matrix Health Systems		Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1375.00		

SUBTOTAL of Receipts This Page (optional) ▶	700.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1219 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Mary Nash		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 27 Kohring Circle N		Transaction ID: 1843430
City State Zip Code Harrington Park NJ 07640	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Homemaker	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Mary Naughton		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 573 Greenwood Avenue		Transaction ID: 1839971
City State Zip Code Atlanta GA 30308	Amount of Each Receipt this Period 21.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 210.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Martha R. Nelson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 11617 Carrollwood Drive		Transaction ID: 1846077
City State Zip Code Tampa FL 33618	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	321.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1220 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Katherine Nelson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 50 Riverside Drive, #4B		Transaction ID: 1836668
City State Zip Code New York NY 10024	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
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. Dr. Sarah M. Nelson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 5878 S. Dry Creek Court		Transaction ID: 1842294
City State Zip Code Greenwood Village CO 80121	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer retired, University of Denver Occupation Archaeologist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. Ms. Nicola A. Nelson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address Box 222695		Transaction ID: 1842288
City State Zip Code Chantilly VA 20153	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Aerospace Corp. Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional) ▶	2200.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1221 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Rev. Judy Neri		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 221 Indian Spring Drive		Transaction ID: 1840099	
City State Zip Code Silver Spring MD 20901		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Self Writer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) B. Mr. Charles Nester		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 655 N. Forest Avenue		Transaction ID: 1843469	
City State Zip Code Saint Louis MO 63119		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Esso Occupation Esso Physician			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Carol Newman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 106 Moore Creek Road		Transaction ID: 1842067	
City State Zip Code Santa Cruz CA 95060		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1050.00	

SUBTOTAL of Receipts This Page (optional) ▶	320.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1222 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Carol Newman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 106 Moore Creek Road		Transaction ID: 1843450
City State Zip Code Santa Cruz CA 95060	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 1050.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Greta Newman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5
Mailing Address 39 Steppingstone Lane		Transaction ID: 1842029
City State Zip Code Great Neck NY 11024	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Raquel H. Newman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 44 Macondray Lane Apartment 6W		Transaction ID: 1844770
City State Zip Code San Francisco CA 94133	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Consultant/Writer	Aggregate Year-to-Date ▼ 3000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1250.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1223 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Marjorie Newmark		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 619 Utah Court		Transaction ID: 1844231	
City State Zip Code Lawrence KS 66046	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 350.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Grace Allen Newton, Esq.		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 300 South Wacker, Suite 1700		Transaction ID: 1842286	
City State Zip Code Chicago IL 60606	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Attorney	Aggregate Year-to-Date ▼ 2000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Mr. Robert S. Newton		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 639 Cypress Point Road		Transaction ID: 1842792	
City State Zip Code Richmond CA 94801	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	1250.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1224 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Linda Laureen Nicholes		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 6261 East Fox Glen Drive 4070		Transaction ID: 1838894
City State Zip Code Anaheim CA 92807	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED Occupation Environmental Activist	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Lawrie Nickerson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address PO Box 205		Transaction ID: 1842867
City State Zip Code Grafton NY 12082	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Schenectary Schools Occupation Teacher	Aggregate Year-to-Date ▼ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Sheila Nicklas		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5
Mailing Address 3101 Camelot Court		Transaction ID: 1844602
City State Zip Code Durham NC 27705	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	550.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1225 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Frances Nobert		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 5023 Tierra Antigua Drive		Transaction ID: 1842885	
City State Zip Code Whittier CA 90601	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Whittier College	Occupation Professor of Music		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. Ms. D. Nolan		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address Alameda County 3940 Randolph Avenue		Transaction ID: 1838677	
City State Zip Code Oakland CA 94602	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Contra Costa	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. Ms. Patricia Norman		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address PO Box 97		Transaction ID: 1840399	
City State Zip Code Eagle CO 81631	Amount of Each Receipt this Period 21.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

SUBTOTAL of Receipts This Page (optional) ▶	146.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1226 / 1975						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Kay Nosler		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 7 / 2 0 0 5	
Mailing Address 620 Hobart Street		Transaction ID: 1837693	
City State Zip Code Menlo Park CA 94025	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Housewife	Occupation Self		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

B. Full Name (Last, First, Middle Initial) Mr. Robert Novick		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address PO Box 506		Transaction ID: 1843608	
City State Zip Code Culver City CA 90232	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

C. Full Name (Last, First, Middle Initial) Ms. Patricia H. Noyes		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 2014 Elk Avenue		Transaction ID: 1843037	
City State Zip Code Eugene OR 97403	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00		

SUBTOTAL of Receipts This Page (optional) ▶	2100.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1227 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Carolyn Nygren		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 10422 NW 24th Place # 302		Transaction ID: 1842714	
City State Zip Code Sunrise FL 33322	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Nova Southeastern U	Occupation Professor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. Dr. Jean L. Nyland		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 622 Cabrillo St		Transaction ID: 1839283	
City State Zip Code Stanford CA 94305	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer College of Notre Dame	Occupation Professor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00		

Full Name (Last, First, Middle Initial) C. Ms. Mary Ann B. Oakley		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 2224 Kodiak Drive, N.E.		Transaction ID: 1840813	
City State Zip Code Atlanta GA 30345	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Holland & Knight LLP	Occupation Lawyer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00		

SUBTOTAL of Receipts This Page (optional) ▶	435.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1228 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Linda O'Brien		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 15 Cedar Street		Transaction ID: 1843179	
City State Zip Code Ctr Moriches NY 11934	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Brookhone Medical Hospital	Occupation Registered Nurse		
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) B. Dr. Karen O'Connor		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5	
Mailing Address 4383 Westover Place NW		Transaction ID: 1835585	
City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 1500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer American University	Occupation Professor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) C. Ms. Anne O'Dell		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address P.O. Box 1410		Transaction ID: 1842299	
City State Zip Code Poway CA 92074	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Stop TV	Occupation Speaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00		

SUBTOTAL of Receipts This Page (optional) ▶	1900.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 1229 / 1975
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Leslie Oelsner

Mailing Address 1451 N. Canterbury Road

City Fayetteville State AR Zip Code 72701

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

Name of Employer Self Occupation Social Worker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1839363

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Ms. Craney Ogata

Mailing Address 800 Blossom Hill Rd Unit Q364

City Los Gatos State CA Zip Code 95032

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 0 5

Transaction ID: 1842004

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Ms. Tami T. Ogata

Mailing Address 800 Blossom Hill Road Unit E323

City Los Gatos State CA Zip Code 95032

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1844213

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ▶ **300.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1230 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Stephanie W. Ogden		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5	
Mailing Address 961 Piemonte Drive		Transaction ID: 1838388	
City State Zip Code Pleasanton CA 94566	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 850.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Mary S. Ogden		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address Box 137		Transaction ID: 1840861	
City State Zip Code Wainscott NY 11975	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 1100.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Joan Olin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 2020 N. Lincoln Park W. Apt. 34A		Transaction ID: 1842905	
City State Zip Code Chicago IL 60614	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1231 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Sylvia B. Olivetti		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 1917 Locust Grove Road		Transaction ID: 1840839	
City State Zip Code Silver Spring MD 20910		Amount of Each Receipt this Period 62.50	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Arent Fox Legal Secretary			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00	

B. Full Name (Last, First, Middle Initial) Ms. Karen D. Olsen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 131 Eastlake Rd		Transaction ID: 1845615	
City State Zip Code Oroville WA 98844		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

C. Full Name (Last, First, Middle Initial) Ms. Eileen D. Olson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 420 Woodland Street		Transaction ID: 1841011	
City State Zip Code Houston TX 77009		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation GTC Investments Real estate/contractor			
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) ▶	512.50
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1232 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Janet Olszewski		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 530 Cedar Ridge Drive		Transaction ID: 1840005	
City State Zip Code Williamston MI 48895	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Michigan Dept. Of Comm	Occupation State Gov.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. Ms. Margie Omero		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5	
Mailing Address 1406 21st Street NW		Transaction ID: 1841264	
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Momentum Analyst	Occupation Political Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) C. Mr. Tom Oppel		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 5	
Mailing Address 700 7th Street, SE		Transaction ID: 1843634	
City State Zip Code Washington DC 20003	Amount of Each Receipt this Period 1500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer All Points Communications	Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00		

SUBTOTAL of Receipts This Page (optional) ▶	1880.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1233 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Jesse H. Oppenheimer		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 711 Navarro Street, Fl. 6		Transaction ID: 1842865
City State Zip Code San Antonio TX 78205	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Law Firm Partner	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) B. Mrs. Jeanne Orlikoff		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 1371 E. Park Place		Transaction ID: 1846582
City State Zip Code Chicago IL 60637	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) C. Ms. Molly O'Rourke		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address 5801 Huntington Parkway		Transaction ID: 1835581
City State Zip Code Bethesda MD 20814	Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Peter D. Hart Research, Inc.	Occupation Public Opinion Analyst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional) ▶	525.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1234 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Rowland M. Orum		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 5
Mailing Address 2389 Floral Hill Drive		Transaction ID: 1843754
City State Zip Code Eugene OR 97403	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 290.00	

Full Name (Last, First, Middle Initial) B. Ms. Verna J. Osborn		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 1937 Ascot Drive		Transaction ID: 1836262
City State Zip Code Moraga CA 94556	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Mrs. Margaret Osborn		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 742 Lasena Court		Transaction ID: 1844117
City State Zip Code Pomona CA 91768	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1235 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Lynda T. O'Sullivan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 8212 Coach Street		Transaction ID: 1840913
City State Zip Code Potomac MD 20854	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer U.S. Air Force	Occupation lawyer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1150.00	

Full Name (Last, First, Middle Initial) B. Ms. Evelyn L. Otto		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 153 Valley Glen Lane		Transaction ID: 1843327
City State Zip Code Martinez CA 94553	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Ms. Carla L. Overberger		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 37 Nokomis Avenue		Transaction ID: 1844838
City State Zip Code San Anselmo CA 94960	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer ACME Business Corp	Occupation Business Consultant	
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) ▶	450.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1236 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Ellen S. Overton		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5
Mailing Address 4820 W Street, NW		Transaction ID: 1837857
City State Zip Code Washington DC 20007	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Ms. Ellen S. Overton		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 4820 W Street, NW		Transaction ID: 1841251
City State Zip Code Washington DC 20007	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Ms. Kimberly Oxholm		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 622 S. Bowman Avenue		Transaction ID: 1845007
City State Zip Code Merion Station PA 19066	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation financial adviser Aggregate Year-to-Date ▼ 5000.00	Transferred \$200 to non-federal November 2005

SUBTOTAL of Receipts This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1237 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Geri D. Palast		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5	
Mailing Address 2737 Devonshire Place NW #402		Transaction ID: 1844623	
City State Zip Code Washington DC 20008	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Millberg Weiss	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) B. Mrs. Esther H. Palmer		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address Pennwood Vlg. # K205		Transaction ID: 1843222	
City State Zip Code Newtown PA 18940	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3250.00		

Full Name (Last, First, Middle Initial) C. Mrs. Bette S. Paris		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 607 N. Arden Drive		Transaction ID: 1842255	
City State Zip Code Beverly Hills CA 90210	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	1200.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1238 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. Roy Parker		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 106 Stonegate Court		Transaction ID: 1842193	
City State Zip Code Simpsonville SC 29681	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Toray Occupation Engineer	Aggregate Year-to-Date ▼ 450.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) Dr. Susan C. Parks		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 6898 Bacon Lane		Transaction ID: 1841056	
City State Zip Code Highland CA 92346	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Pepperdine University Occupation Program director, faculty	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) Ms. Erica Payson Parra		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address PO Box 672		Transaction ID: 1845599	
City State Zip Code East Orleans MA 02643	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Town of Orleans Occupation Selectman	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	850.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1239 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Patricia Parsley		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 709 W. Wisner Lake Road		Transaction ID: 1840532
City State Zip Code Ferndale WA 98248	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) B. Ms. Melissa Partin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5
Mailing Address 610 Minnehaha Lane		Transaction ID: 1844447
City State Zip Code Maitland FL 32751	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation self vet		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) C. Ms. Annie Paschall		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5
Mailing Address 590 Dublin		Transaction ID: 1843848
City State Zip Code Eugene OR 97404	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Lane Com. College Teacher		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

SUBTOTAL of Receipts This Page (optional) ▶	285.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1240 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Susan J. Passovoy		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address PO Box 1659		Transaction ID: 1840860	
City State Zip Code Sun Valley ID 83353	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Attorney Aggregate Year-to-Date ▼ 1500.00		

Full Name (Last, First, Middle Initial) B. Ms. Katherine W. Paterson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 32 W. Cobble Hill Road		Transaction ID: 1844087	
City State Zip Code Barre VT 05641	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Writer Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. Ms. Katherine Patrick		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address 8744 Pedernales Trail		Transaction ID: 1836635	
City State Zip Code Fort Worth TX 76118	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Sabre Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Manager Aggregate Year-to-Date ▼ 1000.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1241 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Susan Patricof		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 830 Park Avenue		Transaction ID: 1837311	
City State Zip Code New York NY 10021		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Northside Cntr for Child Dev. Inc.		Occupation Chairwoman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Mrs. Bryan Patten		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address 301 Penley Drive		Transaction ID: 1836604	
City State Zip Code Lookout Mountain GA 30750		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Mr. Vincent J. Patti		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 2027 Appleton, # 11		Transaction ID: 1836686	
City State Zip Code Long Beach CA 90803		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C			
Name of Employer NONE		Occupation MSW/Psychothrpst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 255.00	

SUBTOTAL of Receipts This Page (optional) ▶	5525.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1242 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Alice Paylor		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 5	
Mailing Address 1765 Atlantic Avenue		Transaction ID: 1843065	
City State Zip Code Sullivans Island SC 29482	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Rosen, Rosen & Hagood	Occupation Attorney		
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) B. Ms. Shirley W. Pearl		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 866 Osceola Avenue		Transaction ID: 1840856	
City State Zip Code Saint Paul MN 55105	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer St. Paul Public Schools	Occupation Retired Educator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00		

Full Name (Last, First, Middle Initial) C. Mr. Merton J. Peck		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 5000 SW 25th Blvd. Unit 3109		Transaction ID: 1842783	
City State Zip Code Gainesville FL 32608	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	550.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 1243 / 1975

(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Deborah C. Peel

Mailing Address 2905 San Gabriel Street
Ste. 207

City Austin State TX Zip Code 78705

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845709

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Ms. Katharine M. Pell

Mailing Address 2 Willow Road

City Weston State MA Zip Code 02493

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

Name of Employer Occupation
PDM Health Strageties, In-
c. Consultant

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 5

Transaction ID: 1844632

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mrs. Elisabeth Pendleton

Mailing Address 3410 Lowell Street, NW

City Washington State DC Zip Code 20016

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

Name of Employer Occupation
Retired

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838249

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional) ► **900.00**

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

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

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

FOR LINE NUMBER: PAGE 1244 / 1975
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Merle B. Peratis

Mailing Address 2174 South Main Street

City State Zip Code
Salt Lake City UT 84115

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

Name of Employer Capital Ceramics, Inc. Occupation Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845633

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Ms. Linda Perlman

Mailing Address 9039 Sligo Creek Pkwy
Apt. 1411

City State Zip Code
Silver Spring MD 20901

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

Name of Employer Silbert & Perlman PA Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842661

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mrs. Debra S. Perras

Mailing Address 2613 Oakledge Court

City State Zip Code
Vienna VA 22181

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

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845723

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► 425.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1245 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Charlotte Perret		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 4716 Falstone Avenue		Transaction ID: 1842876
City State Zip Code Chevy Chase MD 20815	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 2250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Lisa Perry		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 1 Sutton Place South Penthouse		Transaction ID: 1841196
City State Zip Code New York NY 10022	Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 1500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Gail Perry		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 124 Hillcrest Road		Transaction ID: 1840684
City State Zip Code Raleigh NC 27605	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 650.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	2600.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1246 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Sarah Peter		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 778 Park Avenue		Transaction ID: 1836765
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation Artist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

B. Full Name (Last, First, Middle Initial) Janet J Peters		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 215 E Vine Street		Transaction ID: 1842794
City State Zip Code Fleetwood PA 19522	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C. Full Name (Last, First, Middle Initial) Ms. Elisabeth T Peters		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address 425 Liberty st		Transaction ID: 1837612
City State Zip Code San Francisco CA 94114	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Montgomery Gallery Occupation Art Dealer		
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) ▶	6050.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1247 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Gaye M. Peterson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 1575 Hampton Course		Transaction ID: 1839094
City State Zip Code Saint Charles IL 60174	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation Homemaker	
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. Mr. E. Blake Peterson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address 4195 Bayberry Drive		Transaction ID: 1837752
City State Zip Code Santa Rosa CA 95404	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 352.00	

Full Name (Last, First, Middle Initial) C. Ms. Laura D. Peterson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 60 Jacob Gates Road		Transaction ID: 1840998
City State Zip Code Harvard MA 01451	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1248 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Christina F. Petra		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 1305 Circle Drive		Transaction ID: 1840880
City State Zip Code San Marino CA 91108	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Mrs. Nancy E. Pettengill		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 1300 Sanderling Island		Transaction ID: 1840497
City State Zip Code Point Richmond CA 94801	Amount of Each Receipt this Period 32.50	
FEC ID number of contributing federal political committee. C		
Name of Employer IDC Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Technology Specialist Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) C. Ms. M. Jane Pettigrew		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 3916 Locarno Drive		Transaction ID: 1844393
City State Zip Code Anchorage AK 99508	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Greg Olzkin Law Office Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Attorney Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional) ▶	382.50
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1249 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mrs. Sheila Pfafflin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 173 Gates Avenue		Transaction ID: 1837323	
City Gillette	State NJ	Amount of Each Receipt this Period 250.00	
Zip Code 07933			
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00	

B. Full Name (Last, First, Middle Initial) Mrs. Sheila Pfafflin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 173 Gates Avenue		Transaction ID: 1843225	
City Gillette	State NJ	Amount of Each Receipt this Period 250.00	
Zip Code 07933			
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00	

C. Full Name (Last, First, Middle Initial) Dr. Ann Rogers Pfrender		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address General Delivery		Transaction ID: 1838929	
City Eugene	State OR	Amount of Each Receipt this Period 25.00	
Zip Code 97440			
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSM		Occupation Physician	
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)	525.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1250 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Douglas Philips		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 1229 Ingham Street		Transaction ID: 1843391	
City State Zip Code Pittsburgh PA 15212	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Seagate Occupation Programmer	Aggregate Year-to-Date ▼ 400.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Alma H. Phillips		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 482 Ferne Avenue		Transaction ID: 1842273	
City State Zip Code Palo Alto CA 94306	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Mr. James E. Phillips		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 502 Palm Dr. Harbor Bluffs		Transaction ID: 1841990	
City State Zip Code Largo FL 33770	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 400.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	500.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1251 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Robert L. Phillips		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 6625 N. Saint Louise Avenue		Transaction ID: 1845079
City State Zip Code Lincolnwood IL 60712	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Northwestern University	Occupation Faculty Member	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Ms. Kaola Allen Phoenix		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5
Mailing Address 103 Longwood Drive		Transaction ID: 1844594
City State Zip Code Chapel Hill NC 27514	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Artist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Danice R. Picraux		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 4308 Ave La Resolana NE		Transaction ID: 1837297
City State Zip Code Albuquerque NM 87110	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer College of Albuquerque	Occupation Teacher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1252 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Jan Piercy		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 0 / 2 0 0 5	
Mailing Address 3634 Albermarle Street		Transaction ID: 1837616	
City State Zip Code Washington DC 20008		Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation ShoreBank Corporation community development banking			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Dr. Stephanie Pincus		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 0 5	
Mailing Address 269 Middlesex Road		Transaction ID: 1844444	
City State Zip Code Buffalo NY 14216		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Department of Veterans Affairs Physician			
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) C. Ms. Sharron G. Pinnell		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 4505 Rhodelia Avenue		Transaction ID: 1844119	
City State Zip Code Claremont CA 91711		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation L.A. Co. Dept. Of Child Svcs Social Worker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional) ▶	700.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1253 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Deborah Piowaty

Mailing Address 8005 S. Indian River Drive

City State Zip Code
Ft. Pierce FL 34982

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1838778

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Dr. Robert L. Piper

Mailing Address 76 Hillman Street

City State Zip Code
New Bedford MA 02740

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

Name of Employer Occupation
U of Ma Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1845004

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Ms. Pandora Pipiringos

Mailing Address 3207 S Braeswood Blvd

City State Zip Code
Houston TX 77025

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

Name of Employer Occupation
Rice Village Animal Hospit Veterinarian

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 5

Transaction ID: 1841017

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	▶	520.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1254 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Sandra Piwoz		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 656 Foxcroft Rd		Transaction ID: 1841013	
City Elkins Park	State PA	Amount of Each Receipt this Period 50.00	
Zip Code 19027			
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

B. Full Name (Last, First, Middle Initial) Ms. Ethel A. Plagenz		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 1957 W. Island Circle		Transaction ID: 1844307	
City Safford	State AZ	Amount of Each Receipt this Period 50.00	
Zip Code 85546			
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

C. Full Name (Last, First, Middle Initial) Ms. Kristen Plank		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 2200 West State Street		Transaction ID: 1844203	
City Mason City	State IA	Amount of Each Receipt this Period 100.00	
Zip Code 50401			
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1255 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Jean Platt		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 452 W. 11th Street		Transaction ID: 1842253
City State Zip Code Claremont CA 91711	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) B. Mrs. Pauline R. Plesset		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 713 San Mario Drive		Transaction ID: 1843468
City State Zip Code Solona Beach CA 92075	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Housewife/Retired/Volunteer Aggregate Year-to-Date ▼ 4000.00	

Full Name (Last, First, Middle Initial) C. Ms. Catherine A. Plume		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 307 9th St. SE		Transaction ID: 1836703
City State Zip Code Washington DC 20003	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Environmentalist Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional) ▶	1225.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1256 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Catherine A. Plume		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 307 9th St. SE		Transaction ID: 1845731	
City State Zip Code Washington DC 20003	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer World Wildlife Fund	Occupation Environmentalist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

B. Full Name (Last, First, Middle Initial) Ms. Teresa A. Poirier		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 1709 Silverwood Drive		Transaction ID: 1839566	
City State Zip Code Martinez CA 94553	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer John Muir Medical Center	Occupation RN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

C. Full Name (Last, First, Middle Initial) Ms. Martha P. Poling		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5	
Mailing Address 1532 Sinclair Drive		Transaction ID: 1838242	
City State Zip Code McLean VA 22101	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00		

SUBTOTAL of Receipts This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1257 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Odette Pollar		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 1441 Franklin Street Ste.301		Transaction ID: 1842252	
City State Zip Code Oakland CA 94612	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Smart Ways to Work	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) B. Ms. Gwendolyn Kay Ponder		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 909 Dryden St		Transaction ID: 1839982	
City State Zip Code Silver Spring MD 20901	Amount of Each Receipt this Period 32.50		
FEC ID number of contributing federal political committee. C			
Name of Employer Wilmer, Cutler & Pickering	Occupation Lawyer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

Full Name (Last, First, Middle Initial) C. Mr. J. S. Poor		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address PO Box 247		Transaction ID: 1842056	
City State Zip Code Rumson NJ 07760	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	232.50
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1258 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sara S. Portnoy		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 785 Park Avenue		Transaction ID: 1845063
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) B. Ms. Prudence Posner		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 3 College Street		Transaction ID: 1839876
City State Zip Code Canton NY 13617	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Educator Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) C. Ms. Sheila M. Potiker		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 3366 N Torrey Pines Ct Ste 210		Transaction ID: 1845651
City State Zip Code La Jolla CA 92037	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Publisher Aggregate Year-to-Date ▼ 275.00	

SUBTOTAL of Receipts This Page (optional) ▶	775.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1259 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Deloris J. Pouchot		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 606 Floyd Street		Transaction ID: 1846577	
City Blacksburg	State VA	Zip Code 24060	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. Dr. Lane H. Powell		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 3310 79th		Transaction ID: 1839054	
City Lubbock	State TX	Zip Code 79423	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C			
Name of Employer Texas Tech University Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation univ professor Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) C. Ms. Betty A. Prashker		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 241 Central Park West, # 14F		Transaction ID: 1838575	
City New York	State NY	Zip Code 10024	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Editor Aggregate Year-to-Date ▼ 700.00		

SUBTOTAL of Receipts This Page (optional)	130.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1260 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Billie K. Press		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address 2500 Virginia Avenue, N.W.		Transaction ID: 1837746
City Washington	State DC	Zip Code 20037
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 150.00	
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Ms. Candace Preston		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 152 Westcott Rd		Transaction ID: 1841506
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Investment Banker	Occupation Bank of New York	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Lois Preston		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 490 Calle El Segundo		Transaction ID: 1840146
City Palm Springs	State CA	Zip Code 92262
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.00	
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

SUBTOTAL of Receipts This Page (optional)	▶	420.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1261 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Gretchen H. Prewitt		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5
Mailing Address 7647 S Galileo Lane		Transaction ID: 1841856
City State Zip Code Tucson AZ 85747	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation Artist	Aggregate Year-to-Date ▼ 285.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Eugene Price		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 30 Strathmore Drive		Transaction ID: 1838686
City State Zip Code New City NY 10956	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation CPA	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. William M. Protheroe		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 8356 Burwell Circle		Transaction ID: 1845036
City State Zip Code Port Charlotte FL 33981	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	280.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1262 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Holly S. Puritz		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5
Mailing Address 7940 N Shore Road		Transaction ID: 1844541
City State Zip Code Norfolk VA 23505	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer The Group for Women	Occupation Physician	
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. Mrs. Anne Pusey Roberts		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5
Mailing Address 1309 Tulip Poplar Lane		Transaction ID: 1838219
City State Zip Code Vienna VA 22182	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) C. Mrs. Anne Pusey Roberts		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 1309 Tulip Poplar Lane		Transaction ID: 1845726
City State Zip Code Vienna VA 22182	Amount of Each Receipt this Period 80.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

SUBTOTAL of Receipts This Page (optional) ▶	730.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1263 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Karen Pye		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 960 Landrum Road		Transaction ID: 1840370	
City Alpharetta	State GA	Zip Code 30004	Amount of Each Receipt this Period 21.00
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED		Aggregate Year-to-Date ▼ 210.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Lorraine C. Pyne		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address PO Box 557		Transaction ID: 1841491	
City West Dennis	State MA	Zip Code 02670	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired		Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Susan Quillin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 206 Palmetto Avenue		Transaction ID: 1840909	
City Pacifica	State CA	Zip Code 94044	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Administrative Assistant		Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	371.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1264 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Nancy Quintrell		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5
Mailing Address 1280 Rosita Road		Transaction ID: 1842016
City State Zip Code Pacifica CA 94044	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Univ. of California	Occupation Molecular Biologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

B. Full Name (Last, First, Middle Initial) Ms. Sylvia Radov		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 1301 N Tamiami Trail Apt. 414		Transaction ID: 1844319
City State Zip Code Sarasota FL 34236	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

C. Full Name (Last, First, Middle Initial) Ms. Jean Strauss Raffle		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address PO Box 1063		Transaction ID: 1842320
City State Zip Code Agoura Hills CA 91376	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 1265 / 1975
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms Raindance

Mailing Address 2889 Forest Lodge Road

City State Zip Code
Pebble Beach CA 93953

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

Name of Employer Occupation
REQUESTED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1839511

Amount of Each Receipt this Period
30.00

B. Full Name (Last, First, Middle Initial)
Ms. Ellie Ramsey

Mailing Address 24 Monmouth Court

City State Zip Code
Brookline MA 02446

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

Name of Employer Occupation
REQUESTED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837101

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Ms. Linda Marie Randolph

Mailing Address 227 S. Norton Avenue

City State Zip Code
Los Angeles CA 90004

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

Name of Employer Occupation
Self Physician

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836228

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► 330.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1266 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Linda Rankine		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address PO Box 2417		Transaction ID: 1839500
City State Zip Code Easley SC 29641	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Ms. Sue Ransohoff		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5
Mailing Address 131 Lafayette Lane		Transaction ID: 1841986
City State Zip Code Cincinnati OH 45220	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Ms. Marilyn Raplinger		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5
Mailing Address 11897 210th Street W		Transaction ID: 1841867
City State Zip Code Lakeville MN 55044	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 325.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	325.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1267 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Jane Rasco		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 5	
Mailing Address 39124 Channel Dr		Transaction ID: 1841184	
City State Zip Code Cathedral City CA 92234	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Ms. Jill Louise Ratner		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 6133 Lawton Avenue		Transaction ID: 1840938	
City State Zip Code Oakland CA 94618	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Attorney Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. Ms. Josephine Rawlings		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 2238 2nd Street		Transaction ID: 1844339	
City State Zip Code Wyandotte MI 48192	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Registered Nurse Aggregate Year-to-Date ▼ 600.00		

SUBTOTAL of Receipts This Page (optional) ▶	950.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1268 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Elizabeth M. Ray		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 1 / 2 0 0 5	
Mailing Address 27 Lattice Dr		Transaction ID: 1837991	
City Leesburg	State FL	Amount of Each Receipt this Period 2500.00	
Zip Code 34788		FEC ID number of contributing federal political committee. C	
Name of Employer Penn State University	Occupation Professor Emeritas	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Carol Rearick		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 6154 Sundance Trl.		Transaction ID: 1840844	
City Brighton	State MI	Amount of Each Receipt this Period 625.00	
Zip Code 48116		FEC ID number of contributing federal political committee. C	
Name of Employer Self	Occupation Investments	Aggregate Year-to-Date ▼ 2500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Katherine B. Redding		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 7 / 2 0 0 5	
Mailing Address PO Box 220		Transaction ID: 1837732	
City Pinehurst	State NC	Amount of Each Receipt this Period 150.00	
Zip Code 28370		FEC ID number of contributing federal political committee. C	
Name of Employer	Occupation Volunteer	Aggregate Year-to-Date ▼ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	3275.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1269 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sandra L. Reeves		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 4904 Milam Street		Transaction ID: 1843682
City State Zip Code Houston TX 77006	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Larry Regis		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 663 Orange Avenue		Transaction ID: 1836679
City State Zip Code Los Altos CA 94022	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 800.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Laurie Reiche		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 823 Whitney Way		Transaction ID: 1840246
City State Zip Code Petaluma CA 94954	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	375.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1270 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Felicia R. Reinhart		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 1271 Charleston Road		Transaction ID: 1842830
City State Zip Code Cherry Hill NJ 08034	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired	
	Aggregate Year-to-Date ▼ 375.00	

Full Name (Last, First, Middle Initial) B. Ms. Gail D. Reinhart		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 2121 Jamieson Avenue # 1806		Transaction ID: 1842300
City State Zip Code Alexandria VA 22314	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer U.S. gov't Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Lawyer	
	Aggregate Year-to-Date ▼ 1250.00	

Full Name (Last, First, Middle Initial) C. Ms. Diana L. Reische		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 20 Silvermine Woods		Transaction ID: 1841279
City State Zip Code Wilton CT 06897	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Free Lance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Writer	
	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	1350.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1271 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Olga C. Reisman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 1804 Beacon Street		Transaction ID: 1840878	
City State Zip Code Brookline MA 02445		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Reiki Therapist			
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. Ms. Veronica Reith		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 14905 SE Rivershore Drive		Transaction ID: 1841961	
City State Zip Code Vancouver WA 98683		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Mrs. Ellen L. Reikopp		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 5	
Mailing Address 3655 SE Doubleton Drive		Transaction ID: 1843729	
City State Zip Code Stuart FL 34997		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Executive Recruiter			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1500.00	

SUBTOTAL of Receipts This Page (optional) ▶	850.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1272 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Joan Reitzel		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 2436 Glencoe Avenue		Transaction ID: 1842196
City State Zip Code Venice CA 90291	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer City of Los Angeles	Occupation Manager/Analyst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

B. Full Name (Last, First, Middle Initial) Ms. Ann Reno		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 2 Collingswood Place		Transaction ID: 1838824
City State Zip Code Flanders NJ 07836	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer ADP, Inc.	Occupation Computer Programmer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C. Full Name (Last, First, Middle Initial) Ms. Ellen Revelle		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 7348 Vista Del Mar Avenue		Transaction ID: 1844426
City State Zip Code La Jolla CA 92037	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Investor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) ▶	770.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1273 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Phyllis Reynolds		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 64 Gresham Street		Transaction ID: 1839486	
City State Zip Code Ashland OR 97520	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) Mr. D. Richmond		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address 8882 Tanglewood Trail		Transaction ID: 1845029	
City State Zip Code Chagrin Falls OH 44023	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 237.50		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) Ms. Jane C. Rieffel		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 721-A Mas Amigos		Transaction ID: 1840967	
City State Zip Code Santa Barbara CA 93105	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	580.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1274 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Carol Rigmark		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 2043 Walters Avenue		Transaction ID: 1843419	
City State Zip Code Northbrook IL 60062	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer The Carol Rigmark Company	Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) B. Ms. Barbara Ringer		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address RR 1 Box 50		Transaction ID: 1842039	
City State Zip Code Millboro VA 24460	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
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. Ms. Kimberly K. Ritzheimer		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 20578 East Buchanan Drive		Transaction ID: 1841075	
City State Zip Code Aurora CO 80011	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Dept. of Defense	Occupation Information Analyst		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00		

SUBTOTAL of Receipts This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1275 / 1975
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Jeanette M. Roach		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 6 Sea View Avenue		Transaction ID: 1846325
City State Zip Code Piedmont CA 94611	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer ER Development	Occupation Real Estate Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) B. Ms. Loretta J. Robb		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 13 Plymouth Drive		Transaction ID: 1836952
City State Zip Code Newark DE 19713	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired Social Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Loretta J. Robb		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 5
Mailing Address 13 Plymouth Drive		Transaction ID: 1843164
City State Zip Code Newark DE 19713	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired Social Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	575.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1276 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Kathleen Robbins		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 230 Channing Way		Transaction ID: 1838836
City State Zip Code Alameda CA 94502	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer K Robbins & Assoc.	Occupation International Developer	
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) B. Dr. John B. Roberts		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 175 West Royal Forest Blvd.		Transaction ID: 1843467
City State Zip Code Columbia OH 43214	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

Full Name (Last, First, Middle Initial) C. Ms. Sandra J. Roberts		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 5
Mailing Address 215 East 68th Street Apt. 4-E		Transaction ID: 1843718
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer self	Occupation consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1150.00	

SUBTOTAL of Receipts This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1277 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Eugene C. Robertson		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 5100 Dorset Ave Apt 103		Transaction ID: 1839078
City State Zip Code Chevy Chase MD 20815	Amount of Each Receipt this Period 11.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired	
	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) B. Ms. Joan R. Robertson		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 6216 N. Lake Drive		Transaction ID: 1843642
City State Zip Code Milwaukee WI 53217	Amount of Each Receipt this Period 1200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker	
	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Mrs. Donald S. Robinson		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 102 East Avenue		Transaction ID: 1842807
City State Zip Code Burlington VT 05401	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED	
	Aggregate Year-to-Date ▼ 650.00	

SUBTOTAL of Receipts This Page (optional) ▶	1261.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1278 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Katherine Roeder		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 411 West End Avenue		Transaction ID: 1840929	
City State Zip Code New York NY 10024	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Coldwell Banker	Occupation Real Estate Sales		
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. Mr. Stephen C. Roehm		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 12 Windsor Place		Transaction ID: 1842158	
City State Zip Code Montclair NJ 07043	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer IBM	Occupation Faculty		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00		

Full Name (Last, First, Middle Initial) C. Ms. Mary Roessel		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5	
Mailing Address PO Box 25		Transaction ID: 1844570	
City State Zip Code Casanova VA 20139	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

SUBTOTAL of Receipts This Page (optional) ▶	550.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1279 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. L. Rohrschneider		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 5635 84th Avenue, Southeast		Transaction ID: 1837087	
City State Zip Code Mercer Island WA 98040	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Fred Hutchinson Career	Occupation Research Scientist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00		

Full Name (Last, First, Middle Initial) B. Ms. Judith Rose		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 4613 S Sumac Dr		Transaction ID: 1839657	
City State Zip Code Spokane WA 99223	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Ms. Wilma G. Rosen		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 2711 Henry Hudson Pkwy W Apt. 3F		Transaction ID: 1840343	
City State Zip Code Bronx NY 10463	Amount of Each Receipt this Period 21.00		
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

SUBTOTAL of Receipts This Page (optional) ▶	201.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1280 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. J. Lynn B. Rosen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 45 Porter Drive		Transaction ID: 1841793	
City State Zip Code West Hartford CT 06117		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

B. Full Name (Last, First, Middle Initial) Ms. Vita Rosenberg		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 101 W. 12th Street, Apt. 6W		Transaction ID: 1838652	
City State Zip Code New York NY 10011		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

C. Full Name (Last, First, Middle Initial) Mrs. Dulcie Rosenfeld		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 961 Bloomfield Woods		Transaction ID: 1841435	
City State Zip Code Bloomfield Hills MI 48304		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Volunteer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2200.00	

SUBTOTAL of Receipts This Page (optional) ▶	2010.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1281 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Ruth W. Rosenfield		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 11 Cattano Ave Apt 608		Transaction ID: 1845663
City State Zip Code Morristown NJ 07960	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation Psychotherapist	Aggregate Year-to-Date 225.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Ms. Dolores Rosoff		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5
Mailing Address 1310-143 Primavera Street		Transaction ID: 1844581
City State Zip Code Salinas CA 93901	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. Mrs. Jane Ross		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 1789 Woodfield Road		Transaction ID: 1842826
City State Zip Code Mansfield NJ 08836	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional)	400.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 1282 / 1975
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Madelyn C. Ross

Mailing Address 4721 36th St N

City State Zip Code
Arlington VA 22207

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

Name of Employer Self Occupation Editor/Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838415

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Dr. Roger D. Rossen

Mailing Address 2624 Glen Haven Blvd

City State Zip Code
Houston TX 77025

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

Name of Employer Baylor MD Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836601

Amount of Each Receipt this Period
600.00

C. Full Name (Last, First, Middle Initial)
Ms. Catherine E. Rossi-Roos

Mailing Address 5 Bellflower Lane

City State Zip Code
San Carlos CA 94070

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

Name of Employer Roos Instruments Inc. Occupation Chief Operating Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 5

Transaction ID: 1840905

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1100.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1283 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Glenda M. Rothberg		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 3101 Old Pecos Trl		Transaction ID: 1838675	
City State Zip Code Santa Fe NM 87505	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Attorney Aggregate Year-to-Date ▼ 3300.00		

Full Name (Last, First, Middle Initial) B. Mr. Edwin Rothschild		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5	
Mailing Address 1229 Providence Terrace		Transaction ID: 1845225	
City State Zip Code McLean VA 22101	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation political consultant Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Ms. Jane G. Rozoff		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 601 Mulberry Place # 41		Transaction ID: 1842090	
City State Zip Code Highland Park IL 60035	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 700.00		

SUBTOTAL of Receipts This Page (optional) ▶	850.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1284 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Linda K. Rude		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 839 Union Street		Transaction ID: 1842321	
City State Zip Code San Francisco CA 94133	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self employed	Occupation Landscape Designer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) B. Ms. Beth Rumery		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 701 N. Teddy Court		Transaction ID: 1840013	
City State Zip Code Visalia CA 93291	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation REQUESTED	
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. Karl M. Ruppenthal		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5	
Mailing Address 820 Euclid Avenue		Transaction ID: 1845229	
City State Zip Code Berkeley CA 94708	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00		

SUBTOTAL of Receipts This Page (optional) ▶	175.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1285 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Linda Rush		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 7234 Encelia Drive		Transaction ID: 1842673
City State Zip Code La Jolla CA 92037	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Mr. Sidney Russak		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 1487 Crest Drive		Transaction ID: 1844251
City State Zip Code Altadena CA 91001	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Physician	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Ms. Mary M. Russell		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 7115 S. Janmar Drive		Transaction ID: 1842795
City State Zip Code Dallas TX 75230	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	550.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1286 / 1975
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Deborah Dashow Ruth		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 2 Norwood Avenue		Transaction ID: 1842358	
City State Zip Code Kensington CA 94707		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed Occupation Self-Employed Writer/Editor			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Mr. John Rutledge		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 56 Monument Street, # 1		Transaction ID: 1840244	
City State Zip Code Medford MA 02155		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation ZixCorp Software Engineer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Ms. Patricia J. Ryan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 17 south Ferris Street		Transaction ID: 1839731	
City State Zip Code Irvington NY 10533		Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation freelance writer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 440.00	

SUBTOTAL of Receipts This Page (optional) ▶	385.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1287 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Parisa Sabeti		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 416 Commonwealth Avenue # 619		Transaction ID: 1840211	
City State Zip Code Boston MA 02215	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 390.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) Ms. Dianne R Saenz		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5	
Mailing Address 1200 Braddock Place, # 804		Transaction ID: 1837871	
City State Zip Code Alexandria VA 22314	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Director of Communications	Aggregate Year-to-Date ▼ 275.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) Ms. Sarah J. Sager		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 5	
Mailing Address 2969 Manchester Road		Transaction ID: 1843765	
City State Zip Code Shaker Heights OH 44122	Amount of Each Receipt this Period 36.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Cantor	Aggregate Year-to-Date ▼ 236.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	271.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1288 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Charlotte R. Sahnou		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 5	
Mailing Address 2756 Chad Drive		Transaction ID: 1843054	
City State Zip Code Eugene OR 97408	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer University of Oregon	Occupation Retired		
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) B. Ms. Charlotte D. Salomon		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 3327 Sorrel Downs Court		Transaction ID: 1840937	
City State Zip Code Pleasanton CA 94588	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

Full Name (Last, First, Middle Initial) C. Dr. Kimberley Salter		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 31462 Flying Cloud Drive		Transaction ID: 1841879	
City State Zip Code Laguna Niguel CA 92677	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Consulting Psychologist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00		

SUBTOTAL of Receipts This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1289 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Bettylu K. Saltzman		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 5	
Mailing Address 415 E. North Water Street W605		Transaction ID: 1841281	
City Chicago	State IL	Zip Code 60611	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Homemaker Aggregate Year-to-Date ▼ 4000.00	

B. Full Name (Last, First, Middle Initial) Ms. Diane Salucci		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 2635 E. Bel Aire Drive		Transaction ID: 1844220	
City Arlington Heights	State IL	Zip Code 60004	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Bear Wagner Specialists Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Investor Relations Aggregate Year-to-Date ▼ 400.00	

C. Full Name (Last, First, Middle Initial) Ms. Ruth Salzman		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 800 West End Avenue, # 9D		Transaction ID: 1836693	
City New York	State NY	Zip Code 10025	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer JPMorgan Chase Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Banker Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	2750.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1290 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Joanne M. Sanders		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 5144 N Carrollton Avenue		Transaction ID: 1840981	
City State Zip Code Indianapolis IN 46205	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer IATSE	Occupation Representative		
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. Ms. Yoriko Saneyoshi		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address 13335 Mulholland Drive		Transaction ID: 1845330	
City State Zip Code Beverly Hills CA 90210	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) C. Mr. Harold Sanger		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 68 Montague Street, Apt. 3C		Transaction ID: 1842237	
City State Zip Code Brooklyn NY 11201	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00		

SUBTOTAL of Receipts This Page (optional) ▶	5350.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1291 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Ann H. Santen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 8000 VArner Road		Transaction ID: 1845099
City State Zip Code Cincinnati OH 45243	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) B. Ms. Linda Saul-Sena		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 157 Biscayne Avenue		Transaction ID: 1838812
City State Zip Code Tampa FL 33606	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Kathleen Savicki		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5
Mailing Address 388 Maple Hill Drive NW		Transaction ID: 1838225
City State Zip Code Salem OR 97304	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Marion County Social Worker		
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) ▶	780.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1292 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Nathan Savin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 216 Magowan Ave		Transaction ID: 1842718
City State Zip Code Iowa City IA 52246	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer U IA	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) B. Dr. Kathleen Scanlan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 525 Lane Place S.		Transaction ID: 1840901
City State Zip Code Salem OR 97302	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Salem Radiology Consultants	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

Full Name (Last, First, Middle Initial) C. Ms. Alice M. Schaeffer		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 564 W 189th Street, Apt. 3B		Transaction ID: 1840505
City State Zip Code New York NY 10040	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer NYC DOE	Occupation Teacher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional) ▶	520.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 1293 / 1975
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Nancy Schaenen

Mailing Address 56 Midwood Terrace

City State Zip Code
Madison NJ 07940

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

Name of Employer Occupation
Occupation REQUESTED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 0 5

Transaction ID: 1841891

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Roy Schafer

Mailing Address 390 West End Avenue

City State Zip Code
New York NY 10024

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

Name of Employer Occupation
Self Psychologist

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1845069

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Ms. Sharon Schattgen

Mailing Address 2200 Topaz Drive

City State Zip Code
Columbia MO 65203

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

Name of Employer Occupation
Dept of Elm & Sec. Edu Psychologist

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 440.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1840525

Amount of Each Receipt this Period
85.00

SUBTOTAL of Receipts This Page (optional) ► 285.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1294 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Lois J. Schiffer		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 4640 Brandywine St., NW		Transaction ID: 1841888	
City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Beach, Robinson, & Lewis	Occupation Lawyer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) B. Mrs. Isabelle C. Schmid		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 1900 S. Ashland		Transaction ID: 1842028	
City State Zip Code Park Ridge IL 60068	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Homemaker		
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. Ms. Mary C. Schmitt		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 5121 Pinyon Drive		Transaction ID: 1842678	
City State Zip Code Littleton CO 80123	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer University of Colorado	Occupation Pediatrician		
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) ▶	1150.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1295 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Anna Mae Schnucker		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 23582 Railroad St		Transaction ID: 1838975
City State Zip Code Parkersburg IA 50665	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Nancy F. Schoenke		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address 21151 Woodfield Road		Transaction ID: 1837603
City State Zip Code Laytonsville MD 20882	Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Homemaker	Aggregate Year-to-Date ▼ 1500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. James E Schroeder		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 4307 Firestone Dr		Transaction ID: 1840468
City State Zip Code Houston TX 77035	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Broker	Aggregate Year-to-Date ▼ 390.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1545.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1296 / 1975						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Elsa N. Schultz		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 50 Coe Road, #111		Transaction ID: 1840843	
City State Zip Code Belleair FL 33756	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3300.00		

Full Name (Last, First, Middle Initial) B. Ms. Margaret L. Schuster		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 2200 Hamilton Drive, Apt. 503		Transaction ID: 1837580	
City State Zip Code Ames IA 50014	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00		

Full Name (Last, First, Middle Initial) C. Ms. Mary Anne Schwalbe		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 129 East 69th Street		Transaction ID: 1841121	
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Retired		
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) ▶	1260.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 1297 / 1975
(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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Steve L. Schwartz

Mailing Address 425 S. Chickasaw Trail #348

City	State	Zip Code
Orlando	FL	32825

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

Name of Employer Self	Occupation Sales
--------------------------	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

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

Transaction ID: 1840992

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Ms. Roberta Schwartz

Mailing Address 92 Sagamore Drive

City	State	Zip Code
Plainview	NY	11803

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

Name of Employer Merrill Lynch	Occupation Stockbroker
-----------------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	0	5

Transaction ID: 1842603

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Ms. Mary Ann Schwarzbach

Mailing Address 1620 Pankow Drive

City	State	Zip Code
Geneva	IL	60134

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

Name of Employer James E. Schwarzbach, Inc.	Occupation Special Planner
--	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

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

Transaction ID: 1842676

Amount of Each Receipt this Period
900.00

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1298 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Jean Schwarzbauer		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 193 Moore Street		Transaction ID: 1842803
City State Zip Code Princeton NJ 08540	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Princeton University	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Ms. Anne Scotford		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address P.O. Box 126		Transaction ID: 1843253
City State Zip Code East Thetford VT 05043	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Judith G Scott		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 3501 N. Summit Avenue		Transaction ID: 1841021
City State Zip Code Shorewood WI 53211	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Robert W. Baird & Co. Inc.	Occupation Investment Banker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

SUBTOTAL of Receipts This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 1299 / 1975
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Dora Scott-Nichols

Mailing Address 1401 Bracker Drive

City State Zip Code
Houston TX 77055

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
450.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 0 5

Transaction ID: 1844539

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Ronald E. Seavoy

Mailing Address 305 Martindale Rd

City State Zip Code
Bowling Green OH 43402

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1843009

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. Charles H. Sedenquist

Mailing Address 1575 Riviera Dr

City State Zip Code
Pasadena CA 91107

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842501

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **250.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1300 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Susan Seidel		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 425 East 63rd Street		Transaction ID: 1840941	
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Art Dealer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2300.00		

Full Name (Last, First, Middle Initial) B. Ms. Dorine R. Seidman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 293 Pelican Way		Transaction ID: 1842100	
City State Zip Code Delray Beach FL 33483	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer self	Occupation attorney		
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) C. Ms. Cecily Selby		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 1 E 66th Street		Transaction ID: 1839505	
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00		

SUBTOTAL of Receipts This Page (optional) ▶	540.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 1301 / 1975
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Willa Seldon

Mailing Address 183 Somerset Road

City State Zip Code
Piedmont CA 94611

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

Name of Employer Occupation
Occupation REQUESTED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1837984

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Mr. Norbert L. Seligson

Mailing Address 10 Silverwood Circle, Apt. 7

City State Zip Code
Annapolis MD 21403

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

Name of Employer Occupation
Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843232

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mr. Steven P. Seltzer

Mailing Address 3 Nancy Court

City State Zip Code
Manhasset NY 11030

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

Name of Employer Occupation
MetLife Insurance Lawyer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844785

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► 500.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1302 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Virginia F. Sendor, M.S.		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 608 Blair Drive		Transaction ID: 1840881	
City State Zip Code Westbury NY 11590	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired	Aggregate Year-to-Date ▼ 1085.00	

Full Name (Last, First, Middle Initial) B. Ms. Sara Seyal		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 5	
Mailing Address 7002 New Bern Court		Transaction ID: 1843033	
City State Zip Code Prospect KY 40059	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation homemaker	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Dr. Emily Shacter		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 710 Erie Ave		Transaction ID: 1840859	
City State Zip Code Takoma Park MD 20912	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Biochemist	Aggregate Year-to-Date ▼ 650.00	

SUBTOTAL of Receipts This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1303 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Susan Shaer		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 2 / 2 0 0 5	
Mailing Address 691 Massachusetts Ave.		Transaction ID: 1838220	
City State Zip Code Arlington MA 02476	Amount of Each Receipt this Period 750.00		
FEC ID number of contributing federal political committee. C			
Name of Employer WAND	Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

Full Name (Last, First, Middle Initial) B. Dr. M. D. Shafraht		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 501 Via Casitas # 525		Transaction ID: 1842738	
City State Zip Code Greenbrae CA 94904	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) C. Dr. Marilyn Shapiro		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 255 Stirling Avenue		Transaction ID: 1841434	
City State Zip Code Winter Park FL 32789	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Psychotherapist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3500.00		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1304 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Ellen B. Shapiro		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 29 Tinker Street		Transaction ID: 1839002
City State Zip Code Woodstock NY 12498	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Gerald Shapiro		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 4955 Corbin Avenue		Transaction ID: 1845062
City State Zip Code Tarzana CA 91356	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Pharmacist	Aggregate Year-to-Date ▼ 2000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Fredericka F. Shapiro		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address P.O. Box 777		Transaction ID: 1842704
City State Zip Code New Hope PA 18938	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Artist	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1525.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1305 / 1975						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Ruth Share		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 713 Maple Hill Lane		Transaction ID: 1844291	
City State Zip Code Birmingham MI 48009	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) B. Ms. Frances Shaw		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address 7145 Crittenden Street		Transaction ID: 1836269	
City State Zip Code Philadelphia PA 19119	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Artist Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Ms. Patricia Shea		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 1527 Harborsun Dr		Transaction ID: 1839847	
City State Zip Code Charleston SC 29412	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	375.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1306 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. William F. Sheehan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address PO Box 362		Transaction ID: 1842304	
City State Zip Code Barnesville MD 20838	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Horse Farm Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Ms. Ann E. Sheffer		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 5	
Mailing Address 19 Stony Point Road		Transaction ID: 1837601	
City State Zip Code Westport CT 06880	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Volunteer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1650.00		

Full Name (Last, First, Middle Initial) C. Ms. Deborah S. Shefler		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 5675 Chelton Drive		Transaction ID: 1840850	
City State Zip Code Oakland CA 94611	Amount of Each Receipt this Period 325.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Pacific Gas & Electric Company	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00		

SUBTOTAL of Receipts This Page (optional) ▶	725.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1307 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. Stanley Sheinbaum		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5	
Mailing Address 345 N. Rockingham Avenue		Transaction ID: 1841297	
City State Zip Code Los Angeles CA 90049	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Activist/Economist Aggregate Year-to-Date ▼ 1000.00		

B. Full Name (Last, First, Middle Initial) Ms. Beverly Sheldon		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 9032 Monte Mar Drive		Transaction ID: 1838609	
City State Zip Code Los Angeles CA 90035	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Aggregate Year-to-Date ▼ 540.00		

C. Full Name (Last, First, Middle Initial) Ms. Michaelyn K. Shelley-David		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 882 Fielding Drive		Transaction ID: 1840957	
City State Zip Code Palo Alto CA 94303	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer IBM Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation SALES MANAGER Aggregate Year-to-Date ▼ 1050.00		

SUBTOTAL of Receipts This Page (optional) ▶	685.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1308 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Michael J. Shelton		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 426 Partridge Circle		Transaction ID: 1840960
City State Zip Code Sarasota FL 34236	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Maddox & Shelton	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Ms. Elisha A. Shephard		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 225 Little Vine Road		Transaction ID: 1840151
City State Zip Code Bremen GA 30110	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Kimberly-Clark Corp.	Occupation Scientist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) C. Ms. Wendy R. Sherman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 6207 Yorkshire Terrace		Transaction ID: 1842290
City State Zip Code Bethesda MD 20814	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) ▶	1520.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1309 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Abner Shimony		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 8 Dover Road		Transaction ID: 1840093	
City Wellesley	State MA	Amount of Each Receipt this Period 25.00	
Zip Code 02482		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00	
Name of Employer Occupation Retired		Amount of Each Receipt this Period 25.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) B. Dr. Joan Shipley		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 19 Fairway Drive		Transaction ID: 1840900	
City Manhattan Beach	State CA	Amount of Each Receipt this Period 250.00	
Zip Code 90266		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Occupation Retired		Amount of Each Receipt this Period 250.00	
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) C. Ms. Mary J. Showers		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 5138 South Ridge Road		Transaction ID: 1841854	
City Cincinnati	State OH	Amount of Each Receipt this Period 100.00	
Zip Code 45224		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Occupation Retired		Amount of Each Receipt this Period 100.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional) ▶	375.00
TOTAL This Period (last page this line number only) ▶	375.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1310 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Pat B.D. Shure		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 1127 Brooks Street		Transaction ID: 1837075	
City State Zip Code Ann Arbor MI 48103		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer university of michigan Occupation Professor			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3300.00	

Full Name (Last, First, Middle Initial) B. Mr. Melvin Shure		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address P.O. Box 57		Transaction ID: 1844084	
City State Zip Code Searsmont ME 04973		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) C. Ms. Catherine M. Siegel		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 2430 N. Lakeview Ave # 15		Transaction ID: 1845630	
City State Zip Code Chicago IL 60614		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Social Worker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	1300.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1311 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Maureen F. Siegel		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 40 Silver Birch Road		Transaction ID: 1843271	
City State Zip Code Waban MA 02468	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Ms. Jeannine Bouillier Siegmond		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 2266 Cherry Hill Road		Transaction ID: 1838608	
City State Zip Code Palmerton PA 18071	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Ms. Ellen Siev		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 13 Hunter Street		Transaction ID: 1842043	
City State Zip Code Armonk NY 10504	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 600.00		

SUBTOTAL of Receipts This Page (optional) ▶	425.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1312 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Ariel Lauren Silbert		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 221 Heatherstone Way		Transaction ID: 1838868
City State Zip Code Lancaster PA 17601	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer 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) B. Mr. Ronald Silverman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 35 Tompkins Road		Transaction ID: 1838540
City State Zip Code Scarsdale NY 10583	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED		
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. Ms. Ruth-Ellen H. Simmonds		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 50 East 89th Street - 16C		Transaction ID: 1841275
City State Zip Code New York NY 10128	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) ▶	1125.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1313 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. John Simmons		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 5	
Mailing Address 643 West Arlington Place		Transaction ID: 1843719	
City State Zip Code Chicago IL 60614		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Participation Associates		Occupation Management Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Mr. Kenneth D. Simon		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 4156 Longridge Avenue		Transaction ID: 1842046	
City State Zip Code Sherman Oaks CA 91423		Amount of Each Receipt this Period 36.00	
FEC ID number of contributing federal political committee. C			
Name of Employer ACCO		Occupation Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 336.00	

Full Name (Last, First, Middle Initial) C. Mrs. Peggy Simonsen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 488 W. Center Road		Transaction ID: 1846073	
City State Zip Code Palatine IL 60074		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Retired	
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) ▶	236.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1314 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Carolyn Simonson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address PO Box 7487		Transaction ID: 1836708
City State Zip Code Tacoma WA 98406	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1100.00	

B. Full Name (Last, First, Middle Initial) Dr. Elizabeth L. Simpson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 14500 Fruitvale Avenue Apt. 4205		Transaction ID: 1839156
City State Zip Code Saratoga CA 95070	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 450.00	

C. Full Name (Last, First, Middle Initial) Ms. Dorothy Simpson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 2280 Virginia Street		Transaction ID: 1842204
City State Zip Code Berkeley CA 94709	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	375.00
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1315 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Barbara Sims		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 3212 N. Rochester Street		Transaction ID: 1842638
City State Zip Code Arlington VA 22213	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Carol Enters List Company	Occupation List Broker	
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) B. Mr. Robert Sims		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 939 Wilmington Way		Transaction ID: 1839775
City State Zip Code Emerald Hills CA 94062	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Latham & Watkins	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Dr. Jeanne M. Sing		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address P.O. Box 11398		Transaction ID: 1840877
City State Zip Code Winslow WA 98395	Amount of Each Receipt this Period 220.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
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) ▶	500.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1316 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. J. H. Sisson		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 123 Brankenridge Ave Apt. 304		Transaction ID: 1843324	
City State Zip Code San Antonio TX 78209	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Mr. Walter Skinner		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 617 NW Gwen Lake Avenue		Transaction ID: 1841887	
City State Zip Code Lake City FL 32055	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Rachel Slade		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 1014 3rd Avenue		Transaction ID: 1840056	
City State Zip Code Salt Lake City UT 84103	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 215.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	310.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1317 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Rosalyn Sloss		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address 1300 Seawane Drive		Transaction ID: 1845068	
City State Zip Code Hewlett NY 11557	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. Ms. Eleanora Hartley Smith		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 100 Newbury Ct Apt 304		Transaction ID: 1841456	
City State Zip Code Concord MA 01742	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) C. Ms. Elinor F. Smith		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 100-2 Joshuatown Road		Transaction ID: 1842708	
City State Zip Code Lyme CT 06371	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 225.00		

SUBTOTAL of Receipts This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1318 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Gail M. Smith		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 1132 Pome Avenue		Transaction ID: 1843319
City State Zip Code Sunnyvale CA 94087	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Judy L. Smith		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 1802 Puritan Drive		Transaction ID: 1839436
City State Zip Code Irving TX 75061	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Sandra M. Smith		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 2551 E Calle Sin Condena		Transaction ID: 1843314
City State Zip Code Tucson AZ 85718	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED Occupation MD	Aggregate Year-to-Date ▼ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	370.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1319 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Laura W. Smith

Mailing Address 2575 Peachtree Rd. NE #18E

City Atlanta State GA Zip Code 30305

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836222

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ms. Polly P. Smith

Mailing Address 307 East 12th Street, # 4B

City New York City State NY Zip Code 10003

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

Name of Employer Freelance Occupation Costume Designer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1838688

Amount of Each Receipt this Period
85.00

C. Full Name (Last, First, Middle Initial)
Ms. Michelle Smith

Mailing Address 3537 Stratford Road

City Wantagh State NY Zip Code 11793

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

Name of Employer Barnes & Noble, Inc. Occupation VP HR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1844331

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional)	535.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1320 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sara Dawn Smith		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 3713 Mt. Rainier, NE		Transaction ID: 1843411
City State Zip Code Albuquerque NM 87111	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Sheryl L. Smith		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 4105 Pacific Avenue, # 1		Transaction ID: 1839920
City State Zip Code Marina Del Rey CA 90292	Amount of Each Receipt this Period 24.50	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Harebrained Investments Consultant	Aggregate Year-to-Date ▼ 245.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Melissa A. Smith		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 64 White Oak Ridge Road		Transaction ID: 1844866
City State Zip Code Lincroft NJ 07738	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED Business Management	Aggregate Year-to-Date ▼ 2300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1274.50
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1321 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Miss Frances Spence Smith		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 685 Mayflower Road		Transaction ID: 1843435
City State Zip Code Claremont CA 91711	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Edgar Smith		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address PO Box 989		Transaction ID: 1837754
City State Zip Code Morro Bay CA 93443	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 725.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Frances H. Snedeker		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 20 Linden Avenue		Transaction ID: 1838628
City State Zip Code Larchmont NY 10538	Amount of Each Receipt this Period 16.50	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 815.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	166.50
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1322 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Mimi Sobel		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 26600 George Zeiger Drive		Transaction ID: 1840887
City State Zip Code Beachwood OH 44122	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1350.00	

Full Name (Last, First, Middle Initial) B. Ms. Ann B. Solberg		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 141 Mustato Road		Transaction ID: 1839943
City State Zip Code Katonah NY 10536	Amount of Each Receipt this Period 21.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) C. Ms. Deborah K. Solbert		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 416 West Neck Road		Transaction ID: 1845687
City State Zip Code Huntington NY 11743	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Artist Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional) ▶	471.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1323 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Rachael Solem		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 14 Ellsworth Avenue		Transaction ID: 1838792
City State Zip Code Cambridge MA 02139	Amount of Each Receipt this Period 17.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Irving House Corp	Occupation Hotelier	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 503.00	

Full Name (Last, First, Middle Initial) B. Ms. Janet W. Solinger		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 2801 New Mexico Avenue, NW Apt. 707		Transaction ID: 1836690
City State Zip Code Washington DC 20007	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

Full Name (Last, First, Middle Initial) C. Ms. Janet W. Solinger		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 2801 New Mexico Avenue, NW Apt. 707		Transaction ID: 1842317
City State Zip Code Washington DC 20007	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

SUBTOTAL of Receipts This Page (optional) ▶	317.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1324 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Joe R. Solmonese		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 5	
Mailing Address 1640 Rhode Island Avenue NW		Transaction ID: 1843725	
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Human Rights Campaign	Occupation President		
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. Ms. Julie A. Solochek		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 7 / 2 0 0 5	
Mailing Address 2815 Newberry		Transaction ID: 1844633	
City State Zip Code Milwaukee WI 53211	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer self	Occupation real estate		
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) C. Ms. Nancy F. Solomon		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 151 Central Park West		Transaction ID: 1840814	
City State Zip Code New York NY 10023	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer none	Occupation volunteer and housewife		
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) ▶	2250.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1325 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Elizabeth T. Soloway		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 755 Solana Drive		Transaction ID: 1840979	
City State Zip Code Lafayette CA 94549	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Writer	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Kathryn Sorenson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 13200 SW 69th Avenue		Transaction ID: 1840855	
City State Zip Code Miami FL 33156	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Miami-Dade County Occupation County Commissioner	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Dr. Barbara C. Sorkin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 6760 Kenwood Forest Lane		Transaction ID: 1840924	
City State Zip Code Chevy Chase MD 20815	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer National Institutes of Health Occupation Scientist	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1326 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Ramona A. Spears		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 7925 S. Park Place		Transaction ID: 1841445
City State Zip Code Orlando FL 32819	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Homemaker	Aggregate Year-to-Date ▼ 2500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Ramona A. Spears		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5
Mailing Address 7925 S. Park Place		Transaction ID: 1841858
City State Zip Code Orlando FL 32819	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Homemaker	Aggregate Year-to-Date ▼ 2500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Meredith R. Speers		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 6401 Maloney Ave		Transaction ID: 1839012
City State Zip Code Key West FL 33040	Amount of Each Receipt this Period 28.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Cray Research Account Manager	Aggregate Year-to-Date ▼ 280.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1528.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1327 / 1975						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sandra Spiewak		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 7020 S. Forrest Side Road		Transaction ID: 1839607	
City Brimley	State MI	Zip Code 49715	Amount of Each Receipt this Period 21.00
FEC ID number of contributing federal political committee. C			
Name of Employer War Memorial Hospital	Occupation Histotechnologist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) B. Dr. Duane C. Spriestersbach		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 2 Longview Knoll NE		Transaction ID: 1841923	
City Iowa City	State IA	Zip Code 52240	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00		

Full Name (Last, First, Middle Initial) C. Ms. Jane H. St. Clair		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 12 Waterford Drive		Transaction ID: 1841922	
City Worcester	State MA	Zip Code 01602	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	471.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1328 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Valerie A. St. Cyr Mailing Address 90 Codman Road City Lincoln State MA Zip Code 01773 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5 Transaction ID: 1836704 Amount of Each Receipt this Period 63.00
Name of Employer Teradyne Inc Occupation Engineer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	

B. Full Name (Last, First, Middle Initial) Ms. Donna M. Stader Mailing Address 5306 Lacy Way City Greenwood State IN Zip Code 46142 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5 Transaction ID: 1845023 Amount of Each Receipt this Period 100.00
Name of Employer Franklin Township Comm. Schls Occupation Teacher Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C. Full Name (Last, First, Middle Initial) Ms. Elizabeth A. Starrs Mailing Address 428 Humboldt Street City Denver State CO Zip Code 80218 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5 Transaction ID: 1840983 Amount of Each Receipt this Period 250.00
Name of Employer Kennedy & Christopher PC Occupation Lawyer 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)	413.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1329 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Linda M. Staubitz		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 6251 E Placita Aspecto		Transaction ID: 1845546
City State Zip Code Tucson AZ 85750	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation Editor		
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) B. Ms. Betty J. Steffens		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 1956 Charlais Street		Transaction ID: 1837292
City State Zip Code Tallahassee FL 32317	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Lael Stegall		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 102 Old Place Road		Transaction ID: 1836706
City State Zip Code Deer Isle ME 04627	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer self-employed Occupation Int. Devel.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	950.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1330 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Joan A. Steitz		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 45 Prospect Hill Road		Transaction ID: 1843244
City State Zip Code Branford CT 06405	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Yale Univ., H. Hughes Med.	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) B. Ms. Karen D. Stelling		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 425 W. 61st Terrace		Transaction ID: 1845645
City State Zip Code Kansas City MO 64113	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Burns & McDonnell Engineer	Occupation engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) C. Mr. Jerry L. Stellner		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 23825 Shady Oak Rd		Transaction ID: 1845469
City State Zip Code Shell Lake WI 54871	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1331 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Patricia McE. Stelzner		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address 3521 Campbell Court, NW		Transaction ID: 1836563	
City State Zip Code Albuquerque NM 87104	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Senior Citizens Law Office	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. Ms. C. E. Stenberg		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5	
Mailing Address 1649 Grand Avenue		Transaction ID: 1841203	
City State Zip Code Piedmont CA 94611	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Finance & Credit		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Ms. Gail R. Stephens		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address 4 Santa Lucia		Transaction ID: 1844778	
City State Zip Code Orinda CA 94563	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Psychologist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3600.00		

SUBTOTAL of Receipts This Page (optional) ▶	1600.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1332 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Kimberly Sterling		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 5
Mailing Address 301 E. Pine Street Suite 300		Transaction ID: 1843740
City State Zip Code Orlando FL 32801	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Mrs. Marcia K. Sternfeld		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address 2800 Battery Place, NW		Transaction ID: 1835586
City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Ms. Victoria A Steven		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5
Mailing Address 379 Walden Street, # 2		Transaction ID: 1844598
City State Zip Code Cambridge MA 02138	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Architect	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1333 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Katherine Stevenson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 2919 N. Hackett		Transaction ID: 1839804
City State Zip Code Milwaukee WI 53211	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Pro Health	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Ms. Debra Stikes		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5
Mailing Address 1800 Ensenada Drive		Transaction ID: 1842068
City State Zip Code Campbell CA 95008	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Amdahl Corp.	Occupation Programmer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) C. Ms. Ellen Stillpass		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 550 E. 4th Street		Transaction ID: 1837500
City State Zip Code Cincinnati OH 45202	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Interior Designer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	205.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1334 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Ellen Stillpass		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 550 E. 4th Street		Transaction ID: 1842082	
City State Zip Code Cincinnati OH 45202	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Interior Designer	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Sally Stoddard		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 2137 Bowdoin Street		Transaction ID: 1839407	
City State Zip Code Palo Alto CA 94306	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Catherine Stoker		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 6979 Hidden Ridge Drive		Transaction ID: 1843215	
City State Zip Code West Chester OH 45069	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Brite Belt Technologies Occupation Business Owner	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	375.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1335 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Virginia W. Stone		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 25713 Hatton Road		Transaction ID: 1841035
City State Zip Code Carmel CA 93923	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired	
Aggregate Year-to-Date ▼ 1000.00		

B. Full Name (Last, First, Middle Initial) Ms. Bonnie C. Stone		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 395 Broadway #4E		Transaction ID: 1843048
City State Zip Code New York NY 10013	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Women In Need, Inc.,	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 1000.00		

C. Full Name (Last, First, Middle Initial) Mr. Martin Stone		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5
Mailing Address 4113 Oliver Street		Transaction ID: 1838247
City State Zip Code Chevy Chase MD 20815	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 2600.00		

SUBTOTAL of Receipts This Page (optional) ▶	3750.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1336 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Rainer Storb		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 1100 Fairview Avenue N. # D1-100		Transaction ID: 1841034	
City State Zip Code Seattle WA 98109	Amount of Each Receipt this Period 83.33		
FEC ID number of contributing federal political committee. C			
Name of Employer Fred Hutchinson Cancer Ct- r.	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 666.65		

Full Name (Last, First, Middle Initial) B. Ms. Eileen Storey		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5	
Mailing Address 65 Nassahegan Dr		Transaction ID: 1841223	
City State Zip Code Burlington CT 06013	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer U of CT	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Ms. Alice M. Strange		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 100 Harper Lane		Transaction ID: 1843292	
City State Zip Code Midland MI 48640	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
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) ▶	333.33
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 1337 / 1975
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Virginia C. Street

Mailing Address 430 Village Place, Apt. 314F

City State Zip Code
Longwood FL 32779

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

Name of Employer Occupation
Occupation REQUESTED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 5

Transaction ID: 1840996

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ms. Celia J. Stuart-Powles

Mailing Address 3610 E. 24th Street

City State Zip Code
Tulsa OK 74114

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

Name of Employer Occupation
Fluor Daniel Wms. Bros. Electrical Designer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 440.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1839099

Amount of Each Receipt this Period
85.00

C. Full Name (Last, First, Middle Initial)
Ms. Martha J. Sullivan

Mailing Address 16628 Maverick Court

City State Zip Code
Poway CA 92064

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

Name of Employer Occupation
None Investor/Volunteer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 245.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1839507

Amount of Each Receipt this Period
24.50

SUBTOTAL of Receipts This Page (optional) ► **359.50**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1338 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Candace Sullivan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 5857 N. Winthrop		Transaction ID: 1839190	
City State Zip Code Chicago IL 60660	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer self-employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation communications consultant Aggregate Year-to-Date ▼ 280.00		

Full Name (Last, First, Middle Initial) B. Mrs. Rebecca D. Summers		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address PO Box 266		Transaction ID: 1845629	
City State Zip Code Plymouth WI 53073	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Mrs. Jane E. Susswein		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 85 Clinton Avenue		Transaction ID: 1845468	
City State Zip Code Montclair NJ 07042	Amount of Each Receipt this Period 365.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 715.00		

SUBTOTAL of Receipts This Page (optional) ▶	485.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1339 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Ellie Sutter		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 3627 Klamath Street		Transaction ID: 1842877
City State Zip Code Oakland CA 94602	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Ms. Susan G. Swift		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 11000 Ring Rd.		Transaction ID: 1836695
City State Zip Code Reston VA 20190	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation City Planner Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Ms. Marilyn Tabb		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 220 Ventura Avenue #1-A		Transaction ID: 1842715
City State Zip Code Palo Alto CA 94306	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1340 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Koorosh Talieh		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 3201 Stephenson Place NW		Transaction ID: 1844898	
City State Zip Code Washington DC 20015	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Ruth B. Talley		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 1302 Anglers Lane		Transaction ID: 1840975	
City State Zip Code Lutz FL 33548	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Jill Tane		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address P.O. Box 193		Transaction ID: 1842891	
City State Zip Code Quechee VT 05059	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Office Manager	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	700.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1341 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Nadine Tang		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 2041 Bancroft Way, Ste. 310		Transaction ID: 1842336
City State Zip Code Berkeley CA 94704	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Lois Tarter		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 210 E. 39th Street		Transaction ID: 1844425
City State Zip Code New York NY 10016	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Manager	Aggregate Year-to-Date ▼ 1250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. Priscilla W. Tate		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 6612 Meadowpark Court		Transaction ID: 1838942
City State Zip Code Benbrook TX 76132	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 785.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1342 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Penelope A. Taylor		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 1643 Seacayne Blvd.		Transaction ID: 1839007
City State Zip Code Aptos CA 95003	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 475.00	

Full Name (Last, First, Middle Initial) B. Ms. Earlene J. Taylor		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 1661 Pine Street, # 304		Transaction ID: 1840912
City State Zip Code San Francisco CA 94109	Amount of Each Receipt this Period 625.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) C. Mrs. Heather K. Taylor		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 6432 Old Goose Creek Road		Transaction ID: 1837532
City State Zip Code Middleburg VA 20117	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1200.00	

SUBTOTAL of Receipts This Page (optional) ▶	760.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1343 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Paula A. Taylor		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address P.O. Box 500408		Transaction ID: 1845705
City State Zip Code San Diego CA 92150	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired	
	Aggregate Year-to-Date ▼ 750.00	

B. Full Name (Last, First, Middle Initial) Ms. Doris C. Teplitz		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 8615 Terrace Garden Way		Transaction ID: 1840820
City State Zip Code Bethesda MD 20814	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Physicist	
	Aggregate Year-to-Date ▼ 1050.00	

C. Full Name (Last, First, Middle Initial) Ms. Edith Terwilliger		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 2008 Arthur Avenue		Transaction ID: 1838726
City State Zip Code Charleston IL 61920	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Insurance Agent	
	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	525.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1344 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Shirley T. Thatcher		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 3663 Thorn Road		Transaction ID: 1838653	
City State Zip Code Sebastopol CA 95472	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) B. Mr. Bernard Theisen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 1404 Kensington Rd		Transaction ID: 1843239	
City State Zip Code Grosse Pointe Park MI 48230	Amount of Each Receipt this Period 125.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 230.00		

Full Name (Last, First, Middle Initial) C. Ms. Sandy Thomas		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 16404 Avila Boulevard		Transaction ID: 1840997	
City State Zip Code Tampa FL 33613	Amount of Each Receipt this Period 166.66		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Organizational Devlpmt. Aggregate Year-to-Date ▼ 1166.62		

SUBTOTAL of Receipts This Page (optional) ▶	301.66
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1345 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Eleanore C. Thomas		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 628 Cambridge Station Road		Transaction ID: 1839678
City State Zip Code Louisville KY 40223	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED		
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) B. Ms. Jennie L. Thompson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5
Mailing Address 1854 Kalorama Road, NW		Transaction ID: 1837874
City State Zip Code Washington DC 20009	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Self Fundraising 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. Ms. Wilma A. Thompson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address PO Box 1872		Transaction ID: 1842810
City State Zip Code North Eastham MA 02651	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	220.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1346 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sylvia Thornburg		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 1203 Warner Street NE		Transaction ID: 1840707
City Olympia State WA Zip Code 98516	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) B. Dr. Judy M. Thorne		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 316 November Drive		Transaction ID: 1838743
City Durham State NC Zip Code 27712	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Education Research Aggregate Year-to-Date ▼ 800.00	

Full Name (Last, First, Middle Initial) C. Ms. Karline K. Tierney		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 717 Maiden Choice Lane Suite T03		Transaction ID: 1841120
City Catonsville State MD Zip Code 21228	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1347 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Barbara Y. Tiffany

Mailing Address 27 Cafferty Road

City State Zip Code
Point Pleasant PA 18950

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

Name of Employer Self Occupation Furniture Designer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1843015

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
Mr. Stephen E. Tills

Mailing Address 98 West Main Street

City State Zip Code
Shortsville NY 14548

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

Name of Employer GW LISK Co. Occupation Software Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1840579

Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
Ms. Helen M. Tirsell

Mailing Address 565 Bellevue Ave Apt 1007

City State Zip Code
Oakland CA 94610

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: 1837762

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)	▶	1620.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1348 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Teresa Pike Tomlinson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 840 Cooper Avenue		Transaction ID: 1841007	
City State Zip Code Columbus GA 31906		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Pope, McGlamery, Kilpatr Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1250.00	

Full Name (Last, First, Middle Initial) B. Ms. Peggy Tomsic		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 136 E. South Temple Ste. 800		Transaction ID: 1844157	
City State Zip Code Salt Lake City UT 84111		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Ms. Karen Jo Torjesen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 2062 Drury Court		Transaction ID: 1844408	
City State Zip Code Claremont CA 91711		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Claremont Graduate School Prof.			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional) ▶	850.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1349 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Susan Townsend		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 112 Thruston Boulevard E.		Transaction ID: 1838890
City State Zip Code Dayton OH 45409	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

Full Name (Last, First, Middle Initial) B. Ms. Louann Townsend		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 5434 E. Lincoln Drive		Transaction ID: 1843447
City State Zip Code Paradise Villey AZ 85253	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) C. Ms. Joan M. Toy		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 736 W Dexter Trl		Transaction ID: 1840520
City State Zip Code Mason MI 48854	Amount of Each Receipt this Period 21.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional) ▶	356.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1350 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Norrene Trama

Mailing Address 4102 Aspenwood Drive

City Richmond State TX Zip Code 77469

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

Name of Employer Self Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1844202

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Ms. Barbara K. Traum

Mailing Address 7325 Heritage Palms Estate Dr

City Fort Myers State FL Zip Code 33912

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

Name of Employer Occupation Student

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1838835

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. Donald M. Traunstein

Mailing Address 720 West End Avenue
Apartment 501

City New York State NY Zip Code 10025

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1838754

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)	▶	225.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1351 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Merle Tresser		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 1643 N. Larrabee, Unit I		Transaction ID: 1840985	
City State Zip Code Chicago IL 60614	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Tresser Marketing Resources	Occupation Marketing		
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. Mr. Robert F. Trost		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 2678 Route 43		Transaction ID: 1842842	
City State Zip Code Averill Park NY 12018	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) C. Ms. Jo Anne J. Trow		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 1835 N.W. Juniper Place		Transaction ID: 1846323	
City State Zip Code Corvallis OR 97330	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

SUBTOTAL of Receipts This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1352 / 1975
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Ruth Trubner		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 919 109th Avenue NE Apt. 1208		Transaction ID: 1845981
City State Zip Code Bellevue WA 98004	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired	
Aggregate Year-to-Date ▼ 550.00		

B. Full Name (Last, First, Middle Initial) Ms. Joan Trunk		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 233 14th Avenue E.		Transaction ID: 1837088
City State Zip Code Seattle WA 98112	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired	
Aggregate Year-to-Date ▼ 325.00		

C. Full Name (Last, First, Middle Initial) Dr. Lindsey S. Tucker		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 8735 SW 54 Terrace		Transaction ID: 1843616
City State Zip Code Miami FL 33165	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Univ. of Miami Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Professor of English	
Aggregate Year-to-Date ▼ 650.00		

SUBTOTAL of Receipts This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1353 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Carol Tucker Foreman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 1620 Eye Street, Ste. 200		Transaction ID: 1843036
City State Zip Code Washington DC 20006	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Consumer Federation of America	Occupation Dir. of Food Policy Institute	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Mr. Joseph S. Tulchin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 2301 N St NW Apt 516		Transaction ID: 1841419
City State Zip Code Washington DC 20037	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Woodrow Wilson Center	Occupation Adminstrator	
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. Mrs. William Turgeon		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 28272 Driza		Transaction ID: 1839956
City State Zip Code Mission Viejo CA 92692	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation REQUESTED	
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) ▶	775.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1354 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Elizabeth Turnage

Mailing Address 3025 Maple Ave

City State Zip Code
Waco TX 76707

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1839906

Amount of Each Receipt this Period
21.00

B. Full Name (Last, First, Middle Initial)
Ms. Ara L. Tyler

Mailing Address 91 Mary Catherine Drive

City State Zip Code
Lancaster MA 01523

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 5

Transaction ID: 1843736

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mrs. Ingeborg Uhrir

Mailing Address 45 Kendall Common Road

City State Zip Code
Weston MA 02493

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842804

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional)	471.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 1355 / 1975
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Margaret Ulf

Mailing Address 2474 Colvin Road

City State Zip Code
Amissville VA 20106

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

Name of Employer Occupation
Housewife

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1839750

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Ms. Gail Ullman

Mailing Address 12 Maple Street

City State Zip Code
Princeton NJ 08542

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836266

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Michael Unga

Mailing Address 5316 Forte Lane

City State Zip Code
Concord CA 94521

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

Name of Employer Occupation
Tetra Tech Inc. Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1839961

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► **305.00**

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

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

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

FOR LINE NUMBER: PAGE 1356 / 1975
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Ann Nash Upton

Mailing Address 3300 Darby Road, # 7108

City State Zip Code
Haverford PA 19041

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

Name of Employer Occupation
Painter

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843474

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Dr. Philip R. Vandeman

Mailing Address 3533 Simmons Mill Court SW
A

City State Zip Code
Tumwater WA 98512

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

Name of Employer Occupation
Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842150

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Ms. Margaret E. VanGundy

Mailing Address 1176 Lagonda Avenue

City State Zip Code
Springfield OH 45503

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

Name of Employer Occupation
Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 440.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1839112

Amount of Each Receipt this Period
85.00

SUBTOTAL of Receipts This Page (optional) ► 285.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1357 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Esther VanHaften

Mailing Address 3404 Dartmouth Drive

City State Zip Code
Midland MI 48642

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842785

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Ms. Marta VanLoan

Mailing Address 930 W. Arlington Street

City State Zip Code
Martinez CA 94553

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

Name of Employer Occupation
US Dept. Agriculture Scientist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 0 5

Transaction ID: 1841910

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Ms. Stephanie Vardavas

Mailing Address 118 NW 22nd Place

City State Zip Code
Portland OR 97210

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

Name of Employer Occupation
Nike, Inc. Endorsement and League Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838250

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	450.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1358 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Kenneth W. Vaughan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 7310 Seawall Blvd Apt 207		Transaction ID: 1845628
City State Zip Code Galveston TX 77551	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 650.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Gregoria Vega-Byrnes		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 1637 W 103rd St		Transaction ID: 1843376
City State Zip Code Chicago IL 60643	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer None Occupation Homemaker	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Rogean Vetter		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 1908 N Highway 14		Transaction ID: 1840323
City State Zip Code Marquette NE 68854	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 440.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	485.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1359 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Veronia J. Vieland

Mailing Address 1822 Friendship St

City Iowa City State IA Zip Code 52245

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

Name of Employer University of Iowa Occupation Professor of Biostatistics

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837279

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mrs. Louesa Vig

Mailing Address 8360 E. Via De Viva

City Scottsdale State AZ Zip Code 85258

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

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 0 5

Transaction ID: 1842086

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Ms. Kathleen Villacorta

Mailing Address 2057 Florida Avenue

City Tallahassee State FL Zip Code 32303

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

Name of Employer Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1356.14

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 0 5

Transaction ID: 1848196

Amount of Each Receipt this Period
756.14

InKind Catering/Facilities

SUBTOTAL of Receipts This Page (optional)	▶	1106.14
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1360 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Dinah Buechner Vischer		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 123 Buttricks Hill Road		Transaction ID: 1841176
City State Zip Code Concord MA 01742	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Freelance film producer	Aggregate Year-to-Date ▼ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Mary Jane Volk		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 5
Mailing Address 541 E Nelson Avenue		Transaction ID: 1843739
City State Zip Code Alexandria VA 22301	Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation AiMar Partners Consultant	Aggregate Year-to-Date ▼ 1075.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Susan F. Volman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 1516 Corcoran Street, N.W.		Transaction ID: 1840954
City State Zip Code Washington DC 20009	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation US Government/ DHHS Science Administrator	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	950.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1361 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Jean M. Volpe		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address PO Box 813		Transaction ID: 1836985
City State Zip Code Cataumet MA 02534	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B. Full Name (Last, First, Middle Initial) Mrs. Marion Vuilleumier		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 579 Buck Island Road Apt. 147		Transaction ID: 1842160
City State Zip Code West Yarmouth MA 02673	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

C. Full Name (Last, First, Middle Initial) Ms. Helga N. Wagner		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 512 Moreland Road		Transaction ID: 1840639
City State Zip Code Huntingdon Vv PA 19006	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

SUBTOTAL of Receipts This Page (optional) ▶	485.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1362 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Adele Waide		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 8153 Meandering Way		Transaction ID: 1839535	
City Austin State TX Zip Code 78759	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. Ms. Clara Wainwright		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address 57 Upland Road		Transaction ID: 1836605	
City Brookline State MA Zip Code 02445	Amount of Each Receipt this Period 900.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Artist Aggregate Year-to-Date ▼ 900.00		

Full Name (Last, First, Middle Initial) C. Ms. Marjorie Waite		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 1178 Tucker Road		Transaction ID: 1845694	
City North Dartmouth State MA Zip Code 02747	Amount of Each Receipt this Period 841.11		
FEC ID number of contributing federal political committee. C			
Name of Employer Comm of MA Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Social Worker Aggregate Year-to-Date ▼ 841.11		

SUBTOTAL of Receipts This Page (optional) ▶	1771.11
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1363 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Prof. Cynthia Walk		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 5959 Waverly Avenue		Transaction ID: 1840361
City State Zip Code La Jolla CA 92037	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		
Name of Employer University of California San Diego	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1125.00	

Full Name (Last, First, Middle Initial) B. Ms. Gretchen Walker		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address 985 North Lydia		Transaction ID: 1836231
City State Zip Code Stephenville TX 76401	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) C. Ms. Gretchen Walker		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 985 North Lydia		Transaction ID: 1838641
City State Zip Code Stephenville TX 76401	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1364 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Jeanine Wall		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 670 N. Clark Street Apt. 300		Transaction ID: 1840984
City State Zip Code Chicago IL 60610	Amount of Each Receipt this Period 125.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation Attorney	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Daphne Wall		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address PO Box 1116		Transaction ID: 1842828
City State Zip Code North Conway NH 03860	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Sunbridge Carr & Reh Occupation RN	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Gail Waller		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address 1442 North Dearborn		Transaction ID: 1837743
City State Zip Code Chicago IL 60610	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Waller Buick Company Occupation Attorney	Aggregate Year-to-Date ▼ 3000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1225.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1365 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Joan C. Waller		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 0 5
Mailing Address 6310 Meadowcreek Drive		Transaction ID: 1844561
City State Zip Code Dallas TX 75254	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Secore & Waller LLP	Occupation Lawyer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

Full Name (Last, First, Middle Initial) B. Mrs. Bettine K. Wallin		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 895 Toro Canyon Road		Transaction ID: 1843443
City State Zip Code Santa Barbara CA 93108	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation music teacher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Full Name (Last, First, Middle Initial) C. Mr. Christopher English Walling		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 325 East Hopkins		Transaction ID: 1841068
City State Zip Code Aspen CO 81611	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

SUBTOTAL of Receipts This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 1366 / 1975
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Barbara M. Walls

Mailing Address 16836 N. 111th Avenue

City State Zip Code
Sun City AZ 85351

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1843684

Amount of Each Receipt this Period
50.00

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

Mailing Address 209 Menlo Park Road

City State Zip Code
Schenectady NY 12309

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1839489

Amount of Each Receipt this Period
85.00

C. Full Name (Last, First, Middle Initial)
Dr. Jean M. Walsh

Mailing Address 30210 23rd Ave SW

City State Zip Code
Federal Way WA 98023

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

Name of Employer Occupation
Self-Employed M.D.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1845003

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **385.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1367 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Karyn Ward		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 3 Eureka Terrace		Transaction ID: 1840884	
City State Zip Code Stamford CT 06902	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer The Ashforth Co.	Occupation Exec. Ass't		
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. Ms. Doris Waring		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 2911 NW 13th Place		Transaction ID: 1842909	
City State Zip Code Corvallis OR 97330	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Rev. Theodora Elkinton Waring		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 45 Rochester Road		Transaction ID: 1840817	
City State Zip Code Newton MA 02458	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Retired	
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) ▶	600.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 1368 / 1975
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Elva J. Waters

Mailing Address 540 Village Place
Apt. 318

City State Zip Code
Longwood FL 32779

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1844089

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
Ms. Lindsay Watson

Mailing Address 1409 Gretta Street NE

City State Zip Code
Albuquerque NM 87112

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 775.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1840776

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Mrs. Elizabeth A. Watson

Mailing Address 142 E. Center Street

City State Zip Code
Berea OH 44017

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1839293

Amount of Each Receipt this Period
23.00

SUBTOTAL of Receipts This Page (optional) ► 198.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1369 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Marie Watson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5
Mailing Address 2A Camino Del Luna		Transaction ID: 1837873
City State Zip Code Cloudcroft NM 88317	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer USDA	Occupation Administrative Assist.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Ms. Marie Watson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 2A Camino Del Luna		Transaction ID: 1844869
City State Zip Code Cloudcroft NM 88317	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer USDA	Occupation Administrative Assist.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Merryl J. Weber		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 5808 Varna Avenue		Transaction ID: 1844404
City State Zip Code Van Nuys CA 91401	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer none	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1370 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Melissa L. Weeks

Mailing Address 8 Brookside Drive

City Titusville State NJ Zip Code 08560

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

Name of Employer Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 0 5

Transaction ID: 1843860

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Mr. Alex. Weilenmann

Mailing Address 307 S. Dithridge Street, # 509

City Pittsburgh State PA Zip Code 15213

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843050

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mrs. Cheryl Weiner

Mailing Address 4248 50th Street NW

City Washington State DC Zip Code 20016

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

Name of Employer Occupation Volunteer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 5

Transaction ID: 1840921

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)	▶	1125.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1371 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Robert L. Weiner		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 59 1/2 Manchester Street		Transaction ID: 1842109	
City State Zip Code San Francisco CA 94110		Amount of Each Receipt this Period 900.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Robert L. Weiner Consulting		Occupation President	
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. Ms. Mary Weinland		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 2 Nutmeg Court		Transaction ID: 1845701	
City State Zip Code Mansfield Center CT 06250		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00	

Full Name (Last, First, Middle Initial) C. Ms. Bernice Weis		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 195 Fernwood Avenue		Transaction ID: 1845550	
City State Zip Code Upr Montclair NJ 07043		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Retired	
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) ▶	1650.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1372 / 1975		
	<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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Erica Weissman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 40 E. 9th Street, Apt. 8A		Transaction ID: 1841813	
City State Zip Code New York NY 10003	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Mrs. Eleanor Weiss-Zoub		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 6509 N. Kilbourn Avenue		Transaction ID: 1845684	
City State Zip Code Lincolnwood IL 60712	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Ms. Patricia D. Welch		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 1755 Michigan Street		Transaction ID: 1845665	
City State Zip Code Algonac MI 48001	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 375.00		

SUBTOTAL of Receipts This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1373 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Rev. Ned E. Weller		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 10 Maplewood Drive Apt. #1		Transaction ID: 1838746
City Lewisburg State PA Zip Code 17837	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) B. Ms. Dona F. Wells		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 12213 Ledges Drive		Transaction ID: 1843251
City Louisville State KY Zip Code 40243	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer EMW Women's Surgical Center Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Executive Director Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Diana Wessell		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 21665 Woolaroc Drive		Transaction ID: 1838683
City Los Gatos State CA Zip Code 95033	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Lockheed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Programmer Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	135.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1374 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Effie E. Westervelt		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 26 Southridge East		Transaction ID: 1845039
City State Zip Code Tiburon CA 94920	Amount of Each Receipt this Period 4000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Susan Westover		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address 6835 East Cheney Road		Transaction ID: 1835614
City State Zip Code Paradise Valley AZ 85253	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Self-Employed Psychologist	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Lynn Wheeler		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 11904 Braewood Drive		Transaction ID: 1844438
City State Zip Code Austin TX 78758	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	4200.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1375 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Joy White		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 100 Sterling Hill Road		Transaction ID: 1844305
City State Zip Code Sparta NJ 07871	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer The Blood Center of NJ	Occupation RN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) B. Ms. Robin S. White		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 301 East 38 Street, # 141		Transaction ID: 1839706
City State Zip Code New York NY 10016	Amount of Each Receipt this Period 33.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Women In Need, Inc.	Occupation Fundraiser	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 361.50	

Full Name (Last, First, Middle Initial) C. Paralee White		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 595 S. Green Valley Pkwy # 322		Transaction ID: 1840811
City State Zip Code Henderson NV 89012	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Sentinel Industries, Inc	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional) ▶	2633.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1376 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Katherine A. White		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5
Mailing Address 8201 Mockingbird Dr		Transaction ID: 1841816
City State Zip Code Annandale VA 22003	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Montessori School of NVA	Occupation Director of Develop.	
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) B. Ms. Diane Whitehead		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 2414 Buckingham Road		Transaction ID: 1838730
City State Zip Code Greeneville TN 37745	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Cherokee Mental Health Ce- nter	Occupation Psychologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) C. Dr. Jaan W. Whitehead		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 44 Gramercy Park, North St. #11B		Transaction ID: 1843643
City State Zip Code New York NY 10010	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Arts Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) ▶	5280.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1377 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Marilyn I. Whiting		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 6202 Warrington Drive		Transaction ID: 1839928	
City State Zip Code New Orleans LA 70122	Amount of Each Receipt this Period 21.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 210.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Penny Whitmire		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address 18225 Cheycona Lane SW		Transaction ID: 1844699	
City State Zip Code Rochester WA 98579	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Realtor	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Linnea J Wickstrom		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 450 Monroe Drive		Transaction ID: 1836671	
City State Zip Code Palo Alto CA 94306	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation technical writer	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	371.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1378 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Caroline Widmer		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 3280 W. Roxboro Road NE		Transaction ID: 1839704
City State Zip Code Atlanta GA 30324	Amount of Each Receipt this Period 23.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Psychologist Aggregate Year-to-Date ▼ 280.00	

Full Name (Last, First, Middle Initial) B. Ms. Lesley L. Wilbur		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 1783 Eaglehelm Pl.		Transaction ID: 1840417
City State Zip Code Henderson NV 89074	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation judge Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) C. Ms. Norma S. Wilcox		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 3548 Laurelwood Road		Transaction ID: 1843249
City State Zip Code Dayton OH 45409	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	143.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1379 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Thomas D. Wilkerson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5	
Mailing Address 271 W. Center Street		Transaction ID: 1838403	
City State Zip Code Logan UT 84321	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation USU Research			
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. Dr. Thomas D. Wilkerson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 271 W. Center Street		Transaction ID: 1841040	
City State Zip Code Logan UT 84321	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation USU Research			
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) C. Ms. Hope Williams		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 844 Madison Street		Transaction ID: 1841935	
City State Zip Code Monterey CA 93940	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
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) ▶	300.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1380 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Janet E. Williamson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5	
Mailing Address 1611 Kriste Ct.		Transaction ID: 1841230	
City State Zip Code St. Louis MO 63131	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1250.00		

Full Name (Last, First, Middle Initial) B. Ms. Donna L. Williamson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 52 Nace Avenue		Transaction ID: 1840644	
City State Zip Code Piedmond CA 94611	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 525.00		

Full Name (Last, First, Middle Initial) C. Ms. Caroline Willis		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 4235 Fordham Road NW		Transaction ID: 1837428	
City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 350.00		

SUBTOTAL of Receipts This Page (optional) ▶	635.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1381 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Stacy E. Wilson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 114 Valley Cir		Transaction ID: 1840353	
City State Zip Code San Marcos TX 78666	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Mr. Francis E. Wilson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 22247 35th Place S. Apt. D201		Transaction ID: 1842350	
City State Zip Code Kent WA 98032	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 400.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Mr. James C. Wilson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 6316 E Willow Loop		Transaction ID: 1837177	
City State Zip Code Flagstaff AZ 86004	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 600.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	725.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1382 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Barbara S. Wilson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address 908 Cottrell Way		Transaction ID: 1844950	
City State Zip Code Stamford CA 94305	Amount of Each Receipt this Period 400.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Counselor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) B. Ms. Elaine K. Winik		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address 100 Sunrise Avenue Apt. 325		Transaction ID: 1845094	
City State Zip Code Palm Beach FL 33480	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) C. Ms. Helen B. Wise		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5	
Mailing Address 231 Fulton St.		Transaction ID: 1844542	
City State Zip Code Redwood City CA 94062	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Owner-bookkeeping & tax svc		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

SUBTOTAL of Receipts This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1383 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Nancy Witstine		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address PO Box 266		Transaction ID: 1839721
City State Zip Code Boonville CA 95415	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 285.00	

Full Name (Last, First, Middle Initial) B. Ms. Barbara S. Witt		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 136 Creek Dr		Transaction ID: 1841489
City State Zip Code Montgomery AL 36117	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Professor Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) C. Mrs. Roma Broida Wittcoff		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 7878 Gainey Ranch Rd. #64		Transaction ID: 1841285
City State Zip Code Scottsdale AZ 85258	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Aggregate Year-to-Date ▼ 1600.00	

SUBTOTAL of Receipts This Page (optional) ▶	210.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1384 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Wendy C. Wolf		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5	
Mailing Address 105 Laurier		Transaction ID: 1844615	
City Bryn Mawr	State PA	Amount of Each Receipt this Period 1200.00	
Zip Code 19010		Amount of Each Receipt this Period 1200.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1200.00	
Name of Employer Occupation Retired		Amount of Each Receipt this Period 1200.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Ms. Agnes S. Wolf		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 1057 Rocky Run Road		Transaction ID: 1845727	
City McLean	State VA	Amount of Each Receipt this Period 5.00	
Zip Code 22102		Amount of Each Receipt this Period 5.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00	
Name of Employer Occupation Retired		Amount of Each Receipt this Period 5.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2805.00	

Full Name (Last, First, Middle Initial) C. Mr. Norman S. Wolf		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 7557 35th Avenue NE		Transaction ID: 1845568	
City Seattle	State WA	Amount of Each Receipt this Period 250.00	
Zip Code 98115		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Occupation REQUESTED		Amount of Each Receipt this Period 250.00	
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) ▶	1455.00
TOTAL This Period (last page this line number only) ▶	1455.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1385 / 1975
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Susan Wolfe		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 350 Campesino Avenue		Transaction ID: 1841443	
City State Zip Code Palo Alto CA 94306	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Seagate Software	Occupation Lawyer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00		

Full Name (Last, First, Middle Initial) B. Ms. Winifred J. Wood		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 1603 Rivershore Road		Transaction ID: 1842848	
City State Zip Code Elizabeth City NC 27909	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) C. Ms. Dottie M. Woodcock		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 2621 Foxhall Road NW		Transaction ID: 1842352	
City State Zip Code Washington DC 20007	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

SUBTOTAL of Receipts This Page (optional) ▶	1400.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1386 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Mendelle Woodley		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 7503 Wyndale Road		Transaction ID: 1842337
City State Zip Code Chevy Chase MD 20815	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Cynthia Woolbright		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 23 Captains Cove Ln		Transaction ID: 1845715
City State Zip Code Webster NY 14580	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Hollins University Educational Admin.	Aggregate Year-to-Date ▼ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Sue Wrenn		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 7319 Desert Ridge Gln		Transaction ID: 1840911
City State Zip Code Bradenton FL 34202	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Civic Volunteer	Aggregate Year-to-Date ▼ 1750.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	800.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1387 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Janet I. Wright		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 1038 Stonybrook Drive		Transaction ID: 1839902	
City State Zip Code O'Fallon IL 62269	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer U.S. Air Force, Retired	Occupation Retired Officer, USAF		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00		

Full Name (Last, First, Middle Initial) B. Mrs. Margaret U. Wright		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 4604 Stoneleigh Court		Transaction ID: 1841470	
City State Zip Code Rockville MD 20852	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Music Teacher		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) C. Ms. Juliet Wurr		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 6070 Beirut Place		Transaction ID: 1845661	
City State Zip Code Dulles VA 20189	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer U.S. Information Agency	Occupation Foreign Svc. Off.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00		

SUBTOTAL of Receipts This Page (optional) ▶	1270.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1388 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Sharon Wyse		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address 549 1St St		Transaction ID: 1836632	
City State Zip Code Brooklyn NY 11215		Amount of Each Receipt this Period 365.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Consultant			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 365.00	

B. Full Name (Last, First, Middle Initial) Ms. Elise A. Yablonski		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 314 W 77th Street Apt. 3A		Transaction ID: 1843246	
City State Zip Code New York NY 10024		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Proskauer, Rose Occupation Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

C. Full Name (Last, First, Middle Initial) Ms. Margot Yapp		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 5	
Mailing Address 1042 Sunnyhills Rd		Transaction ID: 1841258	
City State Zip Code Oakland CA 94610		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Nichols Cons Engineers Occupation Civil Engineer			
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) ▶	715.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1389 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Amy Yenyo		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 2923 E South Woodstock		Transaction ID: 1841051	
City Arlington	State VA	Zip Code 22206	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Fulbright and Jaworski	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00		

Full Name (Last, First, Middle Initial) B. Ms. Elizabeth S. York		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address 1110 N. Glebe Road		Transaction ID: 1844951	
City Arlington	State VA	Zip Code 22201	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
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. Ms. Maria S. Young		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 4635 Latrobe Place		Transaction ID: 1837304	
City Alexandria	State VA	Zip Code 22311	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Air Force	Occupation Auditor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

SUBTOTAL of Receipts This Page (optional)	450.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1390 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Jeanne W. Yozell		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address 56 Ridgeway Road		Transaction ID: 1845000	
City State Zip Code Weston MA 02493	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Clinical Social Worker		
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. Ms. Helene Zeiger		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 1521 LeRoy Avenue		Transaction ID: 1838805	
City State Zip Code Berkeley CA 94708	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) C. Mr. Jerome Ziegler		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5	
Mailing Address 40 Hickory Road		Transaction ID: 1836190	
City State Zip Code Ithaca NY 14850	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	1525.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1391 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Margaret Zierdt		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 701 Roxboro Road		Transaction ID: 1840821
City State Zip Code Rockville MD 20850	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired	
	Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) B. Ms. Margaret Zierdt		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 701 Roxboro Road		Transaction ID: 1842703
City State Zip Code Rockville MD 20850	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired	
	Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) C. Ms. Barbara Zigli		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 5840 Bratislava Place		Transaction ID: 1844236
City State Zip Code Dulles VA 20189	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer State Department Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Diplomat	
	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional) ▶	350.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1392 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Lindsay Hanson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address 2929 University Ave SE Suite 100		Transaction ID: 18344236
City State Zip Code Minneapolis MN 55424	Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. C		Transferred \$1500 to non-federal November 2005
Name of Employer Grass Roots Solutions	Occupation Organizer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) B. Ms. Alexandra Moses		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 1132 Union Street		Transaction ID: 183525721
City State Zip Code San Francisco CA 94109	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] MEMO(STOCK)
Name of Employer Moses & Associates, P.C.	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Dr. Judith C. Simon		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 12271 Windsor Court		Transaction ID: 1846095
City State Zip Code Los Altos Hills CA 94022	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Allyson Schwartz Earmark Contributions
Name of Employer Self	Occupation Psychologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	1525.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1393 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Edward A. Caress		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 6538 Bay Tree Ct		Transaction ID: 1838107
City State Zip Code Falls Church VA 22041	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Allyson Schwartz Earmark Contributions	
Name of Employer Occupation George Washington University Professor	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dr. Judith C. Simon		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 12271 Windsor Court		Transaction ID: 1846094
City State Zip Code Los Altos Hills CA 94022	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Debbie Stabenow Earmarked Contributions	
Name of Employer Occupation Self Psychologist	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Anita Popik		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 3855 Vineyard Drive		Transaction ID: 1846390
City State Zip Code Redwood City CA 94061	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Debbie Stabenow Earmarked Contributions	
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	125.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1394 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Arien Grabbe		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5		
Mailing Address 3879 Lurline Drive		Transaction ID: 1844092		
City Honolulu State HI Zip Code 96816	Amount of Each Receipt this Period 25.00		Kathy Castor Earmark Contributions	
FEC ID number of contributing federal political committee. C				
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 0.00			

Full Name (Last, First, Middle Initial) B. Ms. Regina Scheiding		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5		
Mailing Address 1806 Cole Avenue, Apt. 4A		Transaction ID: 1838126		
City Walnut Creek State CA Zip Code 94596	Amount of Each Receipt this Period 25.00		Kathy Castor Earmark Contributions	
FEC ID number of contributing federal political committee. C				
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 0.00			

Full Name (Last, First, Middle Initial) C. Ms. Alice Darilek		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5		
Mailing Address 8 Gavilan Road		Transaction ID: 1837999		
City Santa Fe State NM Zip Code 87508	Amount of Each Receipt this Period 50.00		Kathy Castor Earmark Contributions	
FEC ID number of contributing federal political committee. C				
Name of Employer State of New Mexico Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Water Resource Specialis Aggregate Year-to-Date ▼ 0.00			

SUBTOTAL of Receipts This Page (optional) ▶	100.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1395 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Linda S. Boyd		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 9249 Northeast 14th Street		Transaction ID: 1846400
City State Zip Code Clyde Hill WA 98004	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Kathy Castor Earmark Contributions	
Name of Employer Occupation Homemaker	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dr. Leslie Lieberman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 2853 Aloma Oaks Drive		Transaction ID: 1837977
City State Zip Code Oviedo FL 32765	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Kathy Castor Earmark Contributions	
Name of Employer Occupation University of Florida Professor	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Carol J. Gionti		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 1349 N. McLean Blvd.		Transaction ID: 1838121
City State Zip Code Wichita KS 67203	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Kathy Castor Earmark Contributions	
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	100.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1396 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Dahlia Rudavsky

Mailing Address 17 Upland Road

City State Zip Code
Waban MA 02468

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

Name of Employer Occupation
Messing, Rudaš Weliky Lawyer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1846102

Amount of Each Receipt this Period
25.00

Kathy Castor Earmark Contributions

B. Full Name (Last, First, Middle Initial)
Dr. Carolyn R Swift

Mailing Address 50 Armstrong Avenue

City State Zip Code
Providence RI 02903

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1838011

Amount of Each Receipt this Period
21.50

Kathy Castor Earmark Contributions

C. Full Name (Last, First, Middle Initial)
Ms. Julie Martinez

Mailing Address 3211 Singinwood Drive

City State Zip Code
Torrance CA 90505

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

Name of Employer Occupation
Lucent Technologies Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1838091

Amount of Each Receipt this Period
40.00

Kathy Castor Earmark Contributions

SUBTOTAL of Receipts This Page (optional)	86.50
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1397 / 1975
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Martha R. Nelson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 11617 Carrollwood Drive		Transaction ID: 1846078	
City State Zip Code Tampa FL 33618	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Kathy Castor Earmark Contributions		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Linda MacCracken		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 7814 126th Avenue SE		Transaction ID: 1837998	
City State Zip Code Renton WA 98056	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Kathy Castor Earmark Contributions		
Name of Employer Occupation Housewife	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Dr. Cappy Longstreth		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 7410 NW 131st Street Rockin Farms		Transaction ID: 1838136	
City State Zip Code Gainesville FL 32653	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Kathy Castor Earmark Contributions		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1398 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Catherine Claman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 109 Glen Avenue		Transaction ID: 1844159
City State Zip Code Millburn NJ 07041	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Kathy Castor Earmark Contributions	
Name of Employer Occupation Greenwood Communications President	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Ms. Christine Levenduski		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 3429 N Druid Hills Road Apt. B		Transaction ID: 1846067
City State Zip Code Decatur GA 30033	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Kathy Castor Earmark Contributions	
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Ms. Joan Benedetti		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 2533 6th Street		Transaction ID: 1845421
City State Zip Code Santa Monica CA 90405	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Kathy Castor Earmark Contributions	
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	75.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1399 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Michael Boyle		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 2346 Roosevelt Circle		Transaction ID: 1846082	
City State Zip Code Santa Clara CA 95051	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C		Kathy Castor Earmark Contributions	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Mr. Charles Braubern		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 1413 Forrester Drive		Transaction ID: 1838005	
City State Zip Code Oregon OH 43616	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C		Kathy Castor Earmark Contributions	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Polly Longworth		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address PO Box 567		Transaction ID: 1838138	
City State Zip Code Athol MA 01331	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Kathy Castor Earmark Contributions	
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Writer Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	120.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1400 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Albert Podell

Mailing Address 110 Sullivan Street, Apt. 5G

City State Zip Code
New York NY 10012

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

Name of Employer Self Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1846064

Amount of Each Receipt this Period
10.00

Kathy Castor Earmark Contributions

B. Full Name (Last, First, Middle Initial)
Ms. Philip Itzkow

Mailing Address 119 Eileen Street

City State Zip Code
Albany NY 12203

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

Name of Employer Occupation Retried

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1844146

Amount of Each Receipt this Period
5.00

Kathy Castor Earmark Contributions

C. Full Name (Last, First, Middle Initial)
Ms. Paula McKay Mims

Mailing Address 1524 Easton Drive

City State Zip Code
Lakeland FL 33803

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

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1846090

Amount of Each Receipt this Period
50.00

Kathy Castor Earmark Contributions

SUBTOTAL of Receipts This Page (optional)	▶	65.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1401 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Elizabeth A. Jones

Mailing Address 12269 Harbor Town Circle

City State Zip Code
Fairfax VA 22033

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1838109

Amount of Each Receipt this Period
25.00

Kathy Castor Earmark Contributions

B. Full Name (Last, First, Middle Initial)
Ms. Shirley K. Boscov

Mailing Address PO Box 3725

City State Zip Code
Reading PA 19606

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

Name of Employer Occupation
Self Artist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1838095

Amount of Each Receipt this Period
25.00

Kathy Castor Earmark Contributions

C. Full Name (Last, First, Middle Initial)
Mr. Norborn M. Felton

Mailing Address 1440 Bent Drive

City State Zip Code
Campbell CA 95008

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1844138

Amount of Each Receipt this Period
100.00

Kathy Castor Earmark Contributions

SUBTOTAL of Receipts This Page (optional)	150.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1402 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Julia Reiskind		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 213 SW 41st Street		Transaction ID: 1846070
City State Zip Code Gainesville FL 32607	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Kathy Castor Earmark Contributions
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Ms. Marlaina Kreinin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 1431 Sherwood Avenue		Transaction ID: 1846328
City State Zip Code East Lansing MI 48823	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Kathy Castor Earmark Contributions
Name of Employer Occupation Professor	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Mr. Hollis Moore		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 277 Largo Drive		Transaction ID: 1845420
City State Zip Code Nashville TN 37211	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		Kathy Castor Earmark Contributions
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	120.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1403 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Nancy Little		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 1722 Makiki St Apt 102		Transaction ID: 1837990
City State Zip Code Honolulu HI 96822	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Kathy Castor Earmark Contributions	
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Doris Jasinski		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 2215 73rd Street E. Lot 15		Transaction ID: 1846396
City State Zip Code Palmetto FL 34221	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Kathy Castor Earmark Contributions	
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Carolyn S. Breaks		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 25303 Ludwell		Transaction ID: 1838129
City State Zip Code Chapel Hill NC 27517	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Kathy Castor Earmark Contributions	
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	70.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1404 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Judith L. Rosenberg		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 26 Pine Cedar Drive		Transaction ID: 1837980	
City State Zip Code Palm Coast FL 32164	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C		Kathy Castor Earmark Contributions	
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Janet E. Dolan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 82 Chestnut St.		Transaction ID: 1844183	
City State Zip Code Boston MA 02108	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Lois Murphy Earmark Contributions	
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Martha J. Dunn		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 1608 Kenzie Drive		Transaction ID: 1844161	
City State Zip Code Pittsburgh PA 15205	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Lois Murphy Earmark Contributions	
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	175.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1405 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Catherine Claman

Mailing Address 109 Glen Avenue

City State Zip Code
Millburn NJ 07041

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

Name of Employer Occupation
Greenwood Communications President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1844158

Amount of Each Receipt this Period
25.00

Lois Murphy Earmark Contributions

B. Full Name (Last, First, Middle Initial)
Ms. Shirley B. Young

Mailing Address 80 Village Drive

City State Zip Code
Stroudsburg PA 18360

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1845986

Amount of Each Receipt this Period
25.00

Lois Murphy Earmark Contributions

C. Full Name (Last, First, Middle Initial)
Mr. Hollis Moore

Mailing Address 277 Largo Drive

City State Zip Code
Nashville TN 37211

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1845419

Amount of Each Receipt this Period
40.00

Lois Murphy Earmark Contributions

SUBTOTAL of Receipts This Page (optional)	▶	90.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1406 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Wyman B. Fowler

Mailing Address 2107 Mallard Drive

City State Zip Code
Lancaster PA 17601

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

Name of Employer Occupation
Intermediate Unit # 13 Adult Education Instructor

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1845978

Amount of Each Receipt this Period
1000.00

Lois Murphy Earmark Contributions

B. Full Name (Last, First, Middle Initial)
Mr. Michael Boyle

Mailing Address 2346 Roosevelt Circle

City State Zip Code
Santa Clara CA 95051

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

Name of Employer Occupation
REQUESTED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1846083

Amount of Each Receipt this Period
10.00

Lois Murphy Earmark Contributions

C. Full Name (Last, First, Middle Initial)
Ms. Linda S. Boyd

Mailing Address 9249 Northeast 14th Street

City State Zip Code
Clyde Hill WA 98004

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

Name of Employer Occupation
Homemaker

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1846398

Amount of Each Receipt this Period
50.00

Lois Murphy Earmark Contributions

SUBTOTAL of Receipts This Page (optional)	▶	1060.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1407 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Christine Levenduski		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 3429 N Druid Hills Road Apt. B		Transaction ID: 1846066
City State Zip Code Decatur GA 30033	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Lois Murphy Earmark Contributions	
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Vera B. Williams		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 88 Jane Street		Transaction ID: 1838098
City State Zip Code New York NY 10014	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Lois Murphy Earmark Contributions	
Name of Employer Occupation Self Writer, Illustrator	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Sally Strunc		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 23 Thornley Drive		Transaction ID: 1845411
City State Zip Code Chatham NJ 07928	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Lois Murphy Earmark Contributions	
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	175.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1408 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Dahlia Rudavsky		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 17 Upland Road		Transaction ID: 1846103	
City State Zip Code Waban MA 02468	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C		Lois Murphy Earmark Contributions	
Name of Employer Occupation Messing, Rudaś Weliky Lawyer	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Mr. Charles Braubern		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 1413 Forrester Drive		Transaction ID: 1838004	
City State Zip Code Oregon OH 43616	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C		Lois Murphy Earmark Contributions	
Name of Employer Occupation REQUESTED		Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Mrs. Barbara Shuta		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 210 Cavalier Drive		Transaction ID: 1838008	
City State Zip Code Dickson City PA 18519	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Lois Murphy Earmark Contributions	
Name of Employer Occupation Scranton School District Teacher		Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	85.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1409 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Gwyn E. Dietrick		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 962 Poli Street		Transaction ID: 1846308	
City State Zip Code Ventura CA 93001	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Lois Murphy Earmark Contributions		
Name of Employer Occupation Homemaker	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) Mr. Albert Podell		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 110 Sullivan Street, Apt. 5G		Transaction ID: 1846065	
City State Zip Code New York NY 10012	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C	Lois Murphy Earmark Contributions		
Name of Employer Occupation Self Attorney	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) Ms. Nancy Little		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 1722 Makiki St Apt 102		Transaction ID: 1837985	
City State Zip Code Honolulu HI 96822	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Lois Murphy Earmark Contributions		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	85.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1410 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Carol J. Gionti

Mailing Address 1349 N. McLean Blvd.

City State Zip Code
Wichita KS 67203

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1838120

Amount of Each Receipt this Period
25.00

Lois Murphy Earmark Contributions

B. Full Name (Last, First, Middle Initial)
Ms. Lynda Cutts

Mailing Address 1754 N. Nicholas Street

City State Zip Code
Appleton WI 54914

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1845407

Amount of Each Receipt this Period
20.00

Lois Murphy Earmark Contributions

C. Full Name (Last, First, Middle Initial)
Ms. Carolyn S. Breaks

Mailing Address 25303 Ludwell

City State Zip Code
Chapel Hill NC 27517

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1838128

Amount of Each Receipt this Period
25.00

Lois Murphy Earmark Contributions

SUBTOTAL of Receipts This Page (optional)	▶	70.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1411 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Philip Itzkow		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 119 Eileen Street		Transaction ID: 1844148	
City Albany	State NY	Zip Code 12203	Amount of Each Receipt this Period 5.00
FEC ID number of contributing federal political committee. C		Lois Murphy Earmark Contributions	
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Ms. Polly Longworth		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address PO Box 567		Transaction ID: 1838137	
City Athol	State MA	Zip Code 01331	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Lois Murphy Earmark Contributions	
Name of Employer Self	Occupation Writer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Dr. Constance P. Dent		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 90 Smoketown Road		Transaction ID: 1844140	
City Mertztown	State PA	Zip Code 19539	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Lois Murphy Earmark Contributions	
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	205.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1412 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Tim Pemberton		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address PO Box 485		Transaction ID: 1846334
City State Zip Code Markleeville CA 96120	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Lois Murphy Earmark Contributions
Name of Employer Self Occupation Attorney	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Norborn M. Felton		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 1440 Bent Drive		Transaction ID: 1844118
City State Zip Code Campbell CA 95008	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Lois Murphy Earmark Contributions
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mrs. Pamela W. Neill		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 17 Cape May Pt.		Transaction ID: 1845985
City State Zip Code Greensboro NC 27455	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Lois Murphy Earmark Contributions
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	150.00
TOTAL This Period (last page this line number only)	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1413 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Maria Geiselhart

Mailing Address 137 Lakeshore Drive

City State Zip Code
Oakland NJ 07436

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1838131

Amount of Each Receipt this Period
25.00

Lois Murphy Earmark Contributions

B. Full Name (Last, First, Middle Initial)
Mr. Chester Wisley

Mailing Address PO Box 68

City State Zip Code
Forestville NY 14062

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1844169

Amount of Each Receipt this Period
10.00

Lois Murphy Earmark Contributions

C. Full Name (Last, First, Middle Initial)
Lakshmi Mizin

Mailing Address 120 Sirkler Pond Rd.

City State Zip Code
Jermyn PA 18433

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1838101

Amount of Each Receipt this Period
50.00

Lois Murphy Earmark Contributions

SUBTOTAL of Receipts This Page (optional)	▶	85.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1414 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Mary E. Hopkins		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 1 Towers Park Lane, Apt. 2016		Transaction ID: 1838144	
City State Zip Code San Antonio TX 78209	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Lois Murphy Earmark Contributions		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Dr. Carolyn R Swift		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 50 Armstrong Avenue		Transaction ID: 1838010	
City State Zip Code Providence RI 02903	Amount of Each Receipt this Period 21.50		
FEC ID number of contributing federal political committee. C	Lois Murphy Earmark Contributions		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Mr. Norborn M. Felton		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 1440 Bent Drive		Transaction ID: 1844120	
City State Zip Code Campbell CA 95008	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Lynn Woolsey Earmarked Contributions		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	371.50
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1415 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Elaine Keltner

Mailing Address 14977 Tacuba Drive

City State Zip Code
La Mirada CA 90638

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1845974

Amount of Each Receipt this Period
25.00

Lynn Woolsey Earmarked Contributions

B. Full Name (Last, First, Middle Initial)
Ms. Elizabeth A. Jones

Mailing Address 12269 Harbor Town Circle

City State Zip Code
Fairfax VA 22033

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1838111

Amount of Each Receipt this Period
25.00

Lynn Woolsey Earmarked Contributions

C. Full Name (Last, First, Middle Initial)
Ms. Rosalyne B. Reynolds

Mailing Address 1460 Arona Dr

City State Zip Code
Sparks NV 89434

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

Name of Employer Occupation
Way Staton, Inc. Nurse Practitioner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1838133

Amount of Each Receipt this Period
50.00

Lynn Woolsey Earmarked Contributions

SUBTOTAL of Receipts This Page (optional)	▶	100.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1416 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Sheila Lehrburger		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 7500 E. Dartmouth Avenue Apt. 22		Transaction ID: 1846079	
City State Zip Code Denver CO 80231	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Lynn Woolsey Earmarked Contributions		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) Mr. David L. Gill		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 7108 Larrlyn Drive		Transaction ID: 1838009	
City State Zip Code Springfield VA 22151	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Lynn Woolsey Earmarked Contributions		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) Mr. Tim Pemberton		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address PO Box 485		Transaction ID: 1846333	
City State Zip Code Markleeville CA 96120	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Lynn Woolsey Earmarked Contributions		
Name of Employer Occupation Self Attorney	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	100.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1417 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Alice Darilek		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 8 Gavilan Road		Transaction ID: 1838000
City State Zip Code Santa Fe NM 87508	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Lynn Woolsey Earmarked Contributions	
Name of Employer State of New Mexico Occupation Water Resource Spec	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mrs. Alice O. Wilkerson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 564 MacArthur Drive		Transaction ID: 1844173
City State Zip Code Daly City CA 94015	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Lynn Woolsey Earmarked Contributions	
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Hollis Moore		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 277 Largo Drive		Transaction ID: 1845418
City State Zip Code Nashville TN 37211	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C	Lynn Woolsey Earmarked Contributions	
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	115.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1418 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Linda S. Boyd		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 9249 Northeast 14th Street		Transaction ID: 1846399	
City State Zip Code Clyde Hill WA 98004	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Lynn Woolsey Earmarked Contributions		
Name of Employer Occupation Homemaker	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) Ms. Vera B. Williams		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 88 Jane Street		Transaction ID: 1838097	
City State Zip Code New York NY 10014	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Lynn Woolsey Earmarked Contributions		
Name of Employer Occupation Self Writer, Illustrator	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) Mrs. Alfred G. Zielske		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 2282 Via Espada		Transaction ID: 1838125	
City State Zip Code Pleasanton CA 94566	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Lynn Woolsey Earmarked Contributions		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1419 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Albert Podell		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 110 Sullivan Street, Apt. 5G		Transaction ID: 1846063
City State Zip Code New York NY 10012	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C	Lynn Woolsey Earmarked Contributions	
Name of Employer Self Occupation Attorney	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Charles Braubern		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 1413 Forrester Drive		Transaction ID: 1838007
City State Zip Code Oregon OH 43616	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C	Lynn Woolsey Earmarked Contributions	
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Wyman B. Fowler		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 2107 Mallard Drive		Transaction ID: 1845979
City State Zip Code Lancaster PA 17601	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Lynn Woolsey Earmarked Contributions	
Name of Employer Intermediate Unit # 13 Occupation Adult Education Instructor	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1020.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1420 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Michael Boyle		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 2346 Roosevelt Circle		Transaction ID: 1846085	
City State Zip Code Santa Clara CA 95051	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C	Lynn Woolsey Earmarked Contributions		
Name of Employer Occupation Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Carol J. Gionti		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 1349 N. McLean Blvd.		Transaction ID: 1838119	
City State Zip Code Wichita KS 67203	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Lynn Woolsey Earmarked Contributions		
Name of Employer Occupation Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Regina Scheiding		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 1806 Cole Avenue, Apt. 4A		Transaction ID: 1838127	
City State Zip Code Walnut Creek CA 94596	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Lynn Woolsey Earmarked Contributions		
Name of Employer Occupation Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	60.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1421 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Carolyn R Swift		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 50 Armstrong Avenue		Transaction ID: 1838012
City State Zip Code Providence RI 02903	Amount of Each Receipt this Period 21.50	
FEC ID number of contributing federal political committee. C	Lynn Woolsey Earmarked Contributions	
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Shirley K. Boscov		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address PO Box 3725		Transaction ID: 1838094
City State Zip Code Reading PA 19606	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Lynn Woolsey Earmarked Contributions	
Name of Employer Occupation Self Artist	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Nancy Little		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 1722 Makiki St Apt 102		Transaction ID: 1837989
City State Zip Code Honolulu HI 96822	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Lynn Woolsey Earmarked Contributions	
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	71.50
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1422 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Joan Benedetti		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 2533 6th Street		Transaction ID: 1845422	
City State Zip Code Santa Monica CA 90405	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Lynn Woolsey Earmarked Contributions		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Mr. Marion L. Buzzard		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 4076 Bernice Drive		Transaction ID: 1838106	
City State Zip Code San Diego CA 92107	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Lynn Woolsey Earmarked Contributions		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Philip Itzkow		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 119 Eileen Street		Transaction ID: 1844142	
City State Zip Code Albany NY 12203	Amount of Each Receipt this Period 5.00		
FEC ID number of contributing federal political committee. C	Lynn Woolsey Earmarked Contributions		
Name of Employer Occupation Retried	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	55.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1423 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Ruth Trubner		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 919 109th Avenue NE Apt. 1208		Transaction ID: 1845983
City Bellevue State WA Zip Code 98004	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Lynn Woolsey Earmarked Contributions	
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Arien Grabbe		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 3879 Lurline Drive		Transaction ID: 1844093
City Honolulu State HI Zip Code 96816	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Lynn Woolsey Earmarked Contributions	
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Dahlia Rudavsky		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 17 Upland Road		Transaction ID: 1846101
City Waban State MA Zip Code 02468	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Lynn Woolsey Earmarked Contributions	
Name of Employer Occupation Lawyer Messing, Rudaš Weliky	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1424 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Joanne Lonn Mailing Address 38312 83rd Avenue E. City Eatonville State WA Zip Code 98328 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1844171 Amount of Each Receipt this Period <table border="1"> <tr> <td>10.00</td> </tr> </table> Maria Cantwell Earmarked Contributions	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	4		2	0	0	5	10.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	4		2	0	0	5														
10.00																							
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

B. Full Name (Last, First, Middle Initial) Ms. Martha J. Dunn Mailing Address 1608 Kenzie Drive City Pittsburgh State PA Zip Code 15205 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1844160 Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table> Maria Cantwell Earmarked Contributions	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	4		2	0	0	5	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	4		2	0	0	5														
50.00																							
Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

C. Full Name (Last, First, Middle Initial) Ms. Martha R. Nelson Mailing Address 11617 Carrollwood Drive City Tampa State FL Zip Code 33618 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1846075 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Maria Cantwell Earmarked Contributions	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	5		2	0	0	5	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		2	5		2	0	0	5														
100.00																							
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

SUBTOTAL of Receipts This Page (optional)	▶	160.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1425 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Madeline Caton		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 5905D Clark Road, Apt. 174		Transaction ID: 1844156
City State Zip Code Paradise CA 95969	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Earmarked Contributions	
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Paula McKay Mims		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 1524 Easton Drive		Transaction ID: 1846089
City State Zip Code Lakeland FL 33803	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Earmarked Contributions	
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Mary Stieb-Hales		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 310 Foulkeways		Transaction ID: 1846097
City State Zip Code Gwynedd PA 19436	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Earmarked Contributions	
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	175.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1426 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Claiborne W. Dawes		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 29 Munroe Place		Transaction ID: 1845987	
City State Zip Code Concord MA 01742		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Earmarked Contributions	
Name of Employer Self Occupation Self Freelance Writer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Elaine Keltner		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 14977 Tacuba Drive		Transaction ID: 1845975	
City State Zip Code La Mirada CA 90638		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Earmarked Contributions	
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Mr. Hollis Moore		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 277 Largo Drive		Transaction ID: 1845416	
City State Zip Code Nashville TN 37211		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Earmarked Contributions	
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	175.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1427 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Rosalyne B. Reynolds

Mailing Address 1460 Arona Dr

City Sparks State NV Zip Code 89434

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

Name of Employer Way Staton, Inc. Occupation Nurse Practitioner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
10 / 05 / 2005

Transaction ID: 1838132

Amount of Each Receipt this Period
50.00

Maria Cantwell Earmarked Contributions

B. Full Name (Last, First, Middle Initial)
Ms. Harriet P. Williams

Mailing Address 2701 Pickett Road, Apt. 2007

City Durham State NC Zip Code 27705

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

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
10 / 14 / 2005

Transaction ID: 1844164

Amount of Each Receipt this Period
100.00

Maria Cantwell Earmarked Contributions

C. Full Name (Last, First, Middle Initial)
Mr. Albert Podell

Mailing Address 110 Sullivan Street, Apt. 5G

City New York State NY Zip Code 10012

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

Name of Employer Self Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
10 / 25 / 2005

Transaction ID: 1846060

Amount of Each Receipt this Period
20.00

Maria Cantwell Earmarked Contributions

SUBTOTAL of Receipts This Page (optional)	170.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1428 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Tim Pemberton		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address PO Box 485		Transaction ID: 1846331
City State Zip Code Markleeville CA 96120	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Earmarked Contributions	
Name of Employer Self Occupation Self Attorney	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Norborn M. Felton		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 1440 Bent Drive		Transaction ID: 1844095
City State Zip Code Campbell CA 95008	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Earmarked Contributions	
Name of Employer Self Occupation Self Retired	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Shirley K. Boscov		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address PO Box 3725		Transaction ID: 1838096
City State Zip Code Reading PA 19606	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Earmarked Contributions	
Name of Employer Self Occupation Self Artirist	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1429 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Kingsley R. Woodhead		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address PO Box 31222		Transaction ID: 1844166
City State Zip Code Seattle WA 98103	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Earmarked Contributions	
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Patricia Lidrich		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 12035 SW Sussex St		Transaction ID: 1845984
City State Zip Code Beaverton OR 97008	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Earmarked Contributions	
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Joan K. Jones		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 1035 May Court		Transaction ID: 1845423
City State Zip Code Santa Barbara CA 93111	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Earmarked Contributions	
Name of Employer Occupation ISERA Group Inc. Adm. Coordinator	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	125.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1430 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Lakshmi Mizin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 120 Sirkler Pond Rd.		Transaction ID: 1838100
City State Zip Code Jermyn PA 18433	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Earmarked Contributions	
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Ms. Linda S. Boyd		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 9249 Northeast 14th Street		Transaction ID: 1846397
City State Zip Code Clyde Hill WA 98004	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Earmarked Contributions	
Name of Employer Occupation Homemaker	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Ms. Ruth Trubner		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 919 109th Avenue NE Apt. 1208		Transaction ID: 1845980
City State Zip Code Bellevue WA 98004	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Earmarked Contributions	
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1431 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sally Strunc		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 23 Thornley Drive		Transaction ID: 1845410
City State Zip Code Chatham NJ 07928	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Earmarked Contributions	
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Beth Bentley		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 8762 25th Place NE		Transaction ID: 1846327
City State Zip Code Seattle WA 98115	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Earmarked Contributions	
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Elysha Luken		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 820 Clark Road		Transaction ID: 1844078
City State Zip Code Monticello FL 32344	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Earmarked Contributions	
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1432 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sylvia Keating		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 14250 Woodcreek Road		Transaction ID: 1837978
City State Zip Code Poway CA 92064	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Earmarked Contributions	
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Janet E. Dolan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 82 Chestnut St.		Transaction ID: 1844179
City State Zip Code Boston MA 02108	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Earmarked Contributions	
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Julia Reiskind		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 213 SW 41st Street		Transaction ID: 1846069
City State Zip Code Gainesville FL 32607	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Earmarked Contributions	
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	160.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1433 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Nancy Swartwout

Mailing Address 350 Granby Road

City State Zip Code
South Hadley MA 01075

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1844091

Amount of Each Receipt this Period
25.00

Maria Cantwell Earmarked Contributions

B. Full Name (Last, First, Middle Initial)
Ms. Linda MacCracken

Mailing Address 7814 126th Avenue SE

City State Zip Code
Renton WA 98056

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

Name of Employer Occupation
Housewife

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837994

Amount of Each Receipt this Period
250.00

Maria Cantwell Earmarked Contributions

C. Full Name (Last, First, Middle Initial)
Ms. Sylvia Johnson

Mailing Address 2111 Davis Drive

City State Zip Code
Burlingame CA 94010

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

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1844151

Amount of Each Receipt this Period
100.00

Maria Cantwell Earmarked Contributions

SUBTOTAL of Receipts This Page (optional)	375.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1434 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Devora Karp		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 7579 NW 79th Avenue Apt. 203		Transaction ID: 1846394	
City State Zip Code Tamarac FL 33321	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Maria Cantwell Earmarked Contributions	
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Sheila Lehrburger		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 7500 E. Dartmouth Avenue Apt. 22		Transaction ID: 1846080	
City State Zip Code Denver CO 80231	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C		Maria Cantwell Earmarked Contributions	
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Jaqueline Evangelista		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 7105 Bridlewood Drive		Transaction ID: 1838102	
City State Zip Code Painesville OH 44077	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Maria Cantwell Earmarked Contributions	
Name of Employer Occupation Freelance Writer	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	175.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1435 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Lois Tarter		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 210 E. 39th Street		Transaction ID: 1844162	
City State Zip Code New York NY 10016	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Earmarked Contributions		
Name of Employer Occupation Lakeside Group Manager	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Laurel Garver		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 10866 Wilsher Blvd. 10th Floor		Transaction ID: 1845415	
City State Zip Code Los Angeles CA 90024	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Earmarked Contributions		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Philip Itzkow		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 119 Eileen Street		Transaction ID: 1844149	
City State Zip Code Albany NY 12203	Amount of Each Receipt this Period 5.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Earmarked Contributions		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	355.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1436 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Astrida R. B. Onat		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 2001 E. Lynn Street		Transaction ID: 1838090
City State Zip Code Seattle WA 98112	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Earmarked Contributions	
Name of Employer Occupation BOAS Inc. Archeologist	Aggregate Year-to-Date 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Mrs. Earl Hamlin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 5818 Ivanhoe Road		Transaction ID: 1846088
City State Zip Code Oakland CA 94618	Amount of Each Receipt this Period 125.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Earmarked Contributions	
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. Ms. Maria Geiselhart		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 137 Lakeshore Drive		Transaction ID: 1838130
City State Zip Code Oakland NJ 07436	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Earmarked Contributions	
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1437 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Jenny Gumpertz Mailing Address PO Box 1081 City State Zip Code Palm Desert CA 92261 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1844081 Amount of Each Receipt this Period <table border="1"> <tr> <td>10.00</td> </tr> </table> Maria Cantwell Earmarked Contributions	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	4		2	0	0	5	10.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	4		2	0	0	5														
10.00																							
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

B. Full Name (Last, First, Middle Initial) Ms. Edwyna McAninch Mailing Address 1820 NW Edgehill Street City State Zip Code Camas WA 98607 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1846096 Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table> Maria Cantwell Earmarked Contributions	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	5		2	0	0	5	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		2	5		2	0	0	5														
50.00																							
Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

C. Full Name (Last, First, Middle Initial) Ms. Enid Gottesman Mailing Address 530 Ocean Blvd. City State Zip Code Golden Beach FL 33160 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1846391 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Maria Cantwell Earmarked Contributions	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	5	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		3	1		2	0	0	5														
100.00																							
Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

SUBTOTAL of Receipts This Page (optional)	▶	160.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1438 / 1975
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Michael Boyle

Mailing Address 2346 Roosevelt Circle

City State Zip Code
Santa Clara CA 95051

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1846081

Amount of Each Receipt this Period
20.00

Maria Cantwell Earmarked Contributions

B. Full Name (Last, First, Middle Initial)
Ms. Linda Agerter

Mailing Address 51 Parkside Drive

City State Zip Code
Berkeley CA 94705

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

Name of Employer Occupation
Self Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1838092

Amount of Each Receipt this Period
200.00

Maria Cantwell Earmarked Contributions

C. Full Name (Last, First, Middle Initial)
Ms. Lynda Cutts

Mailing Address 1754 N. Nicholas Street

City State Zip Code
Appleton WI 54914

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1845408

Amount of Each Receipt this Period
20.00

Maria Cantwell Earmarked Contributions

SUBTOTAL of Receipts This Page (optional)	▶	240.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1439 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Carolyn R Swift		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 50 Armstrong Avenue		Transaction ID: 1838013
City State Zip Code Providence RI 02903	Amount of Each Receipt this Period 21.50	
FEC ID number of contributing federal political committee. C	Maria Cantwell Earmarked Contributions	
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Carol J. Gionti		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 1349 N. McLean Blvd.		Transaction ID: 1838214
City State Zip Code Wichita KS 67203	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Earmarked Contributions	
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Nancy Little		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 1722 Makiki St Apt 102		Transaction ID: 1837981
City State Zip Code Honolulu HI 96822	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Earmarked Contributions	
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	71.50
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1440 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Patricia Clark		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 4915 Whitfield Road		Transaction ID: 1844154
City State Zip Code Durham NC 27707	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Earmarked Contributions	
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mrs. Chitra Adarkar		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 428 S. Prospect Avenue		Transaction ID: 1846086
City State Zip Code Manhattan Beach CA 90266	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Earmarked Contributions	
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Marion L. Buzzard		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 4076 Bernice Drive		Transaction ID: 1838105
City State Zip Code San Diego CA 92107	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Earmarked Contributions	
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	100.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1441 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Polly Longworth

Mailing Address PO Box 567

City Athol State MA Zip Code 01331

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

Name of Employer Self Occupation Writer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1838139

Amount of Each Receipt this Period
100.00

Maria Cantwell Earmarked Contributions

B. Full Name (Last, First, Middle Initial)
Ms. Jennifer Percy

Mailing Address 4 Chase Street # 2

City Salem State MA Zip Code 01970

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

Name of Employer Cornell Orthotics & Prosthetics Occupation Orthotic Technician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1838134

Amount of Each Receipt this Period
25.00

Maria Cantwell Earmarked Contributions

C. Full Name (Last, First, Middle Initial)
Ms. Dahlia Rudavsky

Mailing Address 17 Upland Road

City Waban State MA Zip Code 02468

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

Name of Employer Messing, Rudaš Weliky Occupation Lawyer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1846099

Amount of Each Receipt this Period
25.00

Maria Cantwell Earmarked Contributions

SUBTOTAL of Receipts This Page (optional)	▶	150.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1442 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Connie L. Cooper		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 38617 N. 25th Lane		Transaction ID: 1845413
City State Zip Code Desert Hills AZ 85086	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Earmarked Contributions	
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Christina Keppel		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 5236 W Parkview Drive		Transaction ID: 1838122
City State Zip Code Mequon WI 53092	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Earmarked Contributions	
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Chester Wisley		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address PO Box 68		Transaction ID: 1844170
City State Zip Code Forestville NY 14062	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Earmarked Contributions	
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	85.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1443 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. David M. Hayden		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address PO Box 478		Transaction ID: 1838146
City State Zip Code Crosswicks NJ 08515	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Earmarked Contributions
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Ms. Gwyn E. Dietrick		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 962 Poli Street		Transaction ID: 1846305
City State Zip Code Ventura CA 93001	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Earmarked Contributions
Name of Employer Occupation Homemaker	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Ms. Pamela Benson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 5359 Nevada Avenue NW		Transaction ID: 1844079
City State Zip Code Washington DC 20015	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Earmarked Contributions
Name of Employer Occupation Teacher	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	350.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1444 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Jo Anne J. Trow		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 1835 N.W. Juniper Place		Transaction ID: 1846309	
City State Zip Code Corvallis OR 97330		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Earmarked Contributions	
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Dr. Emmanuel Farber		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 3600 Chateau Drive, # E105		Transaction ID: 1846616	
City State Zip Code Columbia SC 29204		Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		Melissa Bean Earmarked Co-ntributions	
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Melody Johnston		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 359 Buck Ave		Transaction ID: 1846610	
City State Zip Code Vacaville CA 95688		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Melissa Bean Earmarked Co-ntributions	
Name of Employer Occupation Merced River Sch. Dist. Resource Specialist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	305.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1445 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Ruth O. Meyers		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 12542 -7 Gwen Drive		Transaction ID: 1846571
City State Zip Code Burlington WA 98233	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Melissa Bean Earmarked Contributions
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Dr. Judith C. Simon		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 12271 Windsor Court		Transaction ID: 1846093
City State Zip Code Los Altos Hills CA 94022	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Melissa Bean Earmarked Contributions
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Psychologist Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Ruth Wallick		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 3112 Gracefield Road T #20		Transaction ID: 1846565
City State Zip Code Silver Spring MD 20904	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Melissa Bean Earmarked Contributions
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	100.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1446 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Ellen Nesheim		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 3008 Tennyson Street NW		Transaction ID: 1846612	
City State Zip Code Washington DC 20015	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Melissa Bean Earmarked Contributions		
Name of Employer Occupation FDA Chemist	Aggregate Year-to-Date 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Claiborne W. Dawes		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 29 Munroe Place		Transaction ID: 1845988	
City State Zip Code Concord MA 01742	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Melissa Bean Earmarked Contributions		
Name of Employer Occupation Self Freelance Writer	Aggregate Year-to-Date 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Mr. Hollis Moore		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 277 Largo Drive		Transaction ID: 1845417	
City State Zip Code Nashville TN 37211	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Melissa Bean Earmarked Contributions		
Name of Employer Occupation Retired	Aggregate Year-to-Date 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	125.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1447 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Natalie Wills

Mailing Address 2674 Sheridan Road

City State Zip Code
Evanston IL 60201

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

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1846568

Amount of Each Receipt this Period
50.00

Melissa Bean Earmarked Contributions

B. Full Name (Last, First, Middle Initial)
Ms. Mary E. Lerza

Mailing Address 2600 Overland Avenue #101

City State Zip Code
Los Angeles CA 90064

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1846584

Amount of Each Receipt this Period
100.00

Melissa Bean Earmarked Contributions

C. Full Name (Last, First, Middle Initial)
Ms. Elizabeth A. Roseberry

Mailing Address 1446 Eagle Pass Drive

City State Zip Code
Marion OH 43302

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

Name of Employer Occupation
Central OH Newborn Med. Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1846578

Amount of Each Receipt this Period
50.00

Melissa Bean Earmarked Contributions

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1448 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Hinda Elwyn Mailing Address PO Box 50814 City State Zip Code Sarasota FL 34232 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1846588 Amount of Each Receipt this Period <table border="1"> <tr> <td>25.00</td> </tr> </table> Melissa Bean Earmarked Contributions	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	5	25.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		3	1		2	0	0	5														
25.00																							
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

B. Full Name (Last, First, Middle Initial) Mr. Tim Pemberton Mailing Address PO Box 485 City State Zip Code Markleeville CA 96120 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1846332 Amount of Each Receipt this Period <table border="1"> <tr> <td>25.00</td> </tr> </table> Melissa Bean Earmarked Contributions	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	5	25.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		3	1		2	0	0	5														
25.00																							
Name of Employer Occupation Self Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

C. Full Name (Last, First, Middle Initial) Mr. Norborn M. Felton Mailing Address 1440 Bent Drive City State Zip Code Campbell CA 95008 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1844139 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Melissa Bean Earmarked Contributions	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	4		2	0	0	5	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	4		2	0	0	5														
100.00																							
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

SUBTOTAL of Receipts This Page (optional)	▶	<table border="1"><tr><td>150.00</td></tr></table>	150.00
150.00			
TOTAL This Period (last page this line number only)	▶	<table border="1"><tr><td></td></tr></table>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1449 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Shirley K. Boscov

Mailing Address PO Box 3725

City State Zip Code
Reading PA 19606

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

Name of Employer Self Occupation Artirst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1838093

Amount of Each Receipt this Period
25.00

Melissa Bean Earmarked Contributions

B. Full Name (Last, First, Middle Initial)
Ms. Lois Self

Mailing Address 252 Charles Street

City State Zip Code
Sycamore IL 60178

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

Name of Employer Northern IL Univ. Occupation Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1844167

Amount of Each Receipt this Period
50.00

Melissa Bean Earmarked Contributions

C. Full Name (Last, First, Middle Initial)
Ms. Jeannine Hamilton

Mailing Address 98 Smoke Tree Avenue

City State Zip Code
Oak Park CA 91377

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

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1846586

Amount of Each Receipt this Period
10.00

Melissa Bean Earmarked Contributions

SUBTOTAL of Receipts This Page (optional)	▶	85.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1450 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Eleanor N. Kelly		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 97 Road 3665		Transaction ID: 1846594	
City Aztec	State NM	Amount of Each Receipt this Period 25.00	
Zip Code 87410		Melissa Bean Earmarked Co-ntributions	
FEC ID number of contributing federal political committee. C			
Name of Employer Farmington Schools	Occupation Nurse		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Mr. Michael Boyle		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 2346 Roosevelt Circle		Transaction ID: 1846084	
City Santa Clara	State CA	Amount of Each Receipt this Period 10.00	
Zip Code 95051		Melissa Bean Earmarked Co-ntributions	
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Arlene Tyszkiewicz		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 9536 Lacrosse Avenue		Transaction ID: 1846641	
City Oak Lawn	State IL	Amount of Each Receipt this Period 50.00	
Zip Code 60453		Melissa Bean Earmarked Co-ntributions	
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	85.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1451 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Linda S. Boyd

Mailing Address 9249 Northeast 14th Street

City State Zip Code
Clyde Hill WA 98004

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

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1846401

Amount of Each Receipt this Period
50.00

Melissa Bean Earmarked Contributions

B. Full Name (Last, First, Middle Initial)
Mr. Albert Podell

Mailing Address 110 Sullivan Street, Apt. 5G

City State Zip Code
New York NY 10012

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

Name of Employer Occupation
Self Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1846062

Amount of Each Receipt this Period
10.00

Melissa Bean Earmarked Contributions

C. Full Name (Last, First, Middle Initial)
Ms. Margaret Walters

Mailing Address 2340 W Seltice Way Apt 244A

City State Zip Code
Coeur D Alene ID 83814

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1846395

Amount of Each Receipt this Period
50.00

Melissa Bean Earmarked Contributions

SUBTOTAL of Receipts This Page (optional)	▶	110.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1452 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Janet A. Gosnell

Mailing Address 143 Longwood Ave

City State Zip Code
Brookline MA 02446

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

Name of Employer Occupation
New Eng. Deacons Hosp. RN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1846623

Amount of Each Receipt this Period
100.00

Melissa Bean Earmarked Contributions

B. Full Name (Last, First, Middle Initial)
Dr. James G. Vatcher

Mailing Address 872 Cedarwood Street

City State Zip Code
Orange CA 92869

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1846599

Amount of Each Receipt this Period
50.00

Melissa Bean Earmarked Contributions

C. Full Name (Last, First, Middle Initial)
Ms. Janet E. Dolan

Mailing Address 82 Chestnut St.

City State Zip Code
Boston MA 02108

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1844186

Amount of Each Receipt this Period
100.00

Melissa Bean Earmarked Contributions

SUBTOTAL of Receipts This Page (optional)	▶	250.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1453 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Eve Reaven

Mailing Address 818 Tolman Drive

City State Zip Code
Stanford CA 94305

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

Name of Employer Occupation
VA Med. Ctr. Biologist

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1846573

Amount of Each Receipt this Period
50.00

Melissa Bean Earmarked Co-ntributions

B. Full Name (Last, First, Middle Initial)
Mr. Charles Braubern

Mailing Address 1413 Forrester Drive

City State Zip Code
Oregon OH 43616

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

Name of Employer Occupation
REQUESTED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1838006

Amount of Each Receipt this Period
10.00

Melissa Bean Earmarked Co-ntributions

C. Full Name (Last, First, Middle Initial)
Mrs. Alice S. Wohl

Mailing Address 12 Long Pond Road

City State Zip Code
Housatonic MA 01236

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

Name of Employer Occupation
Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1846605

Amount of Each Receipt this Period
50.00

Melissa Bean Earmarked Co-ntributions

SUBTOTAL of Receipts This Page (optional)	110.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1454 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Elizabeth Krucker		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 2111 East Adams Street		Transaction ID: 1846569
City State Zip Code Tucson AZ 85719	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Earmarked Contributions	
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Wyman B. Fowler		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 2107 Mallard Drive		Transaction ID: 1845976
City State Zip Code Lancaster PA 17601	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Earmarked Contributions	
Name of Employer Occupation Intermediate Unit # 13 Adult Education Instructor	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Philip Itzkow		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 119 Eileen Street		Transaction ID: 1844147
City State Zip Code Albany NY 12203	Amount of Each Receipt this Period 5.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Earmarked Contributions	
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1055.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1455 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Jaqueline Evangelista		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 7105 Bridlewood Drive		Transaction ID: 1838104
City Painesville State OH Zip Code 44077	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Earmarked Contributions	
Name of Employer Self Occupation Freelance Writer	Aggregate Year-to-Date 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Mrs. Nina D. Gray		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 672 Maple Street		Transaction ID: 1846326
City Winnetka State IL Zip Code 60093	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Earmarked Contributions	
Name of Employer Occupation Volunteer	Aggregate Year-to-Date 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. Mr. Edward A. Caress		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 6538 Bay Tree Ct		Transaction ID: 1838108
City Falls Church State VA Zip Code 22041	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Earmarked Contributions	
Name of Employer George Washington University Occupation Professor	Aggregate Year-to-Date 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional)	300.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1456 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Enez Hart		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 6060 51st Street S		Transaction ID: 1846567
City State Zip Code Saint Petersburg FL 33715	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Earmarked Contributions	
Name of Employer Occupation Retired	Aggregate Year-to-Date 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

B. Full Name (Last, First, Middle Initial) Mrs. Deloris J. Pourchot		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 606 Floyd Street		Transaction ID: 1846576
City State Zip Code Blacksburg VA 24060	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Earmarked Contributions	
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

C. Full Name (Last, First, Middle Initial) Mrs. Jeanne Orlikoff		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 1371 E. Park Place		Transaction ID: 1846580
City State Zip Code Chicago IL 60637	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Earmarked Contributions	
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional)	150.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1457 / 1975
<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Alexandra Dawson Mailing Address 2 West Street City Hadley State MA Zip Code 01035 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1846628 Amount of Each Receipt this Period <table border="1"> <tr> <td>35.00</td> </tr> </table> Melissa Bean Earmarked Contributions	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	5	35.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		3	1		2	0	0	5														
35.00																							
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

B. Full Name (Last, First, Middle Initial) Ms. Jean Bogiages Mailing Address 550 Utah Street City San Francisco State CA Zip Code 94110 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1846625 Amount of Each Receipt this Period <table border="1"> <tr> <td>75.00</td> </tr> </table> Melissa Bean Earmarked Contributions	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	5	75.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		3	1		2	0	0	5														
75.00																							
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

C. Full Name (Last, First, Middle Initial) Mrs. Eleanor A. Lane Mailing Address 5300 Zebulon Rd Unit 49 City Macon State GA Zip Code 31210 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1846600 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Melissa Bean Earmarked Contributions	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	5	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		3	1		2	0	0	5														
100.00																							
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

SUBTOTAL of Receipts This Page (optional)	210.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1458 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Pamela Brennan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 525 Ashbury Street		Transaction ID: 1846458
City State Zip Code San Francisco CA 94117	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Earmarked Contributions	
Name of Employer Self Occupation Self B&B Proprietor	Aggregate Year-to-Date 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Ann J. Remers		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 5022 E. Calle Guebabi		Transaction ID: 1846563
City State Zip Code Tuscon AZ 85718	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Earmarked Contributions	
Name of Employer Self Occupation Self Attorney	Aggregate Year-to-Date 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. Carolyn R Swift		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 50 Armstrong Avenue		Transaction ID: 1838015
City State Zip Code Providence RI 02903	Amount of Each Receipt this Period 21.50	
FEC ID number of contributing federal political committee. C	Melissa Bean Earmarked Contributions	
Name of Employer Occupation Retired	Aggregate Year-to-Date 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	131.50
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1459 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Carol J. Gionti		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 1349 N. McLean Blvd.		Transaction ID: 1838118
City State Zip Code Wichita KS 67203	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Earmarked Contributions	
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Ms. Nancy Little		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 1722 Makiki St Apt 102		Transaction ID: 1837987
City State Zip Code Honolulu HI 96822	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Earmarked Contributions	
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Ms. Marilyn Nichols		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 4931 Long Meadow Drive		Transaction ID: 1846587
City State Zip Code Leesburg FL 34748	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Earmarked Contributions	
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1460 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mrs. Peggy Simonsen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 488 W. Center Road		Transaction ID: 1846072	
City Palatine State IL Zip Code 60074	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Melissa Bean Earmarked Contributions		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) Ms. Dennie R. Kelley		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 4720 Santala Drive		Transaction ID: 1846593	
City Knoxville State TN Zip Code 37909	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Melissa Bean Earmarked Contributions		
Name of Employer REQUESTED Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) Ms. Margaret Ensminger		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 414 Ginn Lane		Transaction ID: 1846436	
City Pasadena State MD Zip Code 21122	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Melissa Bean Earmarked Contributions		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1461 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Eveline V. Harris

Mailing Address 4055 N. Recker Rd.
80

City State Zip Code
Mesa AZ 85215

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

Name of Employer Occupation
Occupation REQUESTED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1846613

Amount of Each Receipt this Period
100.00

Melissa Bean Earmarked Contributions

B. Full Name (Last, First, Middle Initial)
Ms. Janet S. Ellis

Mailing Address 401 Regents Park Lane

City State Zip Code
Noblesville IN 46062

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

Name of Employer Occupation
Self Attorney

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1846392

Amount of Each Receipt this Period
10.00

Melissa Bean Earmarked Contributions

C. Full Name (Last, First, Middle Initial)
Ms. Dahlia Rudavsky

Mailing Address 17 Upland Road

City State Zip Code
Waban MA 02468

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

Name of Employer Occupation
Messing, Rudaš Weliky Lawyer

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1846100

Amount of Each Receipt this Period
25.00

Melissa Bean Earmarked Contributions

SUBTOTAL of Receipts This Page (optional)	▶	135.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1462 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Otis T. Gray		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 392 Cecilia Drive		Transaction ID: 1838143	
City Memphis	State TN	Zip Code 38117	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C		Melissa Bean Earmarked Contributions	
Name of Employer Self	Occupation Small Business		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Dr. Barbara Kaufman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 3863 Lander Road, # 1		Transaction ID: 1846591	
City Chagrin Falls	State OH	Zip Code 44022	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Melissa Bean Earmarked Contributions	
Name of Employer Self	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Cynthia Swinson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 1260 Lawrence Ave		Transaction ID: 1845412	
City Lake Forest	State IL	Zip Code 60045	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Melissa Bean Earmarked Contributions	
Name of Employer Self	Occupation Jewelry Design		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	325.00
TOTAL This Period (last page this line number only) ▶	0.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1463 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Hope Newell Daly

Mailing Address 11667 Gorham Avenue #206

City Los Angeles	State CA	Zip Code 90049
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation Retired
------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	5

Transaction ID: 1846561

Amount of Each Receipt this Period

25.00

Melissa Bean Earmarked Contributions

B. Full Name (Last, First, Middle Initial)
Ms. Margaret M. Stewart

Mailing Address 11 Beaver Dam Road

City Voorheesville	State NY	Zip Code 12186
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation Retired
------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	5

Transaction ID: 1846590

Amount of Each Receipt this Period

100.00

Melissa Bean Earmarked Contributions

C. Full Name (Last, First, Middle Initial)
Ms. Evamaria Hawkins

Mailing Address 10450 Lottsford Road
Apt. 5007

City Mitchellville	State MD	Zip Code 20721
------------------------------	--------------------	--------------------------

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

Name of Employer	Occupation REQUESTED
------------------	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	5

Transaction ID: 1846562

Amount of Each Receipt this Period

200.00

Melissa Bean Earmarked Contributions

SUBTOTAL of Receipts This Page (optional)	325.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1464 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Eleanor Johnson

Mailing Address 101 Brooksby Village Dr
Unit 407

City Peabody State MA Zip Code 01960

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1845409

Amount of Each Receipt this Period
100.00

Melissa Bean Earmarked Contributions

B. Full Name (Last, First, Middle Initial)
Mr. Andrew Carson

Mailing Address PO Box 709

City Wilson State WY Zip Code 83014

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

Name of Employer Cony Corp Occupation mtn guide

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1835646

Amount of Each Receipt this Period
25.00

Allyson Schwartz Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mrs. Joyce Waters

Mailing Address 4046 Tenango Road

City Claremont State CA Zip Code 91711

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845895

Amount of Each Receipt this Period
100.00

Allyson Schwartz Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	100.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1465 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Mary E. Dimperio

Mailing Address 4000 Cathedral Avenue NW
Apt. 106B

City Washington State DC Zip Code 20016

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841694

Amount of Each Receipt this Period
100.00

Allyson Schwartz Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Alicia Granor

Mailing Address 1600 Hagys Ford Road, # 6F

City Narberth State PA Zip Code 19072

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

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 5

Transaction ID: 1843030

Amount of Each Receipt this Period
100.00

Allyson Schwartz Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Rhoda Weinstein

Mailing Address 8060 E. Girard Avenue Apt. 709

City Denver State CO Zip Code 80231

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845858

Amount of Each Receipt this Period
50.00

Allyson Schwartz Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1466 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Ruth M. Holland		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 24 Peacock Court		Transaction ID: 1840835	
City State Zip Code San Rafael CA 94901	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		Allyson Schwartz Contributions	
Name of Employer Occupation Conrad Imports, Inc. President	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Ms. Valerie Block		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 50 Glenwood Rd		Transaction ID: 1845926	
City State Zip Code Montclair NJ 07043	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		Allyson Schwartz Contributions	
Name of Employer Occupation Self-Employed Writer	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Mr. Matthew Morris		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address PO Box 9157		Transaction ID: 1844760	
City State Zip Code Aspen CO 81612	Amount of Each Receipt this Period 5.00		
FEC ID number of contributing federal political committee. C		Allyson Schwartz Contributions	
Name of Employer Occupation FRD Project Inc Butler/Chef	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1467 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Debra Metcalf

Mailing Address 376 Farmhouse Ln

City State Zip Code
Wind Gap PA 18091

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

Name of Employer Self Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1840931

Amount of Each Receipt this Period
25.00

Allyson Schwartz Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Pamela K. Sutherland

Mailing Address 2747 E. Third Street

City State Zip Code
Tucson AZ 85716

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

Name of Employer Arizona List/self Occupation Executive Director/lawyer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842483

Amount of Each Receipt this Period
250.00

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Jacqueline Spindler

Mailing Address 1213 Q Street, NW

City State Zip Code
Washington DC 20009

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

Name of Employer FCC Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836877

Amount of Each Receipt this Period
50.00

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1468 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Diane McCarthy		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 2831 Catalpa Circle		Transaction ID: 1843056	
City State Zip Code Ann Arbor MI 48108	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Debbie Stabenow Contributions		
Name of Employer Diane McCarthy	Occupation career and relationship coach		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

Full Name (Last, First, Middle Initial) B. Ms. Patricia G. Hoffman		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address 202 Main Street		Transaction ID: 1844817	
City State Zip Code New Ipswich NH 03071	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Debbie Stabenow Contributions		
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

Full Name (Last, First, Middle Initial) C. Ms. Ruth M. Holland		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 24 Peacock Court		Transaction ID: 1840836	
City State Zip Code San Rafael CA 94901	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Debbie Stabenow Contributions		
Name of Employer Conrad Imports, Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1469 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Barbara Berney		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 624 E 20th St Apt 1D		Transaction ID: 1837196	
City State Zip Code New York NY 10009	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C		Debbie Stabenow Contributions	
Name of Employer Environmental League of MA	Occupation Administrator	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Mr. Terrence N. Tice		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5	
Mailing Address 2488 S Columbine St		Transaction ID: 1836330	
City State Zip Code Denver CO 80210	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Debbie Stabenow Contributions	
Name of Employer University Of Michigan	Occupation Professor	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Carol Kuller		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 137 Great Barrington Road		Transaction ID: 1842476	
City State Zip Code West Stockbridge MA 01266	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Debbie Stabenow Contributions	
Name of Employer Retired	Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1470 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Suzanne M Sherman

Mailing Address 3368 E Cook Road

City State Zip Code
Grand Blanc MI 48439

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

Name of Employer Local 659, UAW Occupation Support Staff

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836871

Amount of Each Receipt this Period
250.00

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. Andrew Carson

Mailing Address PO Box 709

City State Zip Code
Wilson WY 83014

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

Name of Employer Cony Corp Occupation mtn guide

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1835648

Amount of Each Receipt this Period
25.00

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

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

Mailing Address 2315 Salem Village Road Apt. F

City State Zip Code
Parkville MD 21234

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

Name of Employer Self-Employed Occupation Psychologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1835607

Amount of Each Receipt this Period
20.00

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 1471 / 1975
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Marilyn W. Reed

Mailing Address 22501 130th Street

City State Zip Code
Danville IA 52623

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Retired

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837215

Amount of Each Receipt this Period
25.00

Debbie Stabenow Contribu-
tions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Dr. Gustav Papanek

Mailing Address 2 Mason Street

City State Zip Code
Lexington MA 02421

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
BIDE Economist

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842098

Amount of Each Receipt this Period
200.00

Debbie Stabenow Contribu-
tions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Adalyn S. Brugger

Mailing Address 1973 Retreat Drive

City State Zip Code
Mechanicsville VA 23111

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Law Offices of Robert Par-
kerson lawyer

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838233

Amount of Each Receipt this Period
100.00

Debbie Stabenow Contribu-
tions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) 0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1472 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. M. Catherine Lannon

Mailing Address 6728 Layton Court

City State Zip Code
Tallahassee FL 32317

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

Name of Employer Occupation
FL Atty General Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836832

Amount of Each Receipt this Period
100.00

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Edith Biondi

Mailing Address 520 Haworth Avenue

City State Zip Code
Haworth NJ 07641

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1840974

Amount of Each Receipt this Period
100.00

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Marjorie Dearmont

Mailing Address 101 Oak Crest Drive

City State Zip Code
Bertram TX 78605

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

Name of Employer Occupation
Self trainer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837316

Amount of Each Receipt this Period
25.00

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1473 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Dr. Claire S. Colman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 5	
Mailing Address 2725 Endsleigh Drive		Transaction ID: 1843040	
City Bloomfield	State MI	Zip Code 48301	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C		Debbie Stabenow Contributions	
Name of Employer Self	Occupation Physician	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Alice G. Armstrong		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5	
Mailing Address 1002 140th Street E		Transaction ID: 1838241	
City Tacoma	State WA	Zip Code 98445	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Debbie Stabenow Contributions	
Name of Employer	Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Mrs. Carol Schuck Oksala		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 5 Perth Place		Transaction ID: 1840809	
City Glenmoore	State PA	Zip Code 19343	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Debbie Stabenow Contributions	
Name of Employer St. Matthew's Preschool	Occupation Teacher	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1474 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Virginia L. King		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 1281 Bel Air Drive		Transaction ID: 1840933	
City State Zip Code Santa Barbara CA 93105	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Debbie Stabenow Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Mr. Matthew Morris		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address PO Box 9157		Transaction ID: 1844762	
City State Zip Code Aspen CO 81612	Amount of Each Receipt this Period 5.00		
FEC ID number of contributing federal political committee. C	Debbie Stabenow Contributions		
Name of Employer Occupation FRD Project Inc Butler/Chef	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Dr. Elda Tate		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 814 W. College		Transaction ID: 1841095	
City State Zip Code Marquette MI 49855	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Debbie Stabenow Contributions		
Name of Employer Occupation Northern Michigan University Professor	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1475 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Adelle Lemon

Mailing Address 1063 Cragmont

City State Zip Code
Berkeley CA 94708

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837370

Amount of Each Receipt this Period
100.00

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Joan M. Kelley

Mailing Address 720 NE 69th St Apt 17S

City State Zip Code
Miami FL 33138

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1844465

Amount of Each Receipt this Period
100.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Thomas E. Leggat

Mailing Address 81 Baker Bridge Road

City State Zip Code
Lincoln MA 01773

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842965

Amount of Each Receipt this Period
250.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1476 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Rhoda Weinstein		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 8060 E. Girard Avenue Apt. 709		Transaction ID: 1845860	
City State Zip Code Denver CO 80231		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Kathy Castor Contributions	
Name of Employer Occupation Retired		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Mary Nilsson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5	
Mailing Address 80 Woodbourne Lane		Transaction ID: 1837834	
City State Zip Code Ormond Beach FL 32174		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		Kathy Castor Contributions	
Name of Employer Occupation Retired		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Sheila Toabe Davis		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 7913 Vantage Avenue		Transaction ID: 1844479	
City State Zip Code North Hollywood CA 91605		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Kathy Castor Contributions	
Name of Employer Occupation Bet Tzedek Secretary		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1477 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. Joshua Rowan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 3800 Lake Bayshore Dr Apt 101		Transaction ID: 1836948
City State Zip Code Bradenton FL 34205	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Kathy Castor Contributions	
Name of Employer Occupation Occupation REQUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Julie Peppard		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5
Mailing Address 1094 Palms Blvd		Transaction ID: 1838038
City State Zip Code Venice CA 90291	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Kathy Castor Contributions	
Name of Employer Occupation Gartner & Young Secretary	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Dr. Patricia Morton		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 266 Willowbrook Drive		Transaction ID: 1840970
City State Zip Code North Brunswick NJ 08902	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Kathy Castor Contributions	
Name of Employer Occupation Self-Employed Planning & Development	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1478 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Maggie Davidson

Mailing Address 750 Pine Drive, Apt. 11

City Pompano Beach State FL Zip Code 33060

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

Name of Employer Aig Valic Occupation Financial Planner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838145

Amount of Each Receipt this Period
50.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Jane Curtis

Mailing Address 7444 Spring Village Drive
Apartment 422

City Springfield State VA Zip Code 22150

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

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843534

Amount of Each Receipt this Period
20.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Renate Wasserman

Mailing Address 102 Tonset Rd.

City Orleans State MA Zip Code 02653

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843507

Amount of Each Receipt this Period
25.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ 0.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1479 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Robbin Frazier

Mailing Address 7345 France Avenue N.

City State Zip Code
Minneapolis MN 55443

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837133

Amount of Each Receipt this Period
50.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Jennifer Berlekamp

Mailing Address 120 Hazel Lane

City State Zip Code
Piedmont CA 94611

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

Name of Employer Occupation
Housewife/Volunteer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843545

Amount of Each Receipt this Period
500.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Elizabeth A. Jackets

Mailing Address 7306 Channel View Drive

City State Zip Code
Anacortes WA 98221

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837407

Amount of Each Receipt this Period
25.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1480 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Laurie Barenborg

Mailing Address 4610 S. Bradford Street

City State Zip Code
Seattle WA 98118

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841081

Amount of Each Receipt this Period
25.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Sara Eoff

Mailing Address 7205 NE 19th Avenue

City State Zip Code
Gainesville FL 32641

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

Name of Employer Occupation
Self Woodworker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841683

Amount of Each Receipt this Period
100.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Selene Levine

Mailing Address 720 Milton Road

City State Zip Code
Rye NY 10580

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837358

Amount of Each Receipt this Period
15.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1481 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Barry Bennett

Mailing Address 1521 W Fir Avenue

City State Zip Code
Fresno CA 93711

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

Name of Employer Occupation
Bennett & Sharpe PC Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836855

Amount of Each Receipt this Period
100.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Diane Farage

Mailing Address 2541 Oakwood Dr. SE

City State Zip Code
East Grand Rapids MI 49506

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

Name of Employer Occupation
Housewife

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836910

Amount of Each Receipt this Period
200.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Yvette Rudnitzky

Mailing Address 702 W. Matson Run Parkway

City State Zip Code
Wilmington DE 19802

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

Name of Employer Occupation
Self LCSW

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836408

Amount of Each Receipt this Period
100.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1482 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Helen F. Rich

Mailing Address 200 Leeder Hill Dr Apt 317

City Hamden State CT Zip Code 06517

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838479

Amount of Each Receipt this Period
15.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Carol McFall

Mailing Address 6832 Mahoning Avenue NE

City Alliance State OH Zip Code 44601

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

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1841557

Amount of Each Receipt this Period
50.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Florence Slatkin

Mailing Address 7400 NW 17th Street Apt. 108

City Plantation State FL Zip Code 33313

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838072

Amount of Each Receipt this Period
25.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1483 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Jeann Sing		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 68-1050 Maura Lane # D204		Transaction ID: 1841690
City State Zip Code Kanula HI 96743	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Kathy Castor Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Pamela Moore		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 6768 Areca Blvd.		Transaction ID: 1840946
City State Zip Code Sarasota FL 34241	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Kathy Castor Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. M. Catherine Lannon		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 6728 Layton Court		Transaction ID: 1836834
City State Zip Code Tallahassee FL 32317	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Kathy Castor Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Attorney Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1484 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Alexis Berg Marmar		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 200 Locust Street Apt. # 27B		Transaction ID: 1841704	
City Philadelphia State PA Zip Code 19106		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Kathy Castor Contributions	
Name of Employer Colonial Penn Life Ins. Co. Occupation Attorney		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Mrs. Daniel J. Schlesinger		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5	
Mailing Address 6633 Forest Avenue		Transaction ID: 1838029	
City Hammond State IN Zip Code 46324		Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C		Kathy Castor Contributions	
Name of Employer Occupation Retired		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Prof. Robert F. Meagher		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5	
Mailing Address 108 Curtis Street		Transaction ID: 1837848	
City Somerville State MA Zip Code 02144		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		Kathy Castor Contributions	
Name of Employer Occupation Retired		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1485 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Hans Engelke

Mailing Address 640 Weaver Avenue

City State Zip Code
Kalamazoo MI 49006

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838513

Amount of Each Receipt this Period
70.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Mary Hurtig

Mailing Address 2353 Bryn Mawr Avenue

City State Zip Code
Philadelphia PA 19131

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

Name of Employer Occupation
Mental Health Assoc. Dir. of Policy

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837329

Amount of Each Receipt this Period
50.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Dr. Alan M. Solinger

Mailing Address 1465 65th St Apt 253

City State Zip Code
Emeryville CA 94608

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

Name of Employer Occupation
Amgen Inc. Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841027

Amount of Each Receipt this Period
25.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1486 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Roberta L. Martin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 6040 Pitch Lane		Transaction ID: 1840948
City State Zip Code Boynton Beach FL 33437	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Kathy Castor Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Evelyn Bernice Haynes		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5
Mailing Address 2303 Owens Ave Unit 101		Transaction ID: 1838494
City State Zip Code Fort Collins CO 80528	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Kathy Castor Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Georgia Phelps Steiger		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5
Mailing Address 604 Fountainhead 2131 Lakeview Drive		Transaction ID: 1838483
City State Zip Code Sebring FL 33870	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Kathy Castor Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1487 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Nancy E Anderson

Mailing Address 23 Teresa Road

City State Zip Code
Hopkinton MA 01748

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

Name of Employer Occupation
retired writer/organizer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1843628

Amount of Each Receipt this Period
50.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Dr. Patricia Bayer Richard

Mailing Address 6 Patton Street

City State Zip Code
Athens OH 45701

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

Name of Employer Occupation
Ohio University professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1840825

Amount of Each Receipt this Period
100.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Constance Greenfield

Mailing Address 279 Sturges Highway

City State Zip Code
Westport CT 06880

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

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 5

Transaction ID: 1845269

Amount of Each Receipt this Period
250.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1488 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Linda Cukurs

Mailing Address 5940 N. Forest Glen Avenue

City State Zip Code
Chicago IL 60646

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837415

Amount of Each Receipt this Period
50.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Dr. Sarah M. Nelson

Mailing Address 5878 S. Dry Creek Court

City State Zip Code
Greenwood Village CO 80121

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

Name of Employer retired, University of Denver Occupation
Archaeologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1840914

Amount of Each Receipt this Period
250.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mrs. Jean O. Leiserson

Mailing Address 5801 Crestridge Rd Apt C207

City State Zip Code
Rncho Pls Vrd CA 90275

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837386

Amount of Each Receipt this Period
100.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1489 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Rev. Gordon D. Gibson

Mailing Address 821 Hiawatha Drive

City State Zip Code
Elkhart IN 46517

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

Name of Employer Unitarian Occupation Clergy

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841681

Amount of Each Receipt this Period
25.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Joan Chrisler

Mailing Address 116 5th Ave.

City State Zip Code
Milford CT 06460

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

Name of Employer Connecticut College Occupation Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843495

Amount of Each Receipt this Period
50.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Jane H. Murdock

Mailing Address 14 Long Pond Avenue

City State Zip Code
Housatonic MA 01236

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

Name of Employer Occupation RQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1844498

Amount of Each Receipt this Period
200.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1490 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Catherine Manz Smith

Mailing Address 85316 Coyote Creek Road

City Veneta State OR Zip Code 97487

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
10 / 17 / 2005

Transaction ID: 1841734

Amount of Each Receipt this Period
250.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Susi Westfall

Mailing Address 525 Allendale Road

City Miami State FL Zip Code 33149

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

Name of Employer Self Occupation Playwright

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
10 / 17 / 2005

Transaction ID: 1841789

Amount of Each Receipt this Period
50.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Wyman B. Fowler

Mailing Address 2107 Mallard Drive

City Lancaster State PA Zip Code 17601

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

Name of Employer Intermediate Unit # 13 Occupation Adult Education Instructor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
10 / 11 / 2005

Transaction ID: 1838075

Amount of Each Receipt this Period
1000.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1491 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Linda Lee Alter

Mailing Address 210 W Rittenhouse Square
Apartment 1506

City Philadelphia State PA Zip Code 19103

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

Name of Employer Self Occupation Artist/Philanthropist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837185

Amount of Each Receipt this Period
2100.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. B. Ellen Fisher

Mailing Address 5137 S. Kimbark Avenue

City Chicago State IL Zip Code 60615

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

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837119

Amount of Each Receipt this Period
100.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Kristin W. Olsson

Mailing Address 11127 Midway Road

City Dallas State TX Zip Code 75229

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

Name of Employer Worshan, Fortsythe & Wol Occupation Legal Assitant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836354

Amount of Each Receipt this Period
5.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1492 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Adelle Lemon		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 1063 Cragmont		Transaction ID: 1837374
City State Zip Code Berkeley CA 94708	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Kathy Castor Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Helen Johanson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 505 Avenida Sevilla Unit C		Transaction ID: 1837157
City State Zip Code Laguna Hills CA 92637	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Kathy Castor Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Mr. Matthew Morris		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address PO Box 9157		Transaction ID: 1844758
City State Zip Code Aspen CO 81612	Amount of Each Receipt this Period 5.00	
FEC ID number of contributing federal political committee. C	Kathy Castor Contributions	
Name of Employer Occupation FRD Project Inc Butler/Chef	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1493 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Marcia Raeber-McClain		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5
Mailing Address 910 Holly Street		Transaction ID: 1838528
City State Zip Code Blytheville AR 72315	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Kathy Castor Contributions	
Name of Employer Occupation Occupation REQUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Deborah M. Floyd		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 502 Lexington Lane		Transaction ID: 1844485
City State Zip Code Richardson TX 75080	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Kathy Castor Contributions	
Name of Employer Occupation US FDA Entomologist	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Joan Norgren		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 501 E. Skyline Pkwy		Transaction ID: 1837352
City State Zip Code Duluth MN 55805	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C	Kathy Castor Contributions	
Name of Employer Occupation Occupation REQUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1494 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Carol Kuller

Mailing Address 137 Great Barrington Road

City State Zip Code
West Stockbridge MA 01266

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842475

Amount of Each Receipt this Period
50.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Dr. Jape Taylor

Mailing Address 500 N.W. 80th Boulevard

City State Zip Code
Gainesville FL 32607

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837180

Amount of Each Receipt this Period
100.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Carol B. Leibman

Mailing Address 100 Diplomat Drive, # 6F

City State Zip Code
Mt. Kisco NY 10549

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 5

Transaction ID: 1834962

Amount of Each Receipt this Period
25.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1495 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Christopher Maurer

Mailing Address 205 N3 Carpenter Road SE

City State Zip Code
Lacey WA 98503

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

Name of Employer State of WA Occupation Scientist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843593

Amount of Each Receipt this Period
25.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Estelle T. Dashman

Mailing Address 11 Riverview Farm Road

City State Zip Code
Ossining NY 10562

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836368

Amount of Each Receipt this Period
50.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Nancy Gold

Mailing Address 4876 Peregrine Point Cir N

City State Zip Code
Sarasota FL 34231

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

Name of Employer The New England Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838473

Amount of Each Receipt this Period
50.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1496 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Doris B. Coster		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 135 Valentine Road		Transaction ID: 1840822	
City State Zip Code Pomfret Ctr CT 06259	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Kathy Castor Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Ms. Francesca Benson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 30 Bainbridge		Transaction ID: 1837202	
City State Zip Code Princeton NJ 08540	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Kathy Castor Contributions		
Name of Employer Occupation Newgrange School Educator	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Geneva K Loveland		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 4801 Connecticut Ave. NW # 212		Transaction ID: 1836700	
City State Zip Code Washington DC 20008	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Kathy Castor Contributions		
Name of Employer Occupation Federal Judicial Center Attorney-Producer	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1497 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Barbara H. Malcolm

Mailing Address 4775 S Harbor Dr Apt 101

City State Zip Code
Vero Beach FL 32967

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843548

Amount of Each Receipt this Period
250.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Della H. Huber

Mailing Address 5308 Boyd Ave # B

City State Zip Code
Oakland CA 94618

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837127

Amount of Each Receipt this Period
100.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Linda L. Wise

Mailing Address 4749 Old Post Ct

City State Zip Code
Boulder CO 80301

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

Name of Employer Occupation
Self Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841650

Amount of Each Receipt this Period
100.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1498 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Allison F. Brower		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 4745 Espana Court		Transaction ID: 1845262
City State Zip Code Carmichael CA 95608	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Kathy Castor Contributions	
Name of Employer San Juan Unified School Occupation Teacher	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Mr. John J. Poplawski		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address 4726 San Feliciano Drive		Transaction ID: 1835660
City State Zip Code Woodland Hills CA 91364	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Kathy Castor Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Phebe B Bederman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 5
Mailing Address 4720 NE 3rd Avenue		Transaction ID: 1835136
City State Zip Code Ft. Lauderdale FL 33334	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C	Kathy Castor Contributions	
Name of Employer Home Depot Occupation service/sales rep	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1499 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Susan Emery McGannon Mailing Address 3002 Bowers Lane City Murfreesboro State TN Zip Code 37129 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5 Transaction ID: 1836325 Amount of Each Receipt this Period 50.00 Kathy Castor Contributions [MEMO ITEM] MEMO
Name of Employer City of Murfreesboro Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Alwyn N. Johnson Mailing Address 4601 Rue Belle Mer City Sanibel State FL Zip Code 33957 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5 Transaction ID: 1843685 Amount of Each Receipt this Period 100.00 Kathy Castor Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Housewife Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Dr. Gustav Papanek Mailing Address 2 Mason Street City Lexington State MA Zip Code 02421 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5 Transaction ID: 1842093 Amount of Each Receipt this Period 75.00 Kathy Castor Contributions [MEMO ITEM] MEMO
Name of Employer BIDE Occupation Economist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1500 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Charlotte Moss		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address 134 E 71st St		Transaction ID: 1835600
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Kathy Castor Contributions [MEMO ITEM] MEMO
Name of Employer Self Occupation Designer	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Phyllis G. Levinson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 5262 Boca Marina Circle S.		Transaction ID: 1841729
City State Zip Code Boca Raton FL 33487	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Kathy Castor Contributions [MEMO ITEM] MEMO
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Ann Friend		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 4414 Durant Street, # 111		Transaction ID: 1841777
City State Zip Code Deer Park TX 77536	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Kathy Castor Contributions [MEMO ITEM] MEMO
Name of Employer Calpine Corp. Occupation Engineer	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1501 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Alice G. Armstrong Mailing Address 1002 140th Street E City Tacoma State WA Zip Code 98445 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5 Transaction ID: 1838240 Amount of Each Receipt this Period 25.00 Kathy Castor Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Mr. Steve L. Schwartz Mailing Address 425 S. Chickasaw Trail #348 City Orlando State FL Zip Code 32825 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5 Transaction ID: 1840988 Amount of Each Receipt this Period 100.00 Kathy Castor Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Self Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Mary Sue Ittner Mailing Address Bob Rutemoeller P.O. Box 587 City Gualala State CA Zip Code 95445 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5 Transaction ID: 1838504 Amount of Each Receipt this Period 50.00 Kathy Castor Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Self Financial Planner/Volunteer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1502 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Rosemary Vimont

Mailing Address 1922 Oregon Street

City State Zip Code
Berkeley CA 94703

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841626

Amount of Each Receipt this Period
50.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Kathleen Commons

Mailing Address 5849 Garden Park Court
Apt. B

City State Zip Code
Carmichael CA 95608

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

Name of Employer Occupation
Managed Care Sgs. Inc. Admin. Assoc.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1844513

Amount of Each Receipt this Period
50.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Fred Golding

Mailing Address 1113 Emeral Bay

City State Zip Code
Laguna Beach CA 92655

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 5

Transaction ID: 1845275

Amount of Each Receipt this Period
60.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1503 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Gloria Deison

Mailing Address 1311 Peacefield Place

City State Zip Code
Tallahassee FL 32308

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

Name of Employer Occupation
Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838460

Amount of Each Receipt this Period
100.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Robin Hanes

Mailing Address 191 Lynn Cove Road

City State Zip Code
Asheville NC 28804

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

Name of Employer Occupation
Self Artist/Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 5

Transaction ID: 1845300

Amount of Each Receipt this Period
250.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Annabelle L. Cloner

Mailing Address 1909 Skycrest Dr. #11

City State Zip Code
Walnut Creek CA 94595

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

Name of Employer Occupation
retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844813

Amount of Each Receipt this Period
250.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1504 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Geraldine A. Herbert

Mailing Address 400 North Hulen Way
PO Box 479

City Ketchum State ID Zip Code 83340

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

Name of Employer Self employed Occupation Investor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 0 5

Transaction ID: 1844442

Amount of Each Receipt this Period
100.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Sheila Smith

Mailing Address 4 Vestry Lane

City Savannah State GA Zip Code 31411

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841041

Amount of Each Receipt this Period
50.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Julie Winterbottom

Mailing Address 142 Underhill Avenue, # 1

City Brooklyn State NY Zip Code 11238

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

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836344

Amount of Each Receipt this Period
25.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1505 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Geri LeVine Loe

Mailing Address 5961 Canon Court

City State Zip Code
Ventura CA 93003

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

Name of Employer Occupation
Venura College Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842999

Amount of Each Receipt this Period
200.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Audrey Miller

Mailing Address P.O. Box 888

City State Zip Code
Ferndale CA 95536

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1841708

Amount of Each Receipt this Period
60.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Dorothy G. Whitmore

Mailing Address 1309 N. Clayton Street

City State Zip Code
Wilmington DE 19806

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838520

Amount of Each Receipt this Period
250.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1506 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Shirley Gleich

Mailing Address 8116 Pine Circle

City State Zip Code
Tamarac FL 33321

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

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838116

Amount of Each Receipt this Period
50.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Dr. Era J. Moorer

Mailing Address 18890 Lake Worth Blvd

City State Zip Code
Port Charlotte FL 33948

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

Name of Employer Occupation
North Port Animal Hospital Veterinarian

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 1 / 2 0 0 5

Transaction ID: 1834981

Amount of Each Receipt this Period
50.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Greta Newman

Mailing Address 39 Steppingstone Lane

City State Zip Code
Great Neck NY 11024

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836828

Amount of Each Receipt this Period
100.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1507 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Victoria H. Lowell		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 188 Sippewissett Road		Transaction ID: 1844783
City State Zip Code Falmouth MA 02540	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Kathy Castor Contributions [MEMO ITEM] MEMO
Name of Employer Barnstable County	Occupation County Commissioner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Jennifer S. Whitaker		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address 39 5th Avenue		Transaction ID: 1835593
City State Zip Code New York NY 10003	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Kathy Castor Contributions [MEMO ITEM] MEMO
Name of Employer SELF	Occupation WRITER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Jacqueline A. Franco		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 18616 N. 99th Avenue Apt. 1064		Transaction ID: 1837172
City State Zip Code Sun City AZ 85373	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Kathy Castor Contributions [MEMO ITEM] MEMO
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1508 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Dr. Frances Reiner Lax

Mailing Address 185 Medford Leas

City State Zip Code
Medford NJ 08055

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1841739

Amount of Each Receipt this Period
100.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Samona Sheppard

Mailing Address 1301 N Tamiami Trl Apt 713

City State Zip Code
Sarasota FL 34236

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1844530

Amount of Each Receipt this Period
25.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Eugenie Suter

Mailing Address 3100 NE 48th Street, Apt. 513

City State Zip Code
Fort Lauderdale FL 33308

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842932

Amount of Each Receipt this Period
50.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1509 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Hugh M. Jackson

Mailing Address 6035 W Mansfield Ave Unit 247

City State Zip Code
Denver CO 80235

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845883

Amount of Each Receipt this Period
25.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Melinda K. Reed

Mailing Address 3671 Ward Road

City State Zip Code
Wheat Ridge CO 80033

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1841594

Amount of Each Receipt this Period
100.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

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

Mailing Address 2300 Indian Creek Boulevard
Apartment C-121

City State Zip Code
Vero Beach FL 32966

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1841701

Amount of Each Receipt this Period
250.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1510 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Karlene K. Bergold

Mailing Address 1811 Sheridan Avenue

City State Zip Code
San Diego CA 92103

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841092

Amount of Each Receipt this Period
100.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. John M. Wolf, Jr.

Mailing Address PO Box 1429

City State Zip Code
Sanibel FL 33957

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836926

Amount of Each Receipt this Period
50.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Dr. Sharon M. Stein

Mailing Address 1035 Leonello Avenue

City State Zip Code
Los Altos CA 94024

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

Name of Employer Occupation
TPMG Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 0 5

Transaction ID: 1835028

Amount of Each Receipt this Period
25.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1511 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Rosamond L. Douglass		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 1106 Catalina Road W		Transaction ID: 1843492
City State Zip Code Jacksonville FL 32216	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Kathy Castor Contributions	
Name of Employer Occupation Occupation REQUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Mrs. Howard Kaufman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 130 Sunrise Avenue Apt. 505		Transaction ID: 1841066
City State Zip Code Palm Beach FL 33480	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Kathy Castor Contributions	
Name of Employer Occupation Occupation REQUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Catherine C. Gerhold		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5
Mailing Address 1804 Wightman Street		Transaction ID: 1838163
City State Zip Code Pittsburgh PA 15217	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C	Kathy Castor Contributions	
Name of Employer Occupation Self/Allegheny Homemaker/Lawyer	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1512 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Leal Abbott

Mailing Address 359 Quail Drive

City Woodland State CA Zip Code 95695

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

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 5

Transaction ID: 1845257

Amount of Each Receipt this Period
50.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Dr. Libby A. Tanner

Mailing Address 1800 Sunset Harbour Drive Unit 1012

City Miami State FL Zip Code 33139

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

Name of Employer Self Occupation Psychotherapist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844780

Amount of Each Receipt this Period
100.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Roxane Bleiweis

Mailing Address PO Box 561

City McIntosh State FL Zip Code 32664

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838489

Amount of Each Receipt this Period
50.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1513 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Richard C. Foust

Mailing Address 180 N. 4th Street, Apt. 607

City State Zip Code
San Jose CA 95112

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

Name of Employer Self Occupation Architect

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1844520

Amount of Each Receipt this Period
50.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Barbara L. Eidem

Mailing Address 3496 Winding Trail Circle

City State Zip Code
Virginia Beach VA 23456

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843597

Amount of Each Receipt this Period
100.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Katherine Simpson

Mailing Address 1001 Spring Street, Apt. 805

City State Zip Code
Silver Spring MD 20910

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

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841086

Amount of Each Receipt this Period
25.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1514 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Suzanne Leagjeld		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 34146 Old County Road 16		Transaction ID: 1843568	
City State Zip Code Pequot Lakes MN 56472	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Kathy Castor Contributions	
Name of Employer Self Occupation Resort Owner/Farmer	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Ms. Catherine L. Fiore		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5	
Mailing Address 18 Battle Green Road		Transaction ID: 1845248	
City State Zip Code Lexington MA 02421	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Kathy Castor Contributions	
Name of Employer MIT Occupation Physicist	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Mr. Gerrish H. Milliken		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address PO Box 1880		Transaction ID: 1844506	
City State Zip Code Oroville WA 98844	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		Kathy Castor Contributions	
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1515 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Mary G Favaro

Mailing Address 626 14th Ave East

City State Zip Code
Seattle WA 98112

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

Name of Employer Occupation
Occupation businesswoman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 5

Transaction ID: 1841062

Amount of Each Receipt this Period
100.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Dorothy L. Flaster

Mailing Address 1760 East Valley Road

City State Zip Code
Montecito CA 93108

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

Name of Employer Occupation
Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842929

Amount of Each Receipt this Period
100.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Robert F. Hartmann

Mailing Address 335 Via Concha

City State Zip Code
Aptos CA 95003

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

Name of Employer Occupation
Hartmann & Miller Lawyer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: 1837831

Amount of Each Receipt this Period
250.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ 0.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1516 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Laura Avery

Mailing Address 6309 Cocoa Lane

City Apollo Beach State FL Zip Code 33572

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

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837163

Amount of Each Receipt this Period
50.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Marie Louis Blount

Mailing Address 35 Young Avenue

City Croton Hdsn State NY Zip Code 10520

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

Name of Employer New York University Occupation Associate Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845923

Amount of Each Receipt this Period
100.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Craig Bartelt

Mailing Address 1751 Buckingham Road

City Los Angeles State CA Zip Code 90019

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

Name of Employer Sony Pictures Occupation Administrator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836896

Amount of Each Receipt this Period
100.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1517 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Joan Steele Mailing Address 332 Glenn Street City Ashland State OR Zip Code 97520 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5 Transaction ID: 1841042 Amount of Each Receipt this Period 10.00 Kathy Castor Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Mr. Andrew Carson Mailing Address PO Box 709 City Wilson State WY Zip Code 83014 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 5 Transaction ID: 1835095 Amount of Each Receipt this Period 25.00 Kathy Castor Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation mtn guide Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Margaret Poole Mailing Address 33 Sunset Road City Wayland State MA Zip Code 01778 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5 Transaction ID: 1836395 Amount of Each Receipt this Period 50.00 Kathy Castor Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Elec. Engr. Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1518 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Rhoda L. Honigman Mailing Address PO Box 294 City Oilville State VA Zip Code 23129 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1837819 Amount of Each Receipt this Period <table border="1"> <tr> <td>300.00</td> </tr> </table> Kathy Castor Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	0	7	/	2	0	0	5	300.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	0	7	/	2	0	0	5														
300.00																							
Name of Employer Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

B. Full Name (Last, First, Middle Initial) Ms. Cynthia Kayser Mailing Address PO Box 48 City Fairfax State CA Zip Code 94978 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>1</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1841758 Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table> Kathy Castor Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	7	/	2	0	0	5	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	1	7	/	2	0	0	5														
50.00																							
Name of Employer Occupation PG & E Utility Worker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

C. Full Name (Last, First, Middle Initial) Mrs. Alice Schoen Mailing Address 6419 Cavalier Corridor City Falls Church State VA Zip Code 22044 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>0</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1835609 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Kathy Castor Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	0	3	/	2	0	0	5	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	0	3	/	2	0	0	5														
100.00																							
Name of Employer Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1519 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Robert M. Lande

Mailing Address 325 Central Park W.

City State Zip Code
New York NY 10025

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

Name of Employer Occupation
Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842923

Amount of Each Receipt this Period
50.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Lynette B. Reilly

Mailing Address 12516 Davan Drive

City State Zip Code
Silver Spring MD 20904

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

Name of Employer Occupation
Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1844516

Amount of Each Receipt this Period
100.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
S. C. Reichel-Cook

Mailing Address PO Box 257

City State Zip Code
Ross CA 94957

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

Name of Employer Occupation
Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844864

Amount of Each Receipt this Period
20.06

Kathy Castor Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1520 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. Richard Toole		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5	
Mailing Address PO Box 256		Transaction ID: 1841577	
City State Zip Code Oak Bluffs MA 02557	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Kathy Castor Contributions		
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Elaine Togneri		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5	
Mailing Address 33 Middlesex Blvd		Transaction ID: 1836385	
City State Zip Code Monroe Twp NJ 08831	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Kathy Castor Contributions		
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Betsy Oakman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address 2429 Duncan Street		Transaction ID: 1836946	
City State Zip Code Columbia SC 29205	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Kathy Castor Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1521 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Lois E. Jolley

Mailing Address 6605 100th Avenue

City Pinellas Park State FL Zip Code 33782

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

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843484

Amount of Each Receipt this Period
50.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mrs. Shirley Baer

Mailing Address 6621 SE Harbor Circle

City Stuart State FL Zip Code 34996

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836821

Amount of Each Receipt this Period
100.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Margaret Solomon

Mailing Address P.O. Box 3303

City Incline Village State NV Zip Code 89450

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

Name of Employer Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844798

Amount of Each Receipt this Period
100.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1522 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. Andrew Carson Mailing Address PO Box 709 City Wilson State WY Zip Code 83014 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5 Transaction ID: 1835644 Amount of Each Receipt this Period 25.00 Kathy Castor Contributions [MEMO ITEM] MEMO
Name of Employer: Cony Corp Occupation: mtn guide Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Sheila Gershen Mailing Address PO Box 292 City Santa Fe State NM Zip Code 87504 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5 Transaction ID: 1844828 Amount of Each Receipt this Period 25.00 Kathy Castor Contributions [MEMO ITEM] MEMO
Name of Employer: Occupation: Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Mrs. Anita D. DeVine Mailing Address 988 Blvd of the Arts #1210 City Sarasota State FL Zip Code 34236 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5 Transaction ID: 1835629 Amount of Each Receipt this Period 50.00 Kathy Castor Contributions [MEMO ITEM] MEMO
Name of Employer: Occupation: Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1523 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. Joel Ginzberg		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address PO Box 873		Transaction ID: 1835637
City State Zip Code Stone Ridge NY 12484	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Kathy Castor Contributions	
Name of Employer self, semi-retired Occupation Psychologist	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Mrs. Beatriz C. Clewell-Romero		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5
Mailing Address 1621 13th Street, N.W.		Transaction ID: 1838155
City State Zip Code Washington DC 20009	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Kathy Castor Contributions	
Name of Employer National Science Foundation Occupation Policy Analyst/Researcher	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Margret Jacoby		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 912 Blossom Drive		Transaction ID: 1841643
City State Zip Code Santa Clara CA 95050	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Kathy Castor Contributions	
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1524 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Julia A Malakoff

Mailing Address 9103 SW 96 Avenue

City Miami State FL Zip Code 33176

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

Name of Employer self employed Occupation administrator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 2 / 2 0 0 5

Transaction ID: 1835080

Amount of Each Receipt this Period
25.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Karen J. Keefer

Mailing Address 705 Chesapeake Avenue

City Silver Spring State MD Zip Code 20910

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

Name of Employer FEMA Occupation Em Mgmt Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841677

Amount of Each Receipt this Period
50.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Leslie Sternlieb

Mailing Address 90 Edgewater Drive, Apt. 1101

City Coral Gables State FL Zip Code 33133

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

Name of Employer Self Occupation Writer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1835624

Amount of Each Receipt this Period
100.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1525 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Judy Dorn

Mailing Address 708 14th Avenue S.

City State Zip Code
Saint Cloud MN 56301

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1838433

Amount of Each Receipt this Period
30.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Doris L. Marsh

Mailing Address 254 East Tall Oaks Circle

City State Zip Code
Palm Beach Gardens FL 33410

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1835652

Amount of Each Receipt this Period
100.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

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

Mailing Address 2880 NE 14th Street, Apt. 405
The Pointe of Pompano Beach

City State Zip Code
Pompano Beach FL 33062

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837169

Amount of Each Receipt this Period
100.00

Kathy Castor Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1526 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Patricia B. Wallace		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 831 Moonlight Drive		Transaction ID: 1841782
City York State PA Zip Code 17402	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Kathy Castor Contributions	
Name of Employer Lincoln Intermediate Unit 2 Occupation Case Manager	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Nancy E. Sherman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 8240 Desmond Dr		Transaction ID: 1844495
City Boynton Beach State FL Zip Code 33437	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Kathy Castor Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Constance Greenfield		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 279 Sturges Highway		Transaction ID: 1845266
City Westport State CT Zip Code 06880	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions	
Name of Employer Occupation Homemaker	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date 0.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1527 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Ina M. Ayliffe		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address 15905 Bent Tree Cr. #1025		Transaction ID: 1844800	
City State Zip Code Dallas TX 75248	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions	
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] MEMO	

Full Name (Last, First, Middle Initial) B. Ms. Anne Patterson		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 80 Buckingham St		Transaction ID: 1841771	
City State Zip Code Cambridge MA 02138	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions	
Name of Employer Occupation Homemaker	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] MEMO	

Full Name (Last, First, Middle Initial) C. Ms. Anne C. Tiracchia		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address 725 Scott Street		Transaction ID: 1844856	
City State Zip Code Stroudsburg PA 18360	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions	
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] MEMO	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1528 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Dr. Marc F. Collin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 2692 Landon Road		Transaction ID: 1843671
City State Zip Code Shaker Heights OH 44122	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions	
Name of Employer MetroHealth Medical Center Occupation physician	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Jennifer Berlekamp		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 120 Hazel Lane		Transaction ID: 1843542
City State Zip Code Piedmont CA 94611	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions	
Name of Employer Occupation Housewife/Volunteer	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Mrs. Barbara Poppe		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 7356 Magnolia Drive		Transaction ID: 1845881
City State Zip Code Nederland CO 80466	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions	
Name of Employer NOAA Occupation Computer Specialist	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1529 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Elizabeth A. Jackets

Mailing Address 7306 Channel View Drive

City Anacortes State WA Zip Code 98221

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837405

Amount of Each Receipt this Period
10.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Bonnie J. Morse

Mailing Address 729 Woodland Road

City Bradfordwoods State PA Zip Code 15015

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837366

Amount of Each Receipt this Period
50.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Jay Paul

Mailing Address 109 Scott Street

City San Francisco State CA Zip Code 94117

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

Name of Employer Occupation U CSF Psychologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842995

Amount of Each Receipt this Period
25.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1530 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Mary Nell Allen

Mailing Address 719 Lincoln Street

City State Zip Code
Sayre PA 18840

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

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836769

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Georgia R. Locker

Mailing Address 713 Duke Square

City State Zip Code
Fort Collins CO 80525

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

Name of Employer Occupation
City of Jeffersonville IN Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837331

Amount of Each Receipt this Period
20.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Margaret Hauck

Mailing Address 12 Running Brook Road

City State Zip Code
Bridgewater NJ 08807

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

Name of Employer Occupation
Home Hauck Accountant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1835665

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1531 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Susan M. Selbin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 1520 San Carlos Road SW		Transaction ID: 1844871
City State Zip Code Albuquerque NM 87104	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Mr. James M. Beck		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5
Mailing Address 4714 Windsor Avenue		Transaction ID: 1838526
City State Zip Code Philadelphia PA 19143	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions	
Name of Employer Occupation Pepper, Hamilton, & Schroeder Attorney	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Linda Murnik		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5
Mailing Address 263 Camino Los Abuelos		Transaction ID: 1838445
City State Zip Code Santa Fe NM 87508	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1532 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Patricia Ness		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 2515 Caminito Muirfield		Transaction ID: 1837418
City State Zip Code La Jolla CA 92037	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Gail Winnell		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 7024 El Torro St		Transaction ID: 1837236
City State Zip Code Zephyrhills FL 33541	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Barbara Haack		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 102 Main Street		Transaction ID: 1843581
City State Zip Code West Newbury MA 01985	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions	
Name of Employer Occupation Pingree School Teacher	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1533 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Yvette Rudnitzky

Mailing Address 702 W. Matson Run Parkway

City State Zip Code
Wilmington DE 19802

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

Name of Employer Self Occupation LCSW

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836410

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Mary Jane Mettler

Mailing Address 15091 Ford Road, Apt. 116

City State Zip Code
Dearborn MI 48126

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

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836401

Amount of Each Receipt this Period
25.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Carol McFall

Mailing Address 6832 Mahoning Avenue NE

City State Zip Code
Alliance OH 44601

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

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1841558

Amount of Each Receipt this Period
50.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1534 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Jeann Sing

Mailing Address 68-1050 Maura Lane # D204

City Kanula State HI Zip Code 96743

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841689

Amount of Each Receipt this Period
50.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Dr. Robert L. Piper

Mailing Address 76 Hillman Street

City New Bedford State MA Zip Code 02740

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

Name of Employer Occupation Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845849

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Victoria E. Watkins

Mailing Address 244 Madison Avenue, # 14E

City New York State NY Zip Code 10016

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Energy Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836838

Amount of Each Receipt this Period
110.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1535 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Shirley Baer

Mailing Address 6621 SE Harbor Circle

City State Zip Code
Stuart FL 34996

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836820

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Mary E. Kelman

Mailing Address 1500 Sawyer Ave

City State Zip Code
Manasquan NJ 08736

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 5

Transaction ID: 1844790

Amount of Each Receipt this Period
50.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Gene M. Wilson

Mailing Address 7730 Tecumseh Trail

City State Zip Code
Cincinnati OH 45243

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: 1837839

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1536 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Dr. Morton Zivan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 2401 Pennsylvania Avenue #15B24		Transaction ID: 1845890	
City Philadelphia State PA Zip Code 19130		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions	
Name of Employer Self Occupation Psychologist		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Louise M. Wellborn		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 2400 Rio Grande Blvd NW		Transaction ID: 1842980	
City Albuquerque State NM Zip Code 87104		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions	
Name of Employer Occupation REQUESTED		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Eileen M. Herrin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5	
Mailing Address 6424 Almond Avenue		Transaction ID: 1838077	
City Organgevale State CA Zip Code 95662		Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions	
Name of Employer Occupation REQUESTED		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date 0.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1537 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Julie Peppard

Mailing Address 1094 Palms Blvd

City State Zip Code
Venice CA 90291

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Gartner & Young Secretary

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838035

Amount of Each Receipt this Period
50.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Margret S. Trozky

Mailing Address 27 Saxham Way

City State Zip Code
Wynnewood PA 19096

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Children's Hospital of Philadelphia Pediatrician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836370

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Roberta Martini

Mailing Address 1175 York Avenue #17D

City State Zip Code
New York NY 10021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1841722

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1538 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Alice Schoen

Mailing Address 6419 Cavalier Corridor

City Falls Church State VA Zip Code 22044

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1835610

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mrs. Irving Schulman

Mailing Address 1483 Sutter Street, Apt. 1707

City San Francisco State CA Zip Code 94109

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838529

Amount of Each Receipt this Period
25.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Dr. L Erlenmeyer-Kimling

Mailing Address 1 Briarwood Lane

City Stamford State CT Zip Code 06903

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Research Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1836659

Amount of Each Receipt this Period
200.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1539 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Marilyn J. Henry		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 7823 Calverton Square		Transaction ID: 1844475	
City State Zip Code New Albany OH 43054	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions		
Name of Employer Occupation Homemaker	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Mr. Jesse W. Kehres		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 5	
Mailing Address 8 Classic Cir		Transaction ID: 1834879	
City State Zip Code Madison WI 53719	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions		
Name of Employer REQUESTED Occupation Engineer	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Gail W. Chester		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 24 Mill Road		Transaction ID: 1844456	
City State Zip Code Matawan NJ 07747	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions		
Name of Employer Middlesex Co. Legal Svcs. Occupation Attorney	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1540 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Mary Hurtig		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 2353 Bryn Mawr Avenue		Transaction ID: 1837330	
City Philadelphia	State PA	Zip Code 19131	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions	
Name of Employer Mental Health Assoc.	Occupation Dir. of Policy		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

Full Name (Last, First, Middle Initial) B. Mrs. Ralph Horrell		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address 624 Pickering Road		Transaction ID: 1836908	
City Southhampton	State PA	Zip Code 18966	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions	
Name of Employer		Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

Full Name (Last, First, Middle Initial) C. Ms. Nancy L. Madsen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 2340 S 2300 E		Transaction ID: 1841614	
City Salt Lake Cty	State UT	Zip Code 84109	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions	
Name of Employer Kaiser Foundation Health		Occupation Nursing Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1541 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Dr. Alan M. Solinger

Mailing Address 1465 65th St Apt 253

City State Zip Code
Emeryville CA 94608

FEC ID number of contributing federal political committee. **C**

Name of Employer Amgen Inc. Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841028

Amount of Each Receipt this Period
25.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Roberta L. Martin

Mailing Address 6040 Pitch Lane

City State Zip Code
Boynton Beach FL 33437

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1840949

Amount of Each Receipt this Period
25.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Patricia G. Kinsman

Mailing Address 11671 N. Europa Place

City State Zip Code
Tucson AZ 85737

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842938

Amount of Each Receipt this Period
25.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1542 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Analine S. Hicks Mailing Address 2280 Cayuga Rd City Schenectady State NY Zip Code 12309 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1836404 Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table> Lois Murphy Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	3		2	0	0	5	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		0	3		2	0	0	5														
50.00																							
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

B. Full Name (Last, First, Middle Initial) Ms. Julie Winterbottom Mailing Address 142 Underhill Avenue, # 1 City Brooklyn State NY Zip Code 11238 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1836343 Amount of Each Receipt this Period <table border="1"> <tr> <td>25.00</td> </tr> </table> Lois Murphy Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	3		2	0	0	5	25.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		0	3		2	0	0	5														
25.00																							
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

C. Full Name (Last, First, Middle Initial) Ms. Judith Wolfe Mailing Address 11644 Harborview City Cleveland State OH Zip Code 44102 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1835617 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Lois Murphy Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	3		2	0	0	5	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		0	3		2	0	0	5														
100.00																							
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1543 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Linda Cukurs		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 5940 N. Forest Glen Avenue		Transaction ID: 1837414	
City State Zip Code Chicago IL 60646	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions		
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Anne M. Vawser		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address 22608 Melia Road		Transaction ID: 1844842	
City State Zip Code Gretna NE 68028	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions		
Name of Employer Occupation National Park Service Archeologist	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Shirley Gleich		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5	
Mailing Address 8116 Pine Circle		Transaction ID: 1838113	
City State Zip Code Tamarac FL 33321	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions		
Name of Employer Occupation Homemaker	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1544 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Phyllis R. Farley

Mailing Address 580 Park Avenue
#6-A

City State Zip Code
New York NY 10021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836840

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Mary Brucklacher

Mailing Address 560 Deer Lake Dr

City State Zip Code
Findlay OH 45840

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1841510

Amount of Each Receipt this Period
25.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Bronwyn J. Nelson

Mailing Address 5567 Mesa Verde Court

City State Zip Code
Fairfield OH 45014

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Fairfield City School Chemisty Teacher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838024

Amount of Each Receipt this Period
25.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1545 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Polly N. Victor

Mailing Address 5543 N. Fresno, # D

City	State	Zip Code
Fresno	CA	93710

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
	Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	1	/	2	0	0	5

Transaction ID: 1838089

Amount of Each Receipt this Period
250.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Norma Reinhard

Mailing Address 216 N Madison Avenue

City	State	Zip Code
Grove City	PA	16127

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Lakeview School District	Guidance Counselor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	4	/	2	0	0	5

Transaction ID: 1841664

Amount of Each Receipt this Period
50.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Jane H. Murdock

Mailing Address 14 Long Pond Avenue

City	State	Zip Code
Housatonic	MA	01236

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
	RQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	0	5

Transaction ID: 1844499

Amount of Each Receipt this Period
200.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1546 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Linda M. Hengst Mailing Address 533 W. Market Street City York State PA Zip Code 17404 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5 Transaction ID: 1836377 Amount of Each Receipt this Period 50.00 Lois Murphy Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Della H. Huber Mailing Address 5308 Boyd Ave # B City Oakland State CA Zip Code 94618 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5 Transaction ID: 1837128 Amount of Each Receipt this Period 100.00 Lois Murphy Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Mr. James T. Langland Mailing Address 1014 Oakland Park Road City Thief River Falls State MN Zip Code 56701 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5 Transaction ID: 1836293 Amount of Each Receipt this Period 50.00 Lois Murphy Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1547 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Linda S. Popkin-Paine

Mailing Address 2121 Goldsmith

City State Zip Code
Houston TX 77030

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation volunteer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837187

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Adelle Lemon

Mailing Address 1063 Cragmont

City State Zip Code
Berkeley CA 94708

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837376

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Deborah McCarter

Mailing Address 211 W. Waverly Road

City State Zip Code
Glenside PA 19038

FEC ID number of contributing federal political committee. **C**

Name of Employer Abington School District Occupation Teacher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: 1837836

Amount of Each Receipt this Period
50.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1548 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Janet L. Smarr

Mailing Address 1397 Caminito Halago

City State Zip Code
La Jolla CA 92037

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UCSD Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836894

Amount of Each Receipt this Period
25.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Carol B. Leibman

Mailing Address 100 Diplomat Drive, # 6F

City State Zip Code
Mt. Kisco NY 10549

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 2 / 2 0 0 5

Transaction ID: 1834963

Amount of Each Receipt this Period
25.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Nancy Hall

Mailing Address 210 Zelle Avenue

City State Zip Code
Moorestown NJ 08057

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1841718

Amount of Each Receipt this Period
250.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1549 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Mary Lou Parker

Mailing Address 516 Westminster Avenue

City Swarthmore State PA Zip Code 19081

FEC ID number of contributing federal political committee. **C**

Name of Employer UNISYS Occupation Project Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844837

Amount of Each Receipt this Period
50.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Dr. Mary Forman Kaufman

Mailing Address 210 Villard Avenue

City Hastings Hdsn. State NY Zip Code 10706

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836815

Amount of Each Receipt this Period
35.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Helen Long

Mailing Address 2904 Via Chiquita

City Santa Fe State NM Zip Code 87505

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843521

Amount of Each Receipt this Period
50.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1550 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Jane P. Moser		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5
Mailing Address 21 Stuyvesant Oval, Apt. 9F		Transaction ID: 1838188
City State Zip Code New York NY 10009	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Louise Hendrickson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 1382 Newtown Langhorne Rd. #J103		Transaction ID: 1845243
City State Zip Code Newtown PA 18940	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Mr. Gerald F. George		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 51 Ashbury Terrace		Transaction ID: 1837350
City State Zip Code San Francisco CA 94117	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Attorney Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1551 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Karen Sundback

Mailing Address 21 Kenmore Road

City Bloomfield State CT Zip Code 06002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836264

Amount of Each Receipt this Period
200.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Marsha L. Richins

Mailing Address 508 S Glenwood Ave

City Columbia State MO Zip Code 65203

FEC ID number of contributing federal political committee. **C**

Name of Employer University of Missouri Occupation Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1837866

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Helen Johanson

Mailing Address 505 Avenida Sevilla Unit C

City Laguna Hills State CA Zip Code 92637

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837156

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1552 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Jo Whetzel		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 5036 Castleman Street		Transaction ID: 1841597
City State Zip Code Pittsburgh PA 15232	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions [MEMO ITEM] MEMO
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Ms. Deborah M. Floyd		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 502 Lexington Lane		Transaction ID: 1844486
City State Zip Code Richardson TX 75080	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Entomologist	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Mr. James K. Donnell		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 207 Norman Drive		Transaction ID: 1845914
City State Zip Code Cranberry Twp PA 16066	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1553 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Christopher Maurer

Mailing Address 205 N3 Carpenter Road SE

City State Zip Code
Lacey WA 98503

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
State of WA Scientist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843595

Amount of Each Receipt this Period
25.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Valerie Block

Mailing Address 50 Glenwood Rd

City State Zip Code
Montclair NJ 07043

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Writer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845928

Amount of Each Receipt this Period
250.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mrs. Bonnie B Morgan

Mailing Address 205 East Joppa Road #703

City State Zip Code
Towson MD 21286

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1838427

Amount of Each Receipt this Period
50.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1554 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mrs. Carol Schuck Oksala Mailing Address 5 Perth Place City State Zip Code Glenmoore PA 19343 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1840808 Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table> Lois Murphy Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	0	5	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	5		2	0	0	5														
50.00																							
Name of Employer Occupation St. Matthew's Preschool Teacher Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

B. Full Name (Last, First, Middle Initial) Ms. Eleanor Endsley Mailing Address 4970 Boardwalk Pl City State Zip Code Indianapolis IN 46220 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1838081 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Lois Murphy Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	1		2	0	0	5	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	1		2	0	0	5														
100.00																							
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

C. Full Name (Last, First, Middle Initial) Ms. Doris B. Coster Mailing Address 135 Valentine Road City State Zip Code Pomfret Ctr CT 06259 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1840823 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Lois Murphy Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	4		2	0	0	5	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	4		2	0	0	5														
100.00																							
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1555 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Barbara E. Reid		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 201 W. Evergreen Avenue Apt. 610		Transaction ID: 1842993
City Philadelphia State PA Zip Code 19118	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions [MEMO ITEM] MEMO
Name of Employer Self Occupation Psychotherapist	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Eva Apfelbaum		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 92 Foster Street		Transaction ID: 1845250
City Littelton State MA Zip Code 01460	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions [MEMO ITEM] MEMO
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Alexis Berg Marmar		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 200 Locust Street Apt. # 27B		Transaction ID: 1841703
City Philadelphia State PA Zip Code 19106	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions [MEMO ITEM] MEMO
Name of Employer Colonial Penn Life Ins. Co. Occupation Attorney	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1556 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Linda L. Wise		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 4749 Old Post Ct		Transaction ID: 1841648	
City State Zip Code Boulder CO 80301		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions	
Name of Employer Self Occupation Consultant		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Allison F. Brower		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5	
Mailing Address 4745 Espana Court		Transaction ID: 1845263	
City State Zip Code Carmichael CA 95608		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions	
Name of Employer San Juan Unified School Occupation Teacher		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Linda White		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 1120 E. Balboa Boulevard		Transaction ID: 1843552	
City State Zip Code Balboa CA 92661		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions	
Name of Employer Self Occupation Artist		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date 0.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1557 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Jeanne Snodgrass		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 10501 Lagrima De Oro NE		Transaction ID: 1841535
City State Zip Code Albuquerque NM 87111	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Mr. John J. Poplawski		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address 4726 San Feliciano Drive		Transaction ID: 1835661
City State Zip Code Woodland Hills CA 91364	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Sandra S. Laurenson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 5
Mailing Address 937 Trimble Place		Transaction ID: 1837617
City State Zip Code Sagamore Hills OH 44067	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions	
Name of Employer Occupation Education Consultant	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1558 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mrs. Marcia Rider		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address 20 Acacia Way		Transaction ID: 1836934	
City State Zip Code Santa Cruz CA 95062	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions		
Name of Employer Occupation Capitola Book Cafe Bookseller	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Joan Y. Silva-Kniseley		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 1118 West Outer Drive		Transaction ID: 1841791	
City State Zip Code Oak Ridge TN 37830	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions		
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Laurie Barenborg		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 4610 S. Bradford Street		Transaction ID: 1841082	
City State Zip Code Seattle WA 98118	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions		
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1559 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Gustav Papanek		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 2 Mason Street		Transaction ID: 1842094	
City Lexington	State MA	Zip Code 02421	Amount of Each Receipt this Period 75.00
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions	
Name of Employer BIDE	Occupation Economist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

Full Name (Last, First, Middle Initial) B. Ms. Charlotte Moss		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5	
Mailing Address 134 E 71st St		Transaction ID: 1835601	
City New York	State NY	Zip Code 10021	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions	
Name of Employer Self	Occupation Designer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

Full Name (Last, First, Middle Initial) C. Ms. Joan Martini		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 2 Caryl Lane		Transaction ID: 1841706	
City Philadelphia	State PA	Zip Code 19118	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions	
Name of Employer St. Christopher Hosp.	Occupation Social Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1560 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Ann Friend		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 4414 Durant Street, # 111		Transaction ID: 1841779	
City State Zip Code Deer Park TX 77536	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions		
Name of Employer Occupation Calpine Corp. Engineer	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Adalyn S. Brugger		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5	
Mailing Address 1973 Retreat Drive		Transaction ID: 1838231	
City State Zip Code Mechanicsville VA 23111	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions		
Name of Employer Occupation Law Offices of Robert Parkerson lawyer	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Mr. Steve L. Schwartz		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5	
Mailing Address 425 S. Chickasaw Trail #348		Transaction ID: 1840989	
City State Zip Code Orlando FL 32825	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions		
Name of Employer Occupation Self Sales	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1561 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Mignon Adams

Mailing Address 1922 Pemberton Street

City Philadelphia State PA Zip Code 19146

FEC ID number of contributing federal political committee. **C**

Name of Employer U of PA Occupation Librarian

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836376

Amount of Each Receipt this Period
50.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Rosemary Vimont

Mailing Address 1922 Oregon Street

City Berkeley State CA Zip Code 94703

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841627

Amount of Each Receipt this Period
50.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Fred Golding

Mailing Address 1113 Emeral Bay

City Laguna Beach State CA Zip Code 92655

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 5

Transaction ID: 1845274

Amount of Each Receipt this Period
60.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1562 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. Jonathan Salomon Mailing Address 192 Waterman St # 3 City State Zip Code Providence RI 02906 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5 Transaction ID: 1835667 Amount of Each Receipt this Period 50.00 Lois Murphy Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Boston University Graduate Student Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Susan Borke Mailing Address 4102 38th St NW City State Zip Code Washington DC 20016 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5 Transaction ID: 1836882 Amount of Each Receipt this Period 50.00 Lois Murphy Contributions [MEMO ITEM] MEMO
Name of Employer Occupation National Geographic Attorney Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Lisa B. Arbeiter Mailing Address P.O. Box 311 City State Zip Code Metuchen NJ 08840 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5 Transaction ID: 1844860 Amount of Each Receipt this Period 25.00 Lois Murphy Contributions [MEMO ITEM] MEMO
Name of Employer Occupation NATO Software Engineer Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1563 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Gloria Deison Mailing Address 1311 Peacefield Place City Tallahassee State FL Zip Code 32308 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5 Transaction ID: 1838458 Amount of Each Receipt this Period 100.00 Lois Murphy Contributions [MEMO ITEM] MEMO
Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Robin Hanes Mailing Address 191 Lynn Cove Road City Asheville State NC Zip Code 28804 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5 Transaction ID: 1845303 Amount of Each Receipt this Period 250.00 Lois Murphy Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Self Artist/Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Mrs. Janice Doxtator Mailing Address 1909 Plover Street City Stevens Point State WI Zip Code 54481 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Transaction ID: 1841560 Amount of Each Receipt this Period 100.00 Lois Murphy Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Portage Co. Pub. Library Librarian Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1564 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Amicie Sade Zimmerman

Mailing Address 40 Wooltown Road

City State Zip Code
Wernersville PA 19565

FEC ID number of contributing federal political committee. **C**

Name of Employer Home Health Care Mgt Inc Occupation VP Human Resource Facil

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838211

Amount of Each Receipt this Period
250.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Susan B. Fisher

Mailing Address 40 Woodside Avenue

City State Zip Code
Westport CT 06880

FEC ID number of contributing federal political committee. **C**

Name of Employer MUSEUM OF TV & RADIO Occupation EXECUTIVE

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844846

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Margaret Davey

Mailing Address 4 Woodland Crescent

City State Zip Code
South Orange NJ 07079

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838207

Amount of Each Receipt this Period
25.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1565 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Beatrice Nold		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 5954-3B Autumnwood Drive		Transaction ID: 1837368	
City Walnut Creek	State CA	Zip Code 94595	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions	
Name of Employer	Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Ms. Kristin W. Olsson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5	
Mailing Address 11127 Midway Road		Transaction ID: 1836352	
City Dallas	State TX	Zip Code 75229	Amount of Each Receipt this Period 5.00
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions	
Name of Employer Worshan, Fortsythe & Wol	Occupation Legal Assitant	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Dorothy G. Whitmore		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5	
Mailing Address 1309 N. Clayton Street		Transaction ID: 1838523	
City Wilmington	State DE	Zip Code 19806	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions	
Name of Employer	Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1566 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Roberta Ballard

Mailing Address PO Box 1022

City State Zip Code
Bodega Bay CA 94923

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
U of Penn Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838205

Amount of Each Receipt this Period
250.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Elinor Finkelstein

Mailing Address 1307 Stotesbury Avenue

City State Zip Code
Wyndmoor PA 19038

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842987

Amount of Each Receipt this Period
25.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Victoria H. Lowell

Mailing Address 188 Sippewissett Road

City State Zip Code
Falmouth MA 02540

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Barnstable County County Commissioner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844784

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1567 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Jennifer S. Whitaker		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5	
Mailing Address 39 5th Avenue		Transaction ID: 1835594	
City State Zip Code New York NY 10003	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions		
Name of Employer SELF Occupation WRITER	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date 0.00		

Full Name (Last, First, Middle Initial) B. Ms. Clair A. Sharpless		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address 1 Drumlin Road		Transaction ID: 1836867	
City State Zip Code West Simsbury CT 06092	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions		
Name of Employer Occupation Homemaker	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Barbara Lawrence		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5	
Mailing Address 383 South Middlebush Road		Transaction ID: 1836399	
City State Zip Code Somerset NJ 08873	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions		
Name of Employer Self Occupation Consultant	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1568 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Arlene R. Popkin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 307 Knollwood Road Ext		Transaction ID: 1836812
City Elmsford State NY Zip Code 10523	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions [MEMO ITEM] MEMO
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Mr. Clark M. Simms		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 1 Breezy Hill Road		Transaction ID: 1844804
City Copake Falls State NY Zip Code 12517	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions [MEMO ITEM] MEMO
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Dr. Frances Reiner Lax		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 185 Medford Leas		Transaction ID: 1841740
City Medford State NJ Zip Code 08055	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions [MEMO ITEM] MEMO
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1569 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Samona Sheppard

Mailing Address 1301 N Tamiami Trl Apt 713

City State Zip Code
Sarasota FL 34236

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1844528

Amount of Each Receipt this Period
25.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Patricia G. Miller

Mailing Address 6015 Wellesley Avenue

City State Zip Code
Pittsburgh PA 15206

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Reed,Smith,Shaw&McClay Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837207

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Dr. Sharon M. Stein

Mailing Address 1035 Leonello Avenue

City State Zip Code
Los Altos CA 94024

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TPMG Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 1 / 2 0 0 5

Transaction ID: 1835029

Amount of Each Receipt this Period
25.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1570 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Nancy E Anderson

Mailing Address 23 Teresa Road

City State Zip Code
Hopkinton MA 01748

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation writer/organizer

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1843629

Amount of Each Receipt this Period
50.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mrs. Joan M. Wendling

Mailing Address 11089 VanKal Ave.

City State Zip Code
Lawton MI 49065

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation medical transcriptionist

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845878

Amount of Each Receipt this Period
50.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mrs. Susanna Davison

Mailing Address 1301 Irving Avenue

City State Zip Code
Wheaton IL 60187

FEC ID number of contributing federal political committee. **C**

Name of Employer Health Dept. Occupation Nursing Manager

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836299

Amount of Each Receipt this Period
50.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1571 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Jeannine Koessel

Mailing Address 18064 N. Somerset Drive

City Surprise State AZ Zip Code 85374

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
10 / 04 / 2005

Transaction ID: 1836913

Amount of Each Receipt this Period
25.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Katherine Simpson

Mailing Address 1001 Spring Street, Apt. 805

City Silver Spring State MD Zip Code 20910

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
10 / 14 / 2005

Transaction ID: 1841087

Amount of Each Receipt this Period
25.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Suzanne Seubert

Mailing Address PO Box 174

City Wilmington State DE Zip Code 19899

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Lawyer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
10 / 04 / 2005

Transaction ID: 1836773

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1572 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Catherine C. Gerhold		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5	
Mailing Address 1804 Wightman Street		Transaction ID: 1838162	
City State Zip Code Pittsburgh PA 15217	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions		
Name of Employer Self/Allegheeny Occupation Homemaker/Lawyer	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Mr. John O'Toole		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5	
Mailing Address 3601 Connecticut Avenue NW # 410		Transaction ID: 1845298	
City State Zip Code Washington DC 20008	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions		
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Virginia Mattson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 3517 17th Way SE		Transaction ID: 1840842	
City State Zip Code Olympia WA 98501	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1573 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Sally L Kuder

Mailing Address 10 Elmwood Ave

City Narberth State PA Zip Code 19072

FEC ID number of contributing federal political committee. **C**

Name of Employer U.S. Navy Occupation Accountant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 5

Transaction ID: 1844788

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Marie Louis Blount

Mailing Address 35 Young Avenue

City Croton Hdsn State NY Zip Code 10520

FEC ID number of contributing federal political committee. **C**

Name of Employer New York University Occupation Associate Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845922

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Richard C. Foust

Mailing Address 180 N. 4th Street, Apt. 607

City San Jose State CA Zip Code 95112

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Architect

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1844523

Amount of Each Receipt this Period
50.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1574 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. Kenneth W. Salinger		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 5
Mailing Address 18 Putnam Road		Transaction ID: 1837619
City Arlington	State MA	Zip Code 02474
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Palmer & Dodge LLP	Occupation Lawyer	Lois Murphy Contributions
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	[MEMO ITEM] MEMO

B. Full Name (Last, First, Middle Initial) Ms. Laura E. Watson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 6144 Fremont Circle		Transaction ID: 1837327
City Camarillo	State CA	Zip Code 93012
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Self	Occupation Clinical Social Worker	Lois Murphy Contributions
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	[MEMO ITEM] MEMO

C. Full Name (Last, First, Middle Initial) Mrs. Ann M. Hamory		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 18 Erin Drive		Transaction ID: 1836766
City Danville	State PA	Zip Code 17821
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation homemaker	Lois Murphy Contributions
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	[MEMO ITEM] MEMO

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1575 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Alice R. Burks

Mailing Address 3445 Vintage Valley Road

City State Zip Code
Ann Arbor MI 48105

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Writer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838180

Amount of Each Receipt this Period
50.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. Gerrish H. Milliken

Mailing Address PO Box 1880

City State Zip Code
Oroville WA 98844

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1844508

Amount of Each Receipt this Period
500.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Dr. Estelle K. Meislich

Mailing Address 338 Lacey Drive

City State Zip Code
New Milford NJ 07646

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838470

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ► **0.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1576 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Roy A Ickes

Mailing Address 1274 Overlook Drive

City State Zip Code
Washington PA 15301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
W & J College Biology Professor

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836380

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Barbara Berney

Mailing Address 624 E 20th St Apt 1D

City State Zip Code
New York NY 10009

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Environmental League of MA Administrator

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837194

Amount of Each Receipt this Period
50.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Mary T. Zeis

Mailing Address 335 Whispering Pines

City State Zip Code
Loveland OH 45140

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Procter & Gamble Chemical Engineer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836336

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1577 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Robert F. Hartmann		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address 335 Via Concha		Transaction ID: 1837832
City State Zip Code Aptos CA 95003	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions	
Name of Employer Occupation Hartmann & Miller Lawyer	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Mr. Richard Toole		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address PO Box 256		Transaction ID: 1841579
City State Zip Code Oak Bluffs MA 02557	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions	
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Mr. Joel Ginzberg		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address PO Box 873		Transaction ID: 1835638
City State Zip Code Stone Ridge NY 12484	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions	
Name of Employer Occupation self, semi-retired Psychologist	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1578 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mrs. Ruth Gottlieb		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address 3300 Darby Rd Apt 5213		Transaction ID: 1836372
City State Zip Code Haverford PA 19041	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Ruth R. Hailperin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 175 W. North Street, Apt. 234C		Transaction ID: 1843530
City State Zip Code Nazaret PA 18064	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Mary G Favaro		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 5
Mailing Address 626 14th Ave East		Transaction ID: 1841063
City State Zip Code Seattle WA 98112	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions	
Name of Employer Occupation businesswoman	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1579 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Margaret Poole

Mailing Address 33 Sunset Road

City State Zip Code
Wayland MA 01778

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Mitre Corp. Elec. Engr.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836397

Amount of Each Receipt this Period
50.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Elaine Togneri

Mailing Address 33 Middlesex Blvd

City State Zip Code
Monroe Twp NJ 08831

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836384

Amount of Each Receipt this Period
50.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Rhoda L. Honigman

Mailing Address PO Box 294

City State Zip Code
Oilville VA 23129

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: 1837823

Amount of Each Receipt this Period
300.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1580 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Bernice Weissbourd		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address PO Box 410		Transaction ID: 1837223	
City Winnetka	State IL	Zip Code 60093	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions	
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] MEMO	

Full Name (Last, First, Middle Initial) B. Mr. Charles A. Waldren		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 644 Spindlewood Ferrington Post		Transaction ID: 1841072	
City Pittsboro	State NC	Zip Code 27312	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions	
Name of Employer Natl Acda. Science Occupation Scientist	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] MEMO	

Full Name (Last, First, Middle Initial) C. Ms. Lynette B. Reilly		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 12516 Davan Drive		Transaction ID: 1844517	
City Silver Spring	State MD	Zip Code 20904	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions	
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] MEMO	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1581 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Robert M. Lande

Mailing Address 325 Central Park W.

City State Zip Code
New York NY 10025

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842924

Amount of Each Receipt this Period
50.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. Arthur Lazarus, Jr.

Mailing Address 3201 Fessenden Street, N.W.

City State Zip Code
Washington DC 20008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Sonosky, Chambers Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843536

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Louise H. McCagg

Mailing Address 32 Washington Square West #11W

City State Zip Code
New York NY 10011

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Sculptor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842978

Amount of Each Receipt this Period
500.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1582 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Prof. Robert F. Meagher		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5	
Mailing Address 108 Curtis Street		Transaction ID: 1837847	
City State Zip Code Somerville MA 02144	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Ms. Lorette Zirker		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5	
Mailing Address PO Box 249		Transaction ID: 1836324	
City State Zip Code High Rolls NM 88325	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Sheila Gershen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address PO Box 292		Transaction ID: 1844829	
City State Zip Code Santa Fe NM 87504	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1583 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Cynthia S. Schmidt

Mailing Address 329 S Shelley Lake Ln

City State Zip Code
Spokane Valley WA 99037

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 5

Transaction ID: 1844634

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Gretchen E. Keiser

Mailing Address PO Box 21883

City State Zip Code
Juneau AK 99802

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
State of Alaska Program Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837114

Amount of Each Receipt this Period
25.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Katha Pollitt

Mailing Address 317 West 93rd Street, #4A

City State Zip Code
New York NY 10025

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
The Nation Writer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836364

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1584 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Dennis White

Mailing Address PO Box 540127

City State Zip Code
Dallas TX 75354

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Investor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: 1837765

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Diane E. Grotz

Mailing Address 1241 Huron Road

City State Zip Code
North Brunswick NJ 08902

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Schering Plough Inc Scientist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 5

Transaction ID: 1835180

Amount of Each Receipt this Period
25.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. John M. Wolf, Jr.

Mailing Address PO Box 1429

City State Zip Code
Sanibel FL 33957

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836928

Amount of Each Receipt this Period
50.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1585 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Carol Nechemias

Mailing Address 314 Oak Hill Drive

City Middletown State PA Zip Code 17057

FEC ID number of contributing federal political committee. **C**

Name of Employer Penn. State University Occupation Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844775

Amount of Each Receipt this Period
250.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Barbara Matthews

Mailing Address PO Box 10553

City Fairbanks State AK Zip Code 99710

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837111

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Sheridan Harvey

Mailing Address 110 6th Street SE # 303

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C**

Name of Employer Library of Congress Occupation Librarian

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1841570

Amount of Each Receipt this Period
50.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1586 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Audrey Miller

Mailing Address P.O. Box 888

City State Zip Code
Ferndale CA 95536

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1841710

Amount of Each Receipt this Period
60.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. Andrew Carson

Mailing Address PO Box 709

City State Zip Code
Wilson WY 83014

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Cony Corp mtn guide

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 1 / 2 0 0 5

Transaction ID: 1835096

Amount of Each Receipt this Period
25.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Rosemary Rowan

Mailing Address 666 Upas Street Unit 404

City State Zip Code
San Diego CA 92103

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Belt Collins Hawaii Urban Planner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845851

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1587 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Barbara Boley Adelman

Mailing Address P.O. Box 225

City State Zip Code
Moro IL 62067

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
International Institute - St. Louis ESL Specialist

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838026

Amount of Each Receipt this Period
500.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Patsy Rogers

Mailing Address PO Box 616

City State Zip Code
New Suffolk NY 11956

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Composer/Teacher

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842973

Amount of Each Receipt this Period
250.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Ingrid Heide

Mailing Address 305 E. 24th Street

City State Zip Code
New York NY 10010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841638

Amount of Each Receipt this Period
15.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ► 0.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1588 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Patti Kile

Mailing Address E3412 Bunker Road

City State Zip Code
Waupaca WI 54981

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Thedacare Waupaca Healthcare

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837232

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Mary Sue Ittner

Mailing Address Bob Rutemoeller
P.O. Box 587

City State Zip Code
Gualala CA 95445

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Financial Planner/Volunteer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838502

Amount of Each Receipt this Period
50.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Penelope A. Taylor

Mailing Address 1643 Seacayne Blvd.

City State Zip Code
Aptos CA 95003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836930

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1589 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Dr. Sharon Rae Jenkins

Mailing Address 301 Coronado Dr Apt 1004

City State Zip Code
Denton TX 76209

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
University of North Texas Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1841543

Amount of Each Receipt this Period
250.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Sue C. Hansen

Mailing Address 6927 Fairmount Avenue

City State Zip Code
El Cerrito CA 94530

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
STATE OF CALIFORNIA Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844794

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Paul D. Petrich, Jr.

Mailing Address 945 Ward Drive
Apartment 78

City State Zip Code
Santa Barbara CA 93111

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1844535

Amount of Each Receipt this Period
500.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1590 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Barbara J. Corwin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 1230 Winding Ridge Terrace		Transaction ID: 1841551
City State Zip Code Colorado Springs CO 80919	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions [MEMO ITEM] MEMO
Name of Employer Sun Microsystems	Occupation Software Engineering Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Susan Thomas		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5
Mailing Address 1622 Locust Street		Transaction ID: 1838474
City State Zip Code Philadelphia PA 19103	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions [MEMO ITEM] MEMO
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Mr. Peter A. Politzer		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address 701 Kettner Blvd. #53		Transaction ID: 1837806
City State Zip Code San Diego CA 92101	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Lois Murphy Contributions [MEMO ITEM] MEMO
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1591 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Nancy N. Driscoll

Mailing Address 1620 Lombardi Rd

City State Zip Code
Mount Shasta CA 96067

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842952

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Margret Jacoby

Mailing Address 912 Blossom Drive

City State Zip Code
Santa Clara CA 95050

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841641

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Craig Bartelt

Mailing Address 1751 Buckingham Road

City State Zip Code
Los Angeles CA 90019

FEC ID number of contributing federal political committee. **C**

Name of Employer Sony Pictures Occupation Administrator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836897

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1592 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Matthew Morris

Mailing Address PO Box 9157

City State Zip Code
Aspen CO 81612

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FRD Project Inc Butler/Chef

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844759

Amount of Each Receipt this Period
5.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Karen J. Keefer

Mailing Address 705 Chesapeake Avenue

City State Zip Code
Silver Spring MD 20910

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FEMA Em Mgmt Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841679

Amount of Each Receipt this Period
50.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Dorothy L. Flaster

Mailing Address 1760 East Valley Road

City State Zip Code
Montecito CA 93108

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842931

Amount of Each Receipt this Period
50.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1593 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Janet Krack

Mailing Address 8774 Laurel Drive

City Erie State PA Zip Code 16509

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843577

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Ann K. Maddox

Mailing Address 289 Deer Path Ln

City Battle Creek State MI Zip Code 49015

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838486

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mrs. Catherine Manz Smith

Mailing Address 85316 Coyote Creek Road

City Veneta State OR Zip Code 97487

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1841736

Amount of Each Receipt this Period
250.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1594 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Alicia Granor		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 5
Mailing Address 1600 Hagys Ford Road, # 6F		Transaction ID: 1843029
City State Zip Code Narberth PA 19072	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions	
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Patricia B. Wallace		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 831 Moonlight Drive		Transaction ID: 1841781
City State Zip Code York PA 17402	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions	
Name of Employer Occupation Lincoln Intermediate Unit 2 Case Manager	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Joan Steele		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 332 Glenn Street		Transaction ID: 1841043
City State Zip Code Ashland OR 97520	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C	Lois Murphy Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1595 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Rev. Gordon D. Gibson

Mailing Address 821 Hiawatha Drive

City Elkhart State IN Zip Code 46517

FEC ID number of contributing federal political committee. **C**

Name of Employer Unitarian Occupation Clergy

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841682

Amount of Each Receipt this Period
25.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. George Y. Sodowick

Mailing Address 28 Mountain Ridge Drive

City Livingston State NJ Zip Code 07039

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845872

Amount of Each Receipt this Period
100.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Andrew Carson

Mailing Address PO Box 709

City Wilson State WY Zip Code 83014

FEC ID number of contributing federal political committee. **C**

Name of Employer Cony Corp Occupation mtn guide

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1835645

Amount of Each Receipt this Period
25.00

Lois Murphy Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1596 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Constance Greenfield		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5	
Mailing Address 279 Sturges Highway		Transaction ID: 1845270	
City State Zip Code Westport CT 06880	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Lynn Woolsey Contribution		
Name of Employer Occupation Occupation Homemaker	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Julie Peppard		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5	
Mailing Address 1094 Palms Blvd		Transaction ID: 1838037	
City State Zip Code Venice CA 90291	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Lynn Woolsey Contribution		
Name of Employer Occupation Gartner & Young Secretary	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Jennifer Berlekamp		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 120 Hazel Lane		Transaction ID: 1843544	
City State Zip Code Piedmont CA 94611	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Lynn Woolsey Contribution		
Name of Employer Occupation Occupation Housewife/Volunteer	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1597 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Garry L. Cox

Mailing Address 2620 California Avenue

City State Zip Code
Carmichael CA 95608

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Bethany Pres. Church Pastor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844789

Amount of Each Receipt this Period
200.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Elizabeth A. Jackets

Mailing Address 7306 Channel View Drive

City State Zip Code
Anacortes WA 98221

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837406

Amount of Each Receipt this Period
10.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Anne C. Tiracchia

Mailing Address 725 Scott Street

City State Zip Code
Stroudsburg PA 18360

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844857

Amount of Each Receipt this Period
50.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1598 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Lou H. Bell

Mailing Address 7214 Corregidor Road

City State Zip Code
Vancouver WA 98664

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845863

Amount of Each Receipt this Period
100.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Barbara S. Bayless

Mailing Address 71 Faculty Place

City State Zip Code
Wilmington OH 45177

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837401

Amount of Each Receipt this Period
100.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Judy Dorn

Mailing Address 708 14th Avenue S.

City State Zip Code
Saint Cloud MN 56301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1838432

Amount of Each Receipt this Period
30.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1599 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Karen J. Keefer		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 705 Chesapeake Avenue		Transaction ID: 1841678	
City State Zip Code Silver Spring MD 20910	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Lynn Woolsey Contribution	
Name of Employer Occupation FEMA Em Mgmt Specialist	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Katherine Read		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address 75 Nehoiden Road		Transaction ID: 1844821	
City State Zip Code Waban MA 02468	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Lynn Woolsey Contribution	
Name of Employer Occupation Homemaker	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Sue C. Hansen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address 6927 Fairmount Avenue		Transaction ID: 1844795	
City State Zip Code El Cerrito CA 94530	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Lynn Woolsey Contribution	
Name of Employer Occupation STATE OF CALIFORNIA Attorney	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1600 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Anita Wornick

Mailing Address 765 Market Street
#25A

City San Francisco State CA Zip Code 94103

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836947

Amount of Each Receipt this Period
25.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mrs. Daniel J. Schlesinger

Mailing Address 6633 Forest Avenue

City Hammond State IN Zip Code 46324

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838030

Amount of Each Receipt this Period
40.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Prof. Robert F. Meagher

Mailing Address 108 Curtis Street

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: 1837846

Amount of Each Receipt this Period
10.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1601 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Alice C. Katzung		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 65 Knoll Road		Transaction ID: 1837211	
City State Zip Code San Rafael CA 94901	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Lynn Woolsey Contribution		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Mrs. Irving Schulman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5	
Mailing Address 1483 Sutter Street, Apt. 1707		Transaction ID: 1838530	
City State Zip Code San Francisco CA 94109	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Lynn Woolsey Contribution		
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Ruth J. Fink-Winter		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 24 5th Avenue NE		Transaction ID: 1836682	
City State Zip Code Le Mars IA 51031	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C	Lynn Woolsey Contribution		
Name of Employer Occupation Wells' Dairy Engineer	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1602 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Alan M. Solinger		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 1465 65th St Apt 253		Transaction ID: 1841030
City State Zip Code Emeryville CA 94608	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Lynn Woolsey Contribution	
Name of Employer Amgen Inc. Occupation Physician	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Jerrilyn Kaplan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 271 Oyster Pond Road		Transaction ID: 1841744
City State Zip Code Alameda CA 94502	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Lynn Woolsey Contribution	
Name of Employer San Lorenzo Unified Schools Occupation Teacher	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Jilma Marshall		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5
Mailing Address 608 Steiner Street		Transaction ID: 1838055
City State Zip Code San Francisco CA 94117	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C	Lynn Woolsey Contribution	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date 0.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1603 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Evelyn Bernice Haynes

Mailing Address 2303 Owens Ave Unit 101

City State Zip Code
Fort Collins CO 80528

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838495

Amount of Each Receipt this Period
25.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. Hugh M. Jackson

Mailing Address 6035 W Mansfield Ave Unit 247

City State Zip Code
Denver CO 80235

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845884

Amount of Each Receipt this Period
25.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Sheila Toabe Davis

Mailing Address 7913 Vantage Avenue

City State Zip Code
North Hollywood CA 91605

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Bet Tzedek Secretary

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1844480

Amount of Each Receipt this Period
50.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1604 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Grace Radin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address 107 River Road		Transaction ID: 1835623
City State Zip Code Nyack NY 10960	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Lynn Woolsey Contribution	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Shirley Gleich		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5
Mailing Address 8116 Pine Circle		Transaction ID: 1838115
City State Zip Code Tamarac FL 33321	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Lynn Woolsey Contribution	
Name of Employer Occupation Homemaker	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Kathleen Commons		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 5849 Garden Park Court Apt. B		Transaction ID: 1844512
City State Zip Code Carmichael CA 95608	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Lynn Woolsey Contribution	
Name of Employer Occupation Managed Care Sgs. Inc. Admin. Assoc.	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1605 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Joan F. Green

Mailing Address 555 Laurel Street

City State Zip Code
San Francisco CA 94118

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation educator/consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
10 / 08 / 2005

Transaction ID: 1837605

Amount of Each Receipt this Period
50.00

Lynn Woolsey Contribution

**[MEMO ITEM]
MEMO**

B. Full Name (Last, First, Middle Initial)
Ms. Carol B. Leibman

Mailing Address 100 Diplomat Drive, # 6F

City State Zip Code
Mt. Kisco NY 10549

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
10 / 02 / 2005

Transaction ID: 1834961

Amount of Each Receipt this Period
25.00

Lynn Woolsey Contribution

**[MEMO ITEM]
MEMO**

C. Full Name (Last, First, Middle Initial)
Ms. Mary Ann Frankel

Mailing Address 1 Rochdale Way

City State Zip Code
Berkeley CA 94708

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
10 / 06 / 2005

Transaction ID: 1837369

Amount of Each Receipt this Period
100.00

Lynn Woolsey Contribution

**[MEMO ITEM]
MEMO**

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1606 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Shelley A Carroll

Mailing Address 219 Brannan Street
#1H

City State Zip Code
San Francisco CA 94107

FEC ID number of contributing federal political committee. **C**

Name of Employer Formerly U.C.S.F. Occupation Retired Registered Nurse

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1835634

Amount of Each Receipt this Period
25.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mrs. Claire Amendola

Mailing Address 527 Fulton Lane

City State Zip Code
Saint Helena CA 94574

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1841747

Amount of Each Receipt this Period
25.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Sadie W. Taylor

Mailing Address 115 Kendal Drive

City State Zip Code
Oberlin OH 44074

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838046

Amount of Each Receipt this Period
100.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1607 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Mary Lee Field

Mailing Address 515 N. Fifth

City State Zip Code
Wilmington NC 28401

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Wayne State University Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838173

Amount of Each Receipt this Period
50.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Linda Lee Alter

Mailing Address 210 W Rittenhouse Square
Apartment 1506

City State Zip Code
Philadelphia PA 19103

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Artist/Philanthropist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837186

Amount of Each Receipt this Period
2100.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Joan V. Laskoff

Mailing Address 515 E 89th Street

City State Zip Code
New York NY 10128

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1844492

Amount of Each Receipt this Period
100.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1608 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Ann Wansley

Mailing Address 51 Chula Lane

City State Zip Code
San Francisco CA 94114

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1841604

Amount of Each Receipt this Period
50.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Margaret Goodman

Mailing Address 51 Broomall Lane

City State Zip Code
Glen Mills PA 19342

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837159

Amount of Each Receipt this Period
100.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Karen Sundback

Mailing Address 21 Kenmore Road

City State Zip Code
Bloomfield CT 06002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836265

Amount of Each Receipt this Period
200.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1609 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Marsha L. Richins		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5	
Mailing Address 508 S Glenwood Ave		Transaction ID: 1837865	
City State Zip Code Columbia MO 65203	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Lynn Woolsey Contribution	
Name of Employer Occupation University of Missouri Professor	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Debora Kailing		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5	
Mailing Address 505 Cypress Ave		Transaction ID: 1841586	
City State Zip Code Ukiah CA 95482	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Lynn Woolsey Contribution	
Name of Employer Occupation Civil Engineer Pacific Conslt. Engrs. Inc.	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Carol Kuller		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 137 Great Barrington Road		Transaction ID: 1842477	
City State Zip Code West Stockbridge MA 01266	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Lynn Woolsey Contribution	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1610 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Ida Braun		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 1 Baldwin Avenue, Apt. 709		Transaction ID: 1836874
City State Zip Code San Mateo CA 94401	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Lynn Woolsey Contribution	
Name of Employer Occupation Occupation REQUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Dr. Jape Taylor		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 500 N.W. 80th Boulevard		Transaction ID: 1837181
City State Zip Code Gainesville FL 32607	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Lynn Woolsey Contribution	
Name of Employer Occupation Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Mr. Christopher Maurer		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 205 N3 Carpenter Road SE		Transaction ID: 1843594
City State Zip Code Lacey WA 98503	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Lynn Woolsey Contribution	
Name of Employer Occupation State of WA Occupation Scientist	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1611 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Dr. Donald G. Johnson

Mailing Address 5 W. Oak Street

City Ramsey State NJ Zip Code 07446

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837363

Amount of Each Receipt this Period
50.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Doris B. Coster

Mailing Address 135 Valentine Road

City Pomfret Ctr State CT Zip Code 06259

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1840824

Amount of Each Receipt this Period
100.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Barbara S. Woodward

Mailing Address 10559 Bragg Avenue

City Grass Valley State CA Zip Code 95945

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836906

Amount of Each Receipt this Period
50.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1612 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Genevra K Loveland

Mailing Address 4801 Connecticut Ave. NW
212

City State Zip Code
Washington DC 20008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Federal Judicial Center Attorney-Producer

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1836699

Amount of Each Receipt this Period
35.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. Marc Helgenberger

Mailing Address 200 Park Avenue South
8th Floor

City State Zip Code
New York NY 10003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 5

Transaction ID: 1845244

Amount of Each Receipt this Period
100.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Linda L. Wise

Mailing Address 4749 Old Post Ct

City State Zip Code
Boulder CO 80301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Consultant

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841649

Amount of Each Receipt this Period
100.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1613 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Bill Ritchey, Jr.

Mailing Address 47479 Marrakesh Drive

City State Zip Code
Palm Desert CA 92260

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845879

Amount of Each Receipt this Period
50.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mrs. Helen F. Rich

Mailing Address 200 Leeder Hill Dr Apt 317

City State Zip Code
Hamden CT 06517

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838480

Amount of Each Receipt this Period
15.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Allison F. Brower

Mailing Address 4745 Espana Court

City State Zip Code
Carmichael CA 95608

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
San Juan Unified School Teacher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 5

Transaction ID: 1845265

Amount of Each Receipt this Period
50.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ► **0.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1614 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. John J. Poplawski

Mailing Address 4726 San Feliciano Drive

City State Zip Code
Woodland Hills CA 91364

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1835663

Amount of Each Receipt this Period
50.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Marguerite Jehle

Mailing Address 4717 Collinos Way

City State Zip Code
Oceanside CA 92056

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836919

Amount of Each Receipt this Period
100.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mrs. Marcia Rider

Mailing Address 20 Acacia Way

City State Zip Code
Santa Cruz CA 95062

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Capitola Book Cafe Bookseller

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836935

Amount of Each Receipt this Period
100.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1615 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Annetta M. Dillon		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 4652 North Ila Avenue		Transaction ID: 1836789
City State Zip Code Fresno CA 93705	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Lynn Woolsey Contribution	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Linda Wise		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 4614 W. Feemster Avenue		Transaction ID: 1841078
City State Zip Code Visalia CA 93277	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Lynn Woolsey Contribution	
Name of Employer Occupation Tulane County RN	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Laurie Barenborg		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 4610 S. Bradford Street		Transaction ID: 1841083
City State Zip Code Seattle WA 98118	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Lynn Woolsey Contribution	
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1616 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Charlotte Moss

Mailing Address 134 E 71st St

City State Zip Code
New York NY 10021

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Designer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
10 / 03 / 2005

Transaction ID: 1835603

Amount of Each Receipt this Period
250.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Dr. Gustav Papanek

Mailing Address 2 Mason Street

City State Zip Code
Lexington MA 02421

FEC ID number of contributing federal political committee. **C**

Name of Employer BIDE Occupation Economist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2005

Transaction ID: 1842092

Amount of Each Receipt this Period
75.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Joan T. Werner

Mailing Address 4594 Euclid Avenue

City State Zip Code
San Diego CA 92115

FEC ID number of contributing federal political committee. **C**

Name of Employer San Diego State U Occupation Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
10 / 14 / 2005

Transaction ID: 1841656

Amount of Each Receipt this Period
20.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1617 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Vivian S. Lamb

Mailing Address 13382 Fairmont Way

City State Zip Code
Santa Ana CA 92705

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838044

Amount of Each Receipt this Period
100.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Dolores Andrus

Mailing Address 1975 Bacon Avenue

City State Zip Code
Berkley MI 48072

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Detroit Theater Actor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1844476

Amount of Each Receipt this Period
50.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Ann Friend

Mailing Address 4414 Durant Street, # 111

City State Zip Code
Deer Park TX 77536

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Calpine Corp. Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1841778

Amount of Each Receipt this Period
25.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1618 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Steve L. Schwartz		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address 425 S. Chickasaw Trail #348		Transaction ID: 1840991
City State Zip Code Orlando FL 32825	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Lynn Woolsey Contribution	
Name of Employer Self Occupation Sales	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Joan Hull		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address 193 San Andreas Drive		Transaction ID: 1835588
City State Zip Code Novato CA 94945	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Lynn Woolsey Contribution	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Alice Littlefield		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 13151 E. Isthmus		Transaction ID: 1836831
City State Zip Code Omena MI 49674	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Lynn Woolsey Contribution	
Name of Employer Central Michigan University Occupation Professor	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1619 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Susan G. Morrison

Mailing Address 4205 Ramsey Avenue

City State Zip Code
Austin TX 78756

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1841527

Amount of Each Receipt this Period
25.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. Fred Golding

Mailing Address 1113 Emeral Bay

City State Zip Code
Laguna Beach CA 92655

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 5

Transaction ID: 1845277

Amount of Each Receipt this Period
60.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Suzanne M. Angevine

Mailing Address 4160 26th Street

City State Zip Code
Boulder CO 80304

FEC ID number of contributing federal political committee. **C**

Name of Employer Lucent Technologies Occupation Software Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1841565

Amount of Each Receipt this Period
50.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1620 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Charles L. Goan

Mailing Address 191 Saint Francis Blvd

City State Zip Code
Daly City CA 94015

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838058

Amount of Each Receipt this Period
25.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Gloria Deison

Mailing Address 1311 Peacefield Place

City State Zip Code
Tallahassee FL 32308

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838459

Amount of Each Receipt this Period
100.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Robin Hanes

Mailing Address 191 Lynn Cove Road

City State Zip Code
Asheville NC 28804

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Artist/Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 5

Transaction ID: 1845301

Amount of Each Receipt this Period
250.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ► **0.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1621 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Annabelle L. Cloner

Mailing Address 1909 Skycrest Dr. #11

City State Zip Code
Walnut Creek CA 94595

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844814

Amount of Each Receipt this Period
250.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Mary E. Dimperio

Mailing Address 4000 Cathedral Avenue NW
Apt. 106B

City State Zip Code
Washington DC 20016

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841693

Amount of Each Receipt this Period
100.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Kristin W. Olsson

Mailing Address 11127 Midway Road

City State Zip Code
Dallas TX 75229

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Worshan, Fortsythe & Wol Legal Assitant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836353

Amount of Each Receipt this Period
5.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1622 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Jean Wilcox Mailing Address 1900 Vallejo No. 402 City State Zip Code San Francisco CA 94123 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5 Transaction ID: 1843538 Amount of Each Receipt this Period 100.00 Lynn Woolsey Contribution [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Patricia June Kenney Mailing Address 40 Camino Alto, # 15109 City State Zip Code Mill Valley CA 94941 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5 Transaction ID: 1845462 Amount of Each Receipt this Period 100.00 Lynn Woolsey Contribution [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Dorothy G. Whitmore Mailing Address 1309 N. Clayton Street City State Zip Code Wilmington DE 19806 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5 Transaction ID: 1838522 Amount of Each Receipt this Period 250.00 Lynn Woolsey Contribution [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1623 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Arlene Mitzi Webber Mailing Address 4 Surrey Court City Rancho Mirage State CA Zip Code 92270 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1841588 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="2">100.00</td> </tr> </table> Lynn Woolsey Contribution [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	5	100.00	
M	M	/	D	D	/	Y	Y	Y	Y															
1	0		1	3		2	0	0	5															
100.00																								
Name of Employer Occupation Housewife Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td colspan="2">0.00</td> </tr> </table>		0.00																						
0.00																								

B. Full Name (Last, First, Middle Initial) Dr. Linda F. Farley Mailing Address 2299 Spring Rose Rd. City Verona State WI Zip Code 53593 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1838421 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="2">100.00</td> </tr> </table> Lynn Woolsey Contribution [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	5	100.00	
M	M	/	D	D	/	Y	Y	Y	Y															
1	0		1	3		2	0	0	5															
100.00																								
Name of Employer Occupation Retired M.D. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td colspan="2">0.00</td> </tr> </table>		0.00																						
0.00																								

C. Full Name (Last, First, Middle Initial) Ms. Sally J. French Mailing Address 18776 Jayhawk Drive City Penn Valley State CA Zip Code 95946 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1837188 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="2">25.00</td> </tr> </table> Lynn Woolsey Contribution [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	5		2	0	0	5	25.00	
M	M	/	D	D	/	Y	Y	Y	Y															
1	0		0	5		2	0	0	5															
25.00																								
Name of Employer Occupation Nelson Staffing Services Secretary Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td colspan="2">0.00</td> </tr> </table>		0.00																						
0.00																								

SUBTOTAL of Receipts This Page (optional)	▶	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00			
TOTAL This Period (last page this line number only)	▶	<table border="1"><tr><td></td></tr></table>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1624 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. Peter S. Zetfel		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5
Mailing Address 3840 Elliot Ave. S.		Transaction ID: 1838221
City State Zip Code Minneapolis MN 55407	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Lynn Woolsey Contribution [MEMO ITEM] MEMO
Name of Employer Mpls.publicschools	Occupation Assistant teacher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Janet Gilkeson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 18755 W. Bernardo Drive Apt. 1331		Transaction ID: 1843003
City State Zip Code San Diego CA 92127	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Lynn Woolsey Contribution [MEMO ITEM] MEMO
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Jacqueline A. Franco		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 18616 N. 99th Avenue Apt. 1064		Transaction ID: 1837173
City State Zip Code Sun City AZ 85373	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Lynn Woolsey Contribution [MEMO ITEM] MEMO
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1625 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Jerilyn A. Gelt		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5
Mailing Address 1860 Jackson Street Apt. 502		Transaction ID: 1838158
City State Zip Code San Francisco CA 94109	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Lynn Woolsey Contribution	
Name of Employer Public Employment Relati Occupation Labor Relations Specialist	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Samona Sheppard		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 1301 N Tamiami Trl Apt 713		Transaction ID: 1844529
City State Zip Code Sarasota FL 34236	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Lynn Woolsey Contribution	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Dr. Sharon M. Stein		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 5
Mailing Address 1035 Leonello Avenue		Transaction ID: 1835027
City State Zip Code Los Altos CA 94024	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Lynn Woolsey Contribution	
Name of Employer TPMG Occupation Physician	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1626 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Joshua Rowan

Mailing Address 3800 Lake Bayshore Dr Apt 101

City State Zip Code
Bradenton FL 34205

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836949

Amount of Each Receipt this Period
25.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Katherine Simpson

Mailing Address 1001 Spring Street, Apt. 805

City State Zip Code
Silver Spring MD 20910

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841088

Amount of Each Receipt this Period
25.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Linda Manry

Mailing Address 18179 Bancroft Avenue

City State Zip Code
Monte Sereno CA 95030

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1835631

Amount of Each Receipt this Period
100.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1627 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Nancy E Anderson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 23 Teresa Road		Transaction ID: 1843627
City State Zip Code Hopkinton MA 01748	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Lynn Woolsey Contribution	
Name of Employer retired Occupation writer/organizer	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Eugenia M. Durdall		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 1812 Edgewood Lane		Transaction ID: 1843498
City State Zip Code Menlo Park CA 94025	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Lynn Woolsey Contribution	
Name of Employer Occupation Homemaker	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Karlene K. Bergold		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 1811 Sheridan Avenue		Transaction ID: 1841093
City State Zip Code San Diego CA 92103	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Lynn Woolsey Contribution	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1628 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Catherine C. Gerhold

Mailing Address 1804 Wightman Street

City State Zip Code
Pittsburgh PA 15217

FEC ID number of contributing federal political committee. **C**

Name of Employer Self/Allegheeny Occupation Homemaker/Lawyer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838161

Amount of Each Receipt this Period
200.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Leal Abbott

Mailing Address 359 Quail Drive

City State Zip Code
Woodland CA 95695

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 5

Transaction ID: 1845258

Amount of Each Receipt this Period
50.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Dr. Edith P Mendez

Mailing Address 1168 Santa Cruz Way

City State Zip Code
Rohnert Park CA 94928

FEC ID number of contributing federal political committee. **C**

Name of Employer Sonoma State University Occupation Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836316

Amount of Each Receipt this Period
250.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1629 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. Richard C. Foust Mailing Address 180 N. 4th Street, Apt. 607 City San Jose State CA Zip Code 95112 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5 Transaction ID: 1844522 Amount of Each Receipt this Period 50.00 Lynn Woolsey Contribution [MEMO ITEM] MEMO
Name of Employer Self Occupation Architect Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Barbara Berney Mailing Address 624 E 20th St Apt 1D City New York State NY Zip Code 10009 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5 Transaction ID: 1837195 Amount of Each Receipt this Period 50.00 Lynn Woolsey Contribution [MEMO ITEM] MEMO
Name of Employer Environmental League of MA Occupation Administrator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Shelley G. Carton Mailing Address 3373 W. Millwheel Lane City Tucson State AZ Zip Code 85741 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5 Transaction ID: 1843038 Amount of Each Receipt this Period 100.00 Lynn Woolsey Contribution [MEMO ITEM] MEMO
Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1630 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Robert F. Hartmann

Mailing Address 335 Via Concha

City Aptos State CA Zip Code 95003

FEC ID number of contributing federal political committee. **C**

Name of Employer Hartmann & Miller Occupation Lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	7	/	2	0	0	5

Transaction ID: 1837833

Amount of Each Receipt this Period

250.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. Matthew Morris

Mailing Address PO Box 9157

City Aspen State CO Zip Code 81612

FEC ID number of contributing federal political committee. **C**

Name of Employer FRD Project Inc Occupation Butler/Chef

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	0	5

Transaction ID: 1844763

Amount of Each Receipt this Period

5.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Joel Ginzberg

Mailing Address PO Box 873

City Stone Ridge State NY Zip Code 12484

FEC ID number of contributing federal political committee. **C**

Name of Employer self, semi-retired Occupation Psychologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	3	/	2	0	0	5

Transaction ID: 1835640

Amount of Each Receipt this Period

100.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00			
TOTAL This Period (last page this line number only)	▶	<table border="1"><tr><td> </td></tr></table>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1631 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. Andrew Carson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5	
Mailing Address PO Box 709		Transaction ID: 1835649	
City Wilson	State WY	Zip Code 83014	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Lynn Woolsey Contribution	
Name of Employer Cony Corp	Occupation mtn guide		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

B. Full Name (Last, First, Middle Initial) Mr. Andrew Carson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 5	
Mailing Address PO Box 709		Transaction ID: 1835094	
City Wilson	State WY	Zip Code 83014	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Lynn Woolsey Contribution	
Name of Employer Cony Corp	Occupation mtn guide		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

C. Full Name (Last, First, Middle Initial) Ms. Rebecca S. Grothaus		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5	
Mailing Address 1 W. Franklin Street, Apt. 302		Transaction ID: 1841515	
City Troy	State OH	Zip Code 45373	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Lynn Woolsey Contribution	
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1632 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Margaret Poole		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5	
Mailing Address 33 Sunset Road		Transaction ID: 1836396	
City Wayland	State MA	Zip Code 01778	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Lynn Woolsey Contribution	
Name of Employer Mitre Corp.	Occupation Elec. Engr.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

B. Full Name (Last, First, Middle Initial) Ms. Bernice Weissbourd		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address PO Box 410		Transaction ID: 1837222	
City Winnetka	State IL	Zip Code 60093	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Lynn Woolsey Contribution	
Name of Employer		Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

C. Full Name (Last, First, Middle Initial) Ms. Rhoda L. Honigman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5	
Mailing Address PO Box 294		Transaction ID: 1837821	
City Oilville	State VA	Zip Code 23129	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C		Lynn Woolsey Contribution	
Name of Employer		Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1633 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Robert M. Lande

Mailing Address 325 Central Park W.

City State Zip Code
New York NY 10025

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842925

Amount of Each Receipt this Period
50.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Sheila Gershen

Mailing Address PO Box 292

City State Zip Code
Santa Fe NM 87504

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844830

Amount of Each Receipt this Period
25.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
S. C. Reichel-Cook

Mailing Address PO Box 257

City State Zip Code
Ross CA 94957

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844865

Amount of Each Receipt this Period
20.06

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1634 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. Richard Toole		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5	
Mailing Address PO Box 256		Transaction ID: 1841576	
City Oak Bluffs	State MA	Zip Code 02557	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Lynn Woolsey Contribution	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 0.00	[MEMO ITEM] MEMO	

B. Full Name (Last, First, Middle Initial) Ms. June H. Zeitlin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 320 Hicks Street #1		Transaction ID: 1841726	
City Brooklyn	State NY	Zip Code 11201	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Lynn Woolsey Contribution	
Name of Employer Women's Environment Devel- op. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation International Develop. Aggregate Year-to-Date ▼ 0.00	[MEMO ITEM] MEMO	

C. Full Name (Last, First, Middle Initial) Mr. Gerrish H. Milliken		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address PO Box 1880		Transaction ID: 1844507	
City Oroville	State WA	Zip Code 98844	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Lynn Woolsey Contribution	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 0.00	[MEMO ITEM] MEMO	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1635 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Diane E. Grotz		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 5	
Mailing Address 1241 Huron Road		Transaction ID: 1835179	
City State Zip Code North Brunswick NJ 08902		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Lynn Woolsey Contribution	
Name of Employer Occupation Schering Plough Inc Scientist		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Mr. John M. Wolf, Jr.		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address PO Box 1429		Transaction ID: 1836925	
City State Zip Code Sanibel FL 33957		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Lynn Woolsey Contribution	
Name of Employer Occupation Retired		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Sheridan Harvey		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5	
Mailing Address 110 6th Street SE # 303		Transaction ID: 1841569	
City State Zip Code Washington DC 20003		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Lynn Woolsey Contribution	
Name of Employer Occupation Library of Congress Librarian		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1636 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Angelina K. Erbes

Mailing Address PO Box 1149

City State Zip Code
Whitefish MT 59937

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1844484

Amount of Each Receipt this Period
20.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Julie C. Monson

Mailing Address PO Box 1029

City State Zip Code
Point Reyes Sta. CA 94956

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843523

Amount of Each Receipt this Period
50.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Audrey Miller

Mailing Address P.O. Box 888

City State Zip Code
Ferndale CA 95536

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1841709

Amount of Each Receipt this Period
100.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1637 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Judy S. Bertelsen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 5
Mailing Address P.O. Box 2774		Transaction ID: 1837624
City State Zip Code Berkeley CA 94702	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Lynn Woolsey Contribution [MEMO ITEM] MEMO
Name of Employer Alameda County Medical Center	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Mary Sue Ittner		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5
Mailing Address Bob Rutemoeller P.O. Box 587		Transaction ID: 1838503
City State Zip Code Gualala CA 95445	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Lynn Woolsey Contribution [MEMO ITEM] MEMO
Name of Employer Self	Occupation Financial Planner/Volunteer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Mrs. Debbie Linthorst		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 7 Rumson Court		Transaction ID: 1836256
City State Zip Code Pennington NJ 08534	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Lynn Woolsey Contribution [MEMO ITEM] MEMO
Name of Employer	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1638 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Margaret W. Johnson

Mailing Address 9190 Brier Rd.

City State Zip Code
La Mesa CA 91942

FEC ID number of contributing federal political committee. **C**

Name of Employer Grossmont College Occupation College Instructor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837342

Amount of Each Receipt this Period
50.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Maurine Behrens

Mailing Address 12222 Orange Drive

City State Zip Code
Whittier CA 90601

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837176

Amount of Each Receipt this Period
50.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Margret Jacoby

Mailing Address 912 Blossom Drive

City State Zip Code
Santa Clara CA 95050

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841642

Amount of Each Receipt this Period
100.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1639 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Leslie Sternlieb

Mailing Address 90 Edgewater Drive, Apt. 1101

City State Zip Code
Coral Gables FL 33133

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Writer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1835625

Amount of Each Receipt this Period
100.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Dr. Janet A Randall

Mailing Address 862 Jonive Rd

City State Zip Code
santa rosa CA 95472

FEC ID number of contributing federal political committee. **C**

Name of Employer San Francisco State Occupation Professor of Biology

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1838422

Amount of Each Receipt this Period
100.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mrs. Catherine Manz Smith

Mailing Address 85316 Coyote Creek Road

City State Zip Code
Veneta OR 97487

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1841735

Amount of Each Receipt this Period
250.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1640 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Dr. Lynn Seaman

Mailing Address 3324 Vernal Avenue

City State Zip Code
Merced CA 95340

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SRI International Senior Research Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841668

Amount of Each Receipt this Period
100.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Dorothy L. Flaster

Mailing Address 1760 East Valley Road

City State Zip Code
Montecito CA 93108

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842930

Amount of Each Receipt this Period
50.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Dr. L Erlenmeyer-Kimling

Mailing Address 1 Briarwood Lane

City State Zip Code
Stamford CT 06903

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NYS Psychiatric Institute Research Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1836658

Amount of Each Receipt this Period
200.00

Lynn Woolsey Contribution

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1641 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Dorothy A. Scheppke

Mailing Address 815 216th Street, #41

City State Zip Code
Des Moines WA 98198

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842936

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Julie Peppard

Mailing Address 1094 Palms Blvd

City State Zip Code
Venice CA 90291

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Gartner & Young Secretary

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838031

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Sheila C. Olsen

Mailing Address 1594 Rose Lane

City State Zip Code
Placerville CA 95667

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836317

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1642 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. Thomas E. Leggat Mailing Address 81 Baker Bridge Road City Lincoln State MA Zip Code 01773 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5 Transaction ID: 1842963 Amount of Each Receipt this Period 250.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Anne L. Elliott Mailing Address 2775 Main Street City Lawrenceville State NJ Zip Code 08648 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5 Transaction ID: 1841716 Amount of Each Receipt this Period 50.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Self Artist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Ginger A. Metcalf Mailing Address 807 West 7th Avenue City Spokane State WA Zip Code 99204 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5 Transaction ID: 1842959 Amount of Each Receipt this Period 50.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Self Psychotherapist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1643 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Rhoda Weinstein

Mailing Address 8060 E. Girard Avenue Apt. 709

City State Zip Code
Denver CO 80231

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845859

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Ina M. Ayliffe

Mailing Address 15905 Bent Tree Cr. #1025

City State Zip Code
Dallas TX 75248

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844799

Amount of Each Receipt this Period
25.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Rosemary Daub

Mailing Address 158 Roxborough Avenue

City State Zip Code
Philadelphia PA 19127

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Social Worker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842948

Amount of Each Receipt this Period
25.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1644 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. Robert Wright Mailing Address 274 Oakland Drive City East Lansing State MI Zip Code 48823 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5 Transaction ID: 1836889 Amount of Each Receipt this Period 25.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Mich State Univ Occupation Professor Emeritus Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Lois Gullerud Mailing Address 1208 W. Daniel Street City Champaign State IL Zip Code 61821 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5 Transaction ID: 1836940 Amount of Each Receipt this Period 50.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Self Occupation Musician/Teacher Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Mr. Jesse W. Kehres Mailing Address 8 Classic Cir City Madison State WI Zip Code 53719 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 5 Transaction ID: 1834880 Amount of Each Receipt this Period 100.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer REQUESTED Occupation Engineer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1645 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Jerrilyn Kaplan

Mailing Address 271 Oyster Pond Road

City Alameda State CA Zip Code 94502

FEC ID number of contributing federal political committee. **C**

Name of Employer San Lorenzo Unified Schools Occupation Teacher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1841743

Amount of Each Receipt this Period
25.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Esther Rosenbloom

Mailing Address 725 Mount Wilson Lane Apt. 504

City Pikesville State MD Zip Code 21208

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837229

Amount of Each Receipt this Period
150.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Sheila Toabe Davis

Mailing Address 7913 Vantage Avenue

City North Hollywood State CA Zip Code 91605

FEC ID number of contributing federal political committee. **C**

Name of Employer Bet Tzedek Occupation Secretary

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1844481

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ 0.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1646 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Marti Baroody		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 1559 Cole Street		Transaction ID: 1837347	
City State Zip Code San Francisco CA 94117	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions		
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Ms. Marilyn J. Henry		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 7823 Calverton Square		Transaction ID: 1844474	
City State Zip Code New Albany OH 43054	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions		
Name of Employer Occupation Homemaker	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Lori Shore		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 73 Ellensue Dr		Transaction ID: 1840920	
City State Zip Code Deer Park NY 11729	Amount of Each Receipt this Period 99.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions		
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1647 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Kathleen E. Green

Mailing Address 7625 242nd Street SW

City Edmonds State WA Zip Code 98026

FEC ID number of contributing federal political committee. **C**

Name of Employer Western Pacific Bldg Materials Occupation Administrator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: 1837799

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Dr. Marc F. Collin

Mailing Address 2692 Landon Road

City Shaker Heights State OH Zip Code 44122

FEC ID number of contributing federal political committee. **C**

Name of Employer MetroHealth Medical Center Occupation physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1843672

Amount of Each Receipt this Period
25.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Diane E. Parish

Mailing Address 154 Santa Rosa Avenue

City Sausalito State CA Zip Code 94965

FEC ID number of contributing federal political committee. **C**

Name of Employer Black Roch Financial Occupation Investment Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838068

Amount of Each Receipt this Period
500.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1648 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Patricia Morton		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 266 Willowbrook Drive		Transaction ID: 1840969	
City State Zip Code North Brunswick NJ 08902	Amount of Each Receipt this Period 100.00		Maria Cantwell Contributions [MEMO ITEM] MEMO
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Self-Employed Planning & Development		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Ms. Juliane McAdam		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 7556 Cowan Avenue		Transaction ID: 1845854	
City State Zip Code Los Angeles CA 90045	Amount of Each Receipt this Period 50.00		Maria Cantwell Contributions [MEMO ITEM] MEMO
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Westchester Neigh. School Teacher		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Jennifer Berlekamp		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 120 Hazel Lane		Transaction ID: 1843539	
City State Zip Code Piedmont CA 94611	Amount of Each Receipt this Period 500.00		Maria Cantwell Contributions [MEMO ITEM] MEMO
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Housewife/Volunteer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1649 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Dell L. Rhodes Mailing Address 75 El Camino Real City State Zip Code White Salmon WA 98672 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 5 Transaction ID: 1845897 Amount of Each Receipt this Period 250.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Reed College Professor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Amy Monk Mailing Address 7476 Kekaa St City State Zip Code Honolulu HI 96825 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 7 / 2 0 0 5 Transaction ID: 1845289 Amount of Each Receipt this Period 50.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Foreign Service Dept. Dept. of State Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Dr. Lynne Emery Mailing Address 1535 Bellford Avenue City State Zip Code Pasadena CA 91104 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 5 Transaction ID: 1836784 Amount of Each Receipt this Period 100.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1650 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Linda Murnik		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5	
Mailing Address 263 Camino Los Abuelos		Transaction ID: 1838444	
City State Zip Code Santa Fe NM 87508		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation Retired		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Jane Curtis		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 7444 Spring Village Drive Apartment 422		Transaction ID: 1843533	
City State Zip Code Springfield VA 22150		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation REQUESTED		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Robbin Frazier		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 7345 France Avenue N.		Transaction ID: 1837131	
City State Zip Code Minneapolis MN 55443		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation REQUESTED		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1651 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Elizabeth A. Jackets

Mailing Address 7306 Channel View Drive

City Anacortes State WA Zip Code 98221

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837402

Amount of Each Receipt this Period
25.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Lael Braymer

Mailing Address 2604 123rd Avenue SE

City Bellevue State WA Zip Code 98005

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1841532

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Helen B. Cahn

Mailing Address 730 Camino Mirada

City Santa Fe State NM Zip Code 87505

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838446

Amount of Each Receipt this Period
150.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ 0.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1652 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Bonnie J. Morse		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 729 Woodland Road		Transaction ID: 1837365	
City State Zip Code Bradfordwoods PA 15015		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation Retired		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Emma B. Robbins		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 26 10th Street West #711		Transaction ID: 1842968	
City State Zip Code St. Paul MN 55102		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation Retired		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Lynette Sahnou		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 15230 Southwest 141st Ave.		Transaction ID: 1844510	
City State Zip Code Tigard OR 97224		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation REQUESTED		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1653 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Jay Paul

Mailing Address 109 Scott Street

City State Zip Code
San Francisco CA 94117

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UCSF Psychologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842994

Amount of Each Receipt this Period
25.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Constance McKenna

Mailing Address 2576 Nicky Lane

City State Zip Code
Alexandria VA 22311

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: 1837805

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Lilian Masters

Mailing Address 257 Hawks Hill Road

City State Zip Code
Scotts Valley CA 95066

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
IRS Revenue Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836774

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1654 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Dot Furness

Mailing Address 120 Borden Road

City Middletown State NJ Zip Code 07748

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842981

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Joan M. Kelley

Mailing Address 720 NE 69th St Apt 17S

City Miami State FL Zip Code 33138

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1844463

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Patricia Perry

Mailing Address 257 Bartram Road

City Riverside State IL Zip Code 60546

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838435

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1655 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Selene Levine		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 720 Milton Road		Transaction ID: 1837356	
City Rye State NY Zip Code 10580	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 0.00	[MEMO ITEM] MEMO	

B. Full Name (Last, First, Middle Initial) Ms. Catherine Sichenze		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 5	
Mailing Address 256 Tichenor Avenue		Transaction ID: 1841589	
City South Orange State NJ Zip Code 07079	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Disabled Aggregate Year-to-Date ▼ 0.00	[MEMO ITEM] MEMO	

C. Full Name (Last, First, Middle Initial) Mr. Barry Bennett		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address 1521 W Fir Avenue		Transaction ID: 1836852	
City Fresno State CA Zip Code 93711	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Bennett & Sharpe PC Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Attorney Aggregate Year-to-Date ▼ 0.00	[MEMO ITEM] MEMO	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1656 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Margaret Pinto Mailing Address 255 W 84th St Apt 11C City New York State NY Zip Code 10024 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1843485 Amount of Each Receipt this Period <table border="1"> <tr> <td>75.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	1		2	0	0	5	75.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		2	1		2	0	0	5														
75.00																							
Name of Employer Self Occupation Writer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

B. Full Name (Last, First, Middle Initial) Ms. Jane Walsh Mailing Address 2545 Dorset Road City Columbus State OH Zip Code 43221 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1837134 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	5		2	0	0	5	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		0	5		2	0	0	5														
100.00																							
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

C. Full Name (Last, First, Middle Initial) Ms. Doris L. Marsh Mailing Address 254 East Tall Oaks Circle City Palm Beach Gardens State FL Zip Code 33410 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1835651 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	3		2	0	0	5	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		0	3		2	0	0	5														
100.00																							
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1657 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Susan M. Selbin

Mailing Address 1520 San Carlos Road SW

City State Zip Code
Albuquerque NM 87104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844870

Amount of Each Receipt this Period
20.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Chris Harrington

Mailing Address 7095 SW Newton Place

City State Zip Code
Portland OR 97225

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Oregon Health & Science Scientist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836305

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Karen J. Keefer

Mailing Address 705 Chesapeake Avenue

City State Zip Code
Silver Spring MD 20910

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FEMA Em Mgmt Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841675

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1658 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Alice Allhoff

Mailing Address 25312 Ursuline Street

City State Zip Code
Saint Claire Shore MI 48081

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838170

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Lana Touchstone

Mailing Address 252 Grapewood Street

City State Zip Code
Vallejo CA 94591

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Solano County Librarian

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844835

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Patricia Ness

Mailing Address 2515 Caminito Muirfield

City State Zip Code
La Jolla CA 92037

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837416

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1659 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Gail Winnell Mailing Address 7024 El Torro St City State Zip Code Zephyrhills FL 33541 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5 Transaction ID: 1837235 Amount of Each Receipt this Period 10.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Ellen Chu Mailing Address 7012 Marbury Road City State Zip Code Bethesda MD 20817 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5 Transaction ID: 1836938 Amount of Each Receipt this Period 30.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Mary Jane Mettler Mailing Address 15091 Ford Road, Apt. 116 City State Zip Code Dearborn MI 48126 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5 Transaction ID: 1836400 Amount of Each Receipt this Period 25.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1660 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Corinne McTaggart		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5	
Mailing Address 119 White Fir Way		Transaction ID: 1836307	
City State Zip Code Roseburg OR 97470	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Mrs. Kathryn Lamka		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 5	
Mailing Address 250 Maple Lane		Transaction ID: 1835134	
City State Zip Code Port Ludlow WA 98365	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions		
Name of Employer Occupation Meetingworks Consulting	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Kay V. Bergin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5	
Mailing Address 25 Steuben Street		Transaction ID: 1838178	
City State Zip Code Waterbury CT 06708	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions		
Name of Employer Occupation Consumer Credit Counseling Marketing Manager	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1661 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Carol Louchheim

Mailing Address 7 Brent Court

City State Zip Code
Menlo Park CA 94025

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Retail

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1841582

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Jane G. Cahn

Mailing Address 695 Fairfax Street

City State Zip Code
Denver CO 80220

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845906

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mrs. Josephine Vaara

Mailing Address 6932 W. Church Street

City State Zip Code
Clarkston MI 48346

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837145

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1662 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Sue C. Hansen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 6927 Fairmount Avenue		Transaction ID: 1844793
City State Zip Code El Cerrito CA 94530	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation STATE OF CALIFORNIA Attorney	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Mr. Terrence N. Tice		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address 2488 S Columbine St		Transaction ID: 1836331
City State Zip Code Denver CO 80210	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation University Of Michigan Professor	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Suzanne M. Sinke		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 6854 Hanging Vine Way		Transaction ID: 1844470
City State Zip Code Tallahassee FL 32317	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1663 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Margaret C. Bisberg

Mailing Address 1506 S. Courtland Avenue

City State Zip Code
Park Ridge IL 60068

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
IRS Revenue Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841609

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Jeann Sing

Mailing Address 68-1050 Maura Lane # D204

City State Zip Code
Kanula HI 96743

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841687

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Janet Boe

Mailing Address 24798 470th Street

City State Zip Code
Laporte MN 56461

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 5

Transaction ID: 1845288

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1664 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Susan Hoffman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5	
Mailing Address 1505 Firethorne Lane		Transaction ID: 1838202	
City State Zip Code Wyndmoor PA 19038	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions		
Name of Employer Occupation The Shefa Fund Management	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Beverly G. Deshler		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5	
Mailing Address 6762 McCormick Woods Dr SW		Transaction ID: 1838509	
City State Zip Code Port Orchard WA 98367	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions		
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Mrs. Barbara B. Seiler		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5	
Mailing Address 119 Laurel Hollow Way		Transaction ID: 1845259	
City State Zip Code Saluda NC 28773	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions		
Name of Employer Occupation Heartwood gallery owner	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1665 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Victoria E. Watkins		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address 244 Madison Avenue, # 14E		Transaction ID: 1836835	
City State Zip Code New York NY 10016		Amount of Each Receipt this Period 110.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation PIRA Energy Group Energy Analyst		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Prof. Robert F. Meagher		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 7 / 2 0 0 5	
Mailing Address 108 Curtis Street		Transaction ID: 1837851	
City State Zip Code Somerville MA 02144		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation Retired		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Evelyn Dolven		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 1 / 2 0 0 5	
Mailing Address 663 Vincente Avenue		Transaction ID: 1838191	
City State Zip Code Berkeley CA 94707		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation Retired		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1666 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Mary E. Kelman

Mailing Address 1500 Sawyer Ave

City State Zip Code
Manasquan NJ 08736

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
10 / 30 / 2005

Transaction ID: 1844791

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Marjorie L. Elder

Mailing Address 1181 Cork Road

City State Zip Code
Victor NY 14564

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
10 / 03 / 2005

Transaction ID: 1836405

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. David Warren

Mailing Address 661 Catherine Street SW

City State Zip Code
Atlanta GA 30310

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Easy Way Out Chef

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
10 / 27 / 2005

Transaction ID: 1845282

Amount of Each Receipt this Period
25.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1667 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Lois E. Jolley

Mailing Address 6605 100th Avenue

City Pinellas Park State FL Zip Code 33782

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843482

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Susan M. Francis

Mailing Address 1018 Yorkshire Road

City Grosse Pointe State MI Zip Code 48230

FEC ID number of contributing federal political committee. **C**

Name of Employer Grosse Pointe Pre Kindergarten Occupation Teacher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1841518

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Ira Thompson

Mailing Address 655 Providence Avenue Apt. I

City Columbus State OH Zip Code 43214

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 5

Transaction ID: 1845247

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1668 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Marg Helgenberger		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5
Mailing Address 242 24th St		Transaction ID: 1838455
City State Zip Code Santa Monica CA 90402	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Phyllis K. Campbell		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 15 Piper Road # J322		Transaction ID: 1836822
City State Zip Code Scarborough ME 04074	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Rosemary Anne Smith		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 653 Ravel Court		Transaction ID: 1840953
City State Zip Code Las Vegas NV 89145	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1669 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Helen V. Dudley

Mailing Address 652 Chaparral Street

City State Zip Code
Wickenburg AZ 85390

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837340

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Margret S. Trozky

Mailing Address 27 Saxham Way

City State Zip Code
Wynnewood PA 19096

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Children's Hospital of Philadelphia Pediatrician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836369

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Suzanne L. Krause

Mailing Address 15 Jutland Road

City State Zip Code
Binghamton NY 13903

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1840936

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1670 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Gene M. Wilson

Mailing Address 7730 Tecumseh Trail

City State Zip Code
Cincinnati OH 45243

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation
Self Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: 1837838

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Kay Cooper

Mailing Address 6501 Meadow View Road

City State Zip Code
Hillsborough NC 27278

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1844525

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Dr. Morton Zivan

Mailing Address 2401 Pennsylvania Avenue #15B24

City State Zip Code
Philadelphia PA 19130

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation
Self Psychologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845888

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ 0.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1671 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Kate Stillman

Mailing Address 65 Paces West Ct NW

City Atlanta State GA Zip Code 30327

FEC ID number of contributing federal political committee. **C**

Name of Employer Holiday Inns, Inc. Occupation Lawyer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1841748

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Gail Carver Eisenberger

Mailing Address 240 Kala Heights Drive

City Port Townsend State WA Zip Code 98368

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836884

Amount of Each Receipt this Period
500.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mrs. Alice Schoen

Mailing Address 6419 Cavalier Corridor

City Falls Church State VA Zip Code 22044

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1835608

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1672 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. Arnold S. Wajenberg Mailing Address 240 Donald Drive City State Zip Code Goffstown NH 03045 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1837190 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="2">100.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	5		2	0	0	5	100.00	
M	M	/	D	D	/	Y	Y	Y	Y															
1	0		0	5		2	0	0	5															
100.00																								
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td colspan="2">0.00</td> </tr> </table>		0.00																						
0.00																								

B. Full Name (Last, First, Middle Initial) Ms. Elizabeth B. Pennink Mailing Address 635 Medford Leas City State Zip Code Medford NJ 08055 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1838200 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="2">100.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	1		2	0	0	5	100.00	
M	M	/	D	D	/	Y	Y	Y	Y															
1	0		1	1		2	0	0	5															
100.00																								
Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td colspan="2">0.00</td> </tr> </table>		0.00																						
0.00																								

C. Full Name (Last, First, Middle Initial) Mrs. Margaret E. Lewis Mailing Address 756 Harbor Island City State Zip Code Clearwater FL 33767 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1837315 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="2">100.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	6		2	0	0	5	100.00	
M	M	/	D	D	/	Y	Y	Y	Y															
1	0		0	6		2	0	0	5															
100.00																								
Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td colspan="2">0.00</td> </tr> </table>		0.00																						
0.00																								

SUBTOTAL of Receipts This Page (optional)	▶	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00			
TOTAL This Period (last page this line number only)	▶	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1673 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Nels Ekroth

Mailing Address 6317 SW Wilton Court

City State Zip Code
Seattle WA 98116

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1841559

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Agnes M. Grady

Mailing Address 14809 121st Street E

City State Zip Code
Puyallup WA 98374

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836879

Amount of Each Receipt this Period
250.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Laura Avery

Mailing Address 6309 Cocoa Lane

City State Zip Code
Apollo Beach FL 33572

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837161

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1674 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Gail W. Chester

Mailing Address 24 Mill Road

City State Zip Code
Matawan NJ 07747

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Middlesex Co. Legal Svcs. Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2005

Transaction ID: 1844455

Amount of Each Receipt this Period
250.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Jennifer Bell

Mailing Address 63 Park Street

City State Zip Code
Tenafly NJ 07670

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2005

Transaction ID: 1843578

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Mary G Favaro

Mailing Address 626 14th Ave East

City State Zip Code
Seattle WA 98112

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
businesswoman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
10 / 16 / 2005

Transaction ID: 1841064

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1675 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Alan M. Solinger		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 1465 65th St Apt 253		Transaction ID: 1841026	
City State Zip Code Emeryville CA 94608	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions		
Name of Employer Amgen Inc. Occupation Physician	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Ms. Alison Tallard		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 6244 N Maplewood Ave		Transaction ID: 1842946	
City State Zip Code Chicago IL 60659	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions		
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Barbara Berney		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 624 E 20th St Apt 1D		Transaction ID: 1837191	
City State Zip Code New York NY 10009	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions		
Name of Employer Environmental League of MA Occupation Administrator	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1676 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Nancy L. Madsen Mailing Address 2340 S 2300 E City State Zip Code Salt Lake City UT 84109 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1841613 Amount of Each Receipt this Period <table border="1"> <tr> <td>20.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	4		2	0	0	5	20.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	4		2	0	0	5														
20.00																							
Name of Employer Occupation Kaiser Foundation Health Nursing Administrator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

B. Full Name (Last, First, Middle Initial) Ms. Laura E. Watson Mailing Address 6144 Fremont Circle City State Zip Code Camarillo CA 93012 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1837326 Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	6		2	0	0	5	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		0	6		2	0	0	5														
50.00																							
Name of Employer Occupation Self Clinical Social Worker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

C. Full Name (Last, First, Middle Initial) Ms. Holley Humphrey Mailing Address 233 Rogue River Highway #173 City State Zip Code Grants Pass OR 97527 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1838532 Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	2		2	0	0	5	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	2		2	0	0	5														
50.00																							
Name of Employer Occupation Self Speaker/Trainer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1677 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Annette S. Backous

Mailing Address 1017 NW 121st Street

City State Zip Code
Vancouver WA 98685

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841055

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. Ronald W. Nelson

Mailing Address 2323 Canehill Avenue

City State Zip Code
Long Beach CA 90815

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Lutheran Church Southern CA Stewardship Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838152

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Susan Brown

Mailing Address 613 NE 44th Street

City State Zip Code
Kansas City MO 64116

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
US Bank Adm. Asst.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837219

Amount of Each Receipt this Period
25.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1678 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Marlene Share		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 7 / 2 0 0 5	
Mailing Address 14630 Dickens #310		Transaction ID: 1837842	
City State Zip Code Sherman Oaks CA 91403	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions		
Name of Employer Occupation UBSPaineWebber Stockbroker	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Ms. Joan J. Englander		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 609 Elm Avenue		Transaction ID: 1841702	
City State Zip Code Swarthmore PA 19081	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions		
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Julie McVay		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 608 Poplar Street		Transaction ID: 1837383	
City State Zip Code Roslindale MA 02131	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions		
Name of Employer Occupation Dietitian Organizer	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1679 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Robert Brown

Mailing Address 2315 Salem Village Road
Apt. F

City State Zip Code
Parkville MD 21234

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Psychologist

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1835605

Amount of Each Receipt this Period
20.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Mary Anne Hunter

Mailing Address 604 Washington Square S
#1502

City State Zip Code
Philadelphia PA 19106

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Hunter Landscape Design Landscape Designer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1841598

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Diane L. Gross

Mailing Address 1437 Rhode Island Ave #112

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Senator Barbara Mikulski Counsel

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843554

Amount of Each Receipt this Period
150.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1680 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Elizabeth Whittall

Mailing Address 2300 Indian Creek Boulevard
Apartment C-121

City State Zip Code
Vero Beach FL 32966

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1841700

Amount of Each Receipt this Period
250.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. Hugh M. Jackson

Mailing Address 6035 W Mansfield Ave Unit 247

City State Zip Code
Denver CO 80235

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845886

Amount of Each Receipt this Period
25.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Carol B. Leibman

Mailing Address 100 Diplomat Drive, # 6F

City State Zip Code
Mt. Kisco NY 10549

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 2 / 2 0 0 5

Transaction ID: 1834964

Amount of Each Receipt this Period
25.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1681 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Patricia G. Kinsman

Mailing Address 11671 N. Europa Place

City State Zip Code
Tucson AZ 85737

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842937

Amount of Each Receipt this Period
25.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Ann W. Rogers

Mailing Address 1425 Cambridge Road

City State Zip Code
Ann Arbor MI 48104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1841698

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mrs. Shirley J. Humphrey

Mailing Address 6000 Lake Road, W #112

City State Zip Code
Ashtabula OH 44004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838193

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1682 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Grace Radin		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 3 / 2 0 0 5	
Mailing Address 107 River Road		Transaction ID: 1835621	
City State Zip Code Nyack NY 10960		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation Retired		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Carole R. Curtis		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 60 Somerset Road		Transaction ID: 1841622	
City State Zip Code New Rochelle NY 10804		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation National Hodarrsah Executive		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Rhoda Mann		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 60 Seminary Ave Apt 170		Transaction ID: 1841714	
City State Zip Code Auburndale MA 02466		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation Retired		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1683 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Anne Patterson

Mailing Address 80 Buckingham St

City State Zip Code
Cambridge MA 02138

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1841768

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Mary Joanne Shaw

Mailing Address 60 Robinson Street

City State Zip Code
Schenectady NY 12304

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Bechtel Plant Machinery Mechanical Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837351

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Charlotte L. O'Keefe

Mailing Address 60 Murray Avenue

City State Zip Code
Larkspur CA 94939

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843557

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1684 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Analine S. Hicks Mailing Address 2280 Cayuga Rd City State Zip Code Schenectady NY 12309 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 3 / 2 0 0 5 Transaction ID: 1836403 Amount of Each Receipt this Period 50.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Paula Ginsburg Mailing Address 59975 E. Comanche Way City State Zip Code Strasburg CO 80136 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 0 5 Transaction ID: 1844458 Amount of Each Receipt this Period 100.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Geri LeVine Loe Mailing Address 5961 Canon Court City State Zip Code Ventura CA 93003 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5 Transaction ID: 1842998 Amount of Each Receipt this Period 200.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Venura College Professor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1685 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Judith Wolfe Mailing Address 11644 Harborview City Cleveland State OH Zip Code 44102 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1835616 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	3		2	0	0	5	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		0	3		2	0	0	5														
100.00																							
Name of Employer: Forest City Enterprises Occupation: Finance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

B. Full Name (Last, First, Middle Initial) Dr. Beatrice Nold Mailing Address 5954-3B Autumnwood Drive City Walnut Creek State CA Zip Code 94595 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1837367 Amount of Each Receipt this Period <table border="1"> <tr> <td>250.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	6		2	0	0	5	250.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		0	6		2	0	0	5														
250.00																							
Name of Employer: Occupation: Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

C. Full Name (Last, First, Middle Initial) Ms. Catherine Hodgman Helm Mailing Address 227 S. Windsor Blvd. City Los Angeles State CA Zip Code 90004 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1838490 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	2		2	0	0	5	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	2		2	0	0	5														
100.00																							
Name of Employer: Freed & Manella Occupation: Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

SUBTOTAL of Receipts This Page (optional)	▶	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00			
TOTAL This Period (last page this line number only)	▶	<table border="1"><tr><td></td></tr></table>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1686 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Marianne J. Joyce

Mailing Address 142 Nyac Avenue

City Pelham State NY Zip Code 10803

FEC ID number of contributing federal political committee. **C**

Name of Employer LSNY-Bronx Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836847

Amount of Each Receipt this Period
 500.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Linda Cukurs

Mailing Address 5940 N. Forest Glen Avenue

City Chicago State IL Zip Code 60646

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837411

Amount of Each Receipt this Period
 100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Rhea Joyce Rubin

Mailing Address 5860 Heron Drive

City Oakland State CA Zip Code 94618

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Library Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837238

Amount of Each Receipt this Period
 100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1687 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Shirley Klass Mailing Address 226 S. Reese Street City State Zip Code Memphis TN 38111 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 8 / 2 0 0 5 Transaction ID: 1844831 Amount of Each Receipt this Period 50.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Barbara J. Alberty Mailing Address 581 Covey Lane City State Zip Code Eugene OR 97401 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 5 Transaction ID: 1836848 Amount of Each Receipt this Period 100.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Self Financial Planner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Mr. James T. Langland Mailing Address 1014 Oakland Park Road City State Zip Code Thief River Falls MN 56701 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 3 / 2 0 0 5 Transaction ID: 1836291 Amount of Each Receipt this Period 100.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Dakota Clinic Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1688 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Phyllis R. Farley

Mailing Address 580 Park Avenue
#6-A

City State Zip Code
New York NY 10021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836839

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Ann Donovan Lee

Mailing Address 116 Channing Lane

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836843

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Mary Brucklacher

Mailing Address 560 Deer Lake Dr

City State Zip Code
Findlay OH 45840

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1841509

Amount of Each Receipt this Period
25.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1689 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Bronwyn J. Nelson Mailing Address 5567 Mesa Verde Court City State Zip Code Fairfield OH 45014 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 1 / 2 0 0 5 Transaction ID: 1838023 Amount of Each Receipt this Period 25.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Fairfield City School Chemisty Teacher Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Adelle Lemon Mailing Address 1063 Cragmont City State Zip Code Berkeley CA 94708 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 5 Transaction ID: 1837373 Amount of Each Receipt this Period 200.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Mrs. Joan F. Green Mailing Address 555 Laurel Street City State Zip Code San Francisco CA 94118 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 8 / 2 0 0 5 Transaction ID: 1837606 Amount of Each Receipt this Period 100.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Self educator/consultant Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1690 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Russell Gordon		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 22022 Catalina Circle		Transaction ID: 1844858
City State Zip Code Huntington Beach CA 92646	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Betty Lou Young		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 550 Latimer Road		Transaction ID: 1836860
City State Zip Code Santa Monica CA 90402	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Sandra L. Hackman		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 22 Meadowbrook Rd		Transaction ID: 1842953
City State Zip Code Bedford MA 01730	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1691 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Nancy Baskin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5	
Mailing Address 55 Ocean Ave Apt 5J		Transaction ID: 1835595	
City State Zip Code Monmouth Beach NJ 07750	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Diana Simon		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 55 E. Erie Street, Apt. 4505		Transaction ID: 1841606	
City State Zip Code Chicago IL 60611	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions		
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Mr. Thomas C. Carter		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 140 N. Tigertail Road		Transaction ID: 1837320	
City State Zip Code Los Angeles CA 90049	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions		
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1692 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Constance Greenfield		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 279 Sturges Highway		Transaction ID: 1845267
City State Zip Code Westport CT 06880	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation Occupation Homemaker	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Caroline G. Lieberman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 55 Arroyo Way		Transaction ID: 1841521
City State Zip Code San Francisco CA 94127	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation City College San Francisc Instructor	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Grier E. Whitney		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address 11516 Blossom Way		Transaction ID: 1836301
City State Zip Code Carmel IN 46032	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation state auto insurance manager	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1693 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Barbara A. Brosnan

Mailing Address 5431 Weybridge Road

City State Zip Code
Weybridge VT 05753

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Rutland NE Supervisory Union Teacher

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838052

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Alice G. Davis

Mailing Address 215 W. 14th Street

City State Zip Code
Wilmington DE 19801

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Perinatal Association of DE Executive Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1844478

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Tammy McLeod

Mailing Address 5428 E Sanna St

City State Zip Code
Paradise Vly AZ 85253

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
APS Marketing

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845856

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1694 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mrs. Nancy Brooks Jones Mailing Address 536 Nash Street City Rocky Mount State NC Zip Code 27804 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1835612 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	3		2	0	0	5	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		0	3		2	0	0	5														
100.00																							
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

B. Full Name (Last, First, Middle Initial) Ms. June Walkington Mailing Address 2140 Ohio Avenue #D City Signal Hill State CA Zip Code 90755 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1837419 Amount of Each Receipt this Period <table border="1"> <tr> <td>25.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	6		2	0	0	5	25.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		0	6		2	0	0	5														
25.00																							
Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

C. Full Name (Last, First, Middle Initial) Mrs. Lois M. Dummett Mailing Address 5344 Highlight Place City Los Angeles State CA Zip Code 90016 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1842988 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	0		2	0	0	5	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		2	0		2	0	0	5														
100.00																							
Name of Employer Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

SUBTOTAL of Receipts This Page (optional)	▶	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00			
TOTAL This Period (last page this line number only)	▶	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1695 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Jane H. Murdock		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 14 Long Pond Avenue		Transaction ID: 1844497
City State Zip Code Housatonic MA 01236	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation RQEUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Linda M. Hengst		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address 533 W. Market Street		Transaction ID: 1836379
City State Zip Code York PA 17404	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Della H. Huber		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 5308 Boyd Ave # B		Transaction ID: 1837125
City State Zip Code Oakland CA 94618	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1696 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Sadie W. Taylor

Mailing Address 115 Kendal Drive

City State Zip Code
Oberlin OH 44074

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 11 / 2005

Transaction ID: 1838045

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Ellen Werback

Mailing Address 529 Kevin Court

City State Zip Code
Ridgecrest CA 93555

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Piano Teacher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 11 / 2005

Transaction ID: 1838084

Amount of Each Receipt this Period
250.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Emmons S. Ellis

Mailing Address 14 Hillside Avenue

City State Zip Code
Winchester MA 01890

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 31 / 2005

Transaction ID: 1845844

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1697 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Linda Lindquist

Mailing Address 2116 NW 204th Street

City Shoreline State WA Zip Code 98177

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2005

Transaction ID: 1842933

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mrs. Claire Amendola

Mailing Address 527 Fulton Lane

City Saint Helena State CA Zip Code 94574

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
10 / 17 / 2005

Transaction ID: 1841745

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Phyllis G. Levinson

Mailing Address 5262 Boca Marina Circle S.

City Boca Raton State FL Zip Code 33487

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
10 / 17 / 2005

Transaction ID: 1841728

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1698 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Rosalind B. Smith		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 211 Hodges Lane		Transaction ID: 1836851
City State Zip Code Takoma Park MD 20912	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation Montgomery Cnty Administrator	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Mrs. Aashish D. Devitre		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 211 Central Park W #10G		Transaction ID: 1844487
City State Zip Code New York NY 10024	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Janet L. Smarr		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 1397 Caminito Halago		Transaction ID: 1836893
City State Zip Code La Jolla CA 92037	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation UCSD Professor	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1699 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. Wyman B. Fowler Mailing Address 2107 Mallard Drive City State Zip Code Lancaster PA 17601 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5 Transaction ID: 1838076 Amount of Each Receipt this Period 1000.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Intermediate Unit # 13 Adult Education Instructor Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Grace Flesche Mailing Address 523 Pinehurst Boulevard City State Zip Code Kalamazoo MI 49006 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5 Transaction ID: 1838514 Amount of Each Receipt this Period 50.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Kalamazon Public School School Secretary Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Jeana Petersen Mailing Address 21015 N. Totem Drive City State Zip Code Sun City West AZ 85375 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5 Transaction ID: 1837811 Amount of Each Receipt this Period 100.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1700 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Robert J. Myers

Mailing Address 5210 N. Eisenhower

City State Zip Code
Roswell NM 88201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836931

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mrs. J. Brockhouse

Mailing Address 1143 Oxford Drive

City State Zip Code
Emporia KS 66801

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
USD # 253 Teacher Aide

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836411

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Joan Goldstein

Mailing Address 2100 North Salisbury Street

City State Zip Code
West Lafayette IN 47906

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Purdue University Counselor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1840893

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1701 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Mary Lou Parker

Mailing Address 516 Westminster Avenue

City State Zip Code
Swarthmore PA 19081

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNISYS Project Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844836

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mrs. Beverly Fremont

Mailing Address 515 S. Sierra #122

City State Zip Code
Solana Beach CA 92075

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Hospice of No. Coast therapist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844768

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Linda Lee Alter

Mailing Address 210 W Rittenhouse Square
Apartment 1506

City State Zip Code
Philadelphia PA 19103

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Artist/Philanthropist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837183

Amount of Each Receipt this Period
2100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1702 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sarah Kelso		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address 5142 Milburn Road		Transaction ID: 1836824	
City State Zip Code Saint Louis MO 63129	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions		
Name of Employer Occupation CSC Computer Programmer	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Mrs. Mary V. Barmettler		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 1388 Cordelia Avenue		Transaction ID: 1841061	
City State Zip Code San Jose CA 95129	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Miss Iris A. Gruwell		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5	
Mailing Address 290 Stoneykirk Dr		Transaction ID: 1841516	
City State Zip Code Bella Vista AR 72715	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1703 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Mary Forman Kaufman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 210 Villard Avenue		Transaction ID: 1836816
City State Zip Code Hastings Hdsn. NY 10706	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Mrs. Jane R. Olsen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address 5132 Saint Davids Drive		Transaction ID: 1836294
City State Zip Code Vero Beach FL 32967	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Dr. Jacqueline R. Cameron		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 513 W Aldine Ave Apt 2		Transaction ID: 1844812
City State Zip Code Chicago IL 60657	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation Northwestern University Physician	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1704 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Florence Forrest Mailing Address 1385 Bay Laurel Drive City Menlo Park State CA Zip Code 94025 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5 Transaction ID: 1838437 Amount of Each Receipt this Period 50.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Louise Hendrickson Mailing Address 1382 Newtown Langhorne Rd. #J103 City Newtown State PA Zip Code 18940 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5 Transaction ID: 1845242 Amount of Each Receipt this Period 100.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Jane P. Moser Mailing Address 21 Stuyvesant Oval, Apt. 9F City New York State NY Zip Code 10009 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5 Transaction ID: 1838185 Amount of Each Receipt this Period 50.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1705 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Ann Wansley

Mailing Address 51 Chula Lane

City State Zip Code
San Francisco CA 94114

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1841602

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Marie E. Kingdon

Mailing Address 1062 Carter's Grove

City State Zip Code
Indianapolis IN 46260

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: 1837841

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Marylouise Stafford

Mailing Address 900 E Harrison Avenue, H 4

City State Zip Code
Pomona CA 91767

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838066

Amount of Each Receipt this Period
150.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1706 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Karen Sundback		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 21 Kenmore Road		Transaction ID: 1836263
City State Zip Code Bloomfield CT 06002	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Cheryl S. Cummer		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address 21 Fairfield Street		Transaction ID: 1837845
City State Zip Code Boston MA 02116	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Rev. Margaret T. Cunningham		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 138 Rose Lane		Transaction ID: 1842982
City State Zip Code Haverford PA 19041	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation All Saints Church Clergy	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1707 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Debora Kailing

Mailing Address 505 Cypress Ave

City Ukiah State CA Zip Code 95482

FEC ID number of contributing federal political committee. **C**

Name of Employer Civil Engineer Occupation Pacific Conslt. Engrs. Inc.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1841584

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Joan Riddell Baer

Mailing Address 11329 French Horn Lane

City Reston State VA Zip Code 20191

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Investor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836902

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Esther Portnoy

Mailing Address 208 W. Florida Avenue

City Urbana State IL Zip Code 61801

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836942

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1708 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Carol Kuller Mailing Address 137 Great Barrington Road City State Zip Code West Stockbridge MA 01266 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5 Transaction ID: 1842474 Amount of Each Receipt this Period 100.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Lisa Smith Mailing Address 208 7th Street, Apt. 2B City State Zip Code Lindenhurst NY 11757 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5 Transaction ID: 1843572 Amount of Each Receipt this Period 25.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Lindenhurst Memorial Lib Librarian Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Mr. Clark M. Simms Mailing Address 1 Breezy Hill Road City State Zip Code Copake Falls NY 12517 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5 Transaction ID: 1844803 Amount of Each Receipt this Period 25.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1709 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. Fred Reames Mailing Address 522 Virginia Terrace City State Zip Code Madison WI 53726 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1843587 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	1		2	0	0	5	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		2	1		2	0	0	5														
100.00																							
Name of Employer Occupation University of Wisconsin Teacher/Scientist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

B. Full Name (Last, First, Middle Initial) Ms. Sally Drew Mailing Address 502 Leonard Street City State Zip Code Madison WI 53711 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1836277 Amount of Each Receipt this Period <table border="1"> <tr> <td>25.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	3		2	0	0	5	25.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		0	3		2	0	0	5														
25.00																							
Name of Employer Occupation State of Wisconsin Library Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

C. Full Name (Last, First, Middle Initial) Mr. James K. Donnell Mailing Address 207 Norman Drive City State Zip Code Cranberry Twp PA 16066 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1845912 Amount of Each Receipt this Period <table border="1"> <tr> <td>500.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	5	500.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		3	1		2	0	0	5														
500.00																							
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1710 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Arline Zuckerman

Mailing Address 11315 Victoria Avenue

City State Zip Code
Los Angeles CA 90066

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838039

Amount of Each Receipt this Period
250.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Dr. Jape Taylor

Mailing Address 500 N.W. 80th Boulevard

City State Zip Code
Gainesville FL 32607

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837178

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Helen Anderson

Mailing Address 1059 El Centro Avenue Apt. 2

City State Zip Code
Oakland CA 94602

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843571

Amount of Each Receipt this Period
40.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1711 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Valerie Block		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 50 Glenwood Rd		Transaction ID: 1845927	
City State Zip Code Montclair NJ 07043		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation Self-Employed Writer		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Marian L. Gade		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 7 / 2 0 0 5	
Mailing Address 136 Highland Blvd.		Transaction ID: 1845278	
City State Zip Code Kensington CA 94708		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation U of CA Researcher		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Dr. Donald G. Johnson		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 5 W. Oak Street		Transaction ID: 1837361	
City State Zip Code Ramsey NJ 07446		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation Retired		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1712 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Carolyn Baker

Mailing Address 11303 Full Cry Court

City State Zip Code
Oakton VA 22124

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 07 / 2005

Transaction ID: 1837797

Amount of Each Receipt this Period
75.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Karen Graffenberger

Mailing Address 2035 Norwood Avenue

City State Zip Code
Boulder CO 80304

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 31 / 2005

Transaction ID: 1845892

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Morton Yuter

Mailing Address 5 Dover Avenue

City State Zip Code
Garden City NY 11530

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 06 / 2005

Transaction ID: 1837319

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1713 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Judith A. Carty

Mailing Address 5 Byfield Lane

City State Zip Code
Dearborn MI 48120

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1843001

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Kathleen Turner

Mailing Address 20281 Forest Avenue

City State Zip Code
Castro Valley CA 94546

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Castro Valley Unified Sch Chemistry Teacher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842990

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Eleanor Endsley

Mailing Address 4970 Boardwalk Pl

City State Zip Code
Indianapolis IN 46220

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838080

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1714 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) M. E. Thouless Mailing Address 4959 Purdue Avenue NE City State Zip Code Seattle WA 98105 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 5 Transaction ID: 1845908 Amount of Each Receipt this Period 200.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation U of WA Professor Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Judy S. Goldenberg Mailing Address 4949 Joewood Drive City State Zip Code Sanibel FL 33957 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 5 Transaction ID: 1837152 Amount of Each Receipt this Period 100.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Homemaker Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Barbara A. Aman Mailing Address 4809 Ewing Avenue S City State Zip Code Minneapolis MN 55410 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5 Transaction ID: 1842974 Amount of Each Receipt this Period 50.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation American National Bank Banker Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1715 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Elaine L. Diamond

Mailing Address 2001 Holmby Avenue

City State Zip Code
Los Angeles CA 90025

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
U of Judison Program Coordinator

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1835633

Amount of Each Receipt this Period
25.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Virginia Royden

Mailing Address 13466 Three Forks Lane

City State Zip Code
Los Altos Hills CA 94022

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Homemaker

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838438

Amount of Each Receipt this Period
250.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Kellie Teter

Mailing Address 4760 W. 37th Avenue

City State Zip Code
Denver CO 80212

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UCHSC Public Health

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838452

Amount of Each Receipt this Period
25.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1716 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Linda L. Wise

Mailing Address 4749 Old Post Ct

City Boulder State CO Zip Code 80301

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841651

Amount of Each Receipt this Period
250.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Linda White

Mailing Address 1120 E. Balboa Boulevard

City Balboa State CA Zip Code 92661

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Artist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843551

Amount of Each Receipt this Period
200.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Carol T. Nelson

Mailing Address 13439 Calle Colina

City Poway State CA Zip Code 92064

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 8 / 2 0 0 5

Transaction ID: 1837609

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ► **0.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1717 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Helen F. Rich		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5
Mailing Address 200 Leeder Hill Dr Apt 317		Transaction ID: 1838478
City State Zip Code Hamden CT 06517	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Allison F. Brower		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 4745 Espana Court		Transaction ID: 1845264
City State Zip Code Carmichael CA 95608	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation San Juan Unified School Teacher	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Marguerite Jehle		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 4717 Collinos Way		Transaction ID: 1836917
City State Zip Code Oceanside CA 92056	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1718 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Marcia Rider

Mailing Address 20 Acacia Way

City State Zip Code
Santa Cruz CA 95062

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Capitola Book Cafe Bookseller

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836936

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Ann Vogel

Mailing Address 112 Starry Road

City State Zip Code
Sequim WA 98382

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836358

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Thomas J. Kane

Mailing Address 2 Van Rensselaer Avenue

City State Zip Code
Stamford CT 06902

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1841544

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1719 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Margaret T. Gelin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 105 Trowbridge Street, #4		Transaction ID: 1845918	
City State Zip Code Cambridge MA 02138	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Framingham, MA	Occupation Teacher	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Dr. Gustav Papanek		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 2 Mason Street		Transaction ID: 1842095	
City State Zip Code Lexington MA 02421	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer BIDE	Occupation Economist	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Laurie Barenborg		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 4610 S. Bradford Street		Transaction ID: 1841080	
City State Zip Code Seattle WA 98118	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer	Occupation REQUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1720 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Charlotte Moss		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address 134 E 71st St		Transaction ID: 1835599
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Self Occupation Designer	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Nancy S. Hyams		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 2 Madison Court		Transaction ID: 1837141
City State Zip Code Beachwood OH 44122	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Mary K. Reilly		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5
Mailing Address 4504 Alpine Rose Bnd		Transaction ID: 1838492
City State Zip Code Ellicott City MD 21042	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Brophy & Reilly Occupation Consultant	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date 0.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1721 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Dorothy Joy		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 10041 Resmar Pl.		Transaction ID: 1845887	
City La Mesa	State CA	Amount of Each Receipt this Period 50.00	
Zip Code 91941		Maria Cantwell Contributions	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] MEMO	
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Dr. Myron R. Blee		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 4498 Big Ridge Road		Transaction ID: 1837344	
City Glenville	State NC	Amount of Each Receipt this Period 50.00	
Zip Code 28736		Maria Cantwell Contributions	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] MEMO	
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Mary A. Delsman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address 4487 Picacho Drive		Transaction ID: 1836797	
City Riverside	State CA	Amount of Each Receipt this Period 25.00	
Zip Code 92507		Maria Cantwell Contributions	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] MEMO	
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1722 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Linda L. Halbur

Mailing Address 4472 Misty Way

City State Zip Code
Yorba Linda CA 92886

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Thales-Raytheon Systems Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 5

Transaction ID: 1841020

Amount of Each Receipt this Period
30.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Athena Caul

Mailing Address 4432 Sudley Road

City State Zip Code
Gainesville VA 20155

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
General Dynamics Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845901

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Vivian S. Lamb

Mailing Address 13382 Fairmont Way

City State Zip Code
Santa Ana CA 92705

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838043

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1723 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Juliana Gunnarsson Mailing Address 19924 163rd Avenue NE City State Zip Code Woodinville WA 98072 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5 Transaction ID: 1837129 Amount of Each Receipt this Period 100.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Susan D. McGreivy Mailing Address 105 Rachel Carson Way City State Zip Code Ithaca NY 14850 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5 Transaction ID: 1842105 Amount of Each Receipt this Period 50.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Ann Friend Mailing Address 4414 Durant Street, # 111 City State Zip Code Deer Park TX 77536 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5 Transaction ID: 1841773 Amount of Each Receipt this Period 25.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Calpine Corp. Engineer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1724 / 1975
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Rev. Lynne Lohr

Mailing Address 1114 E. 4th St.

City State Zip Code
Port Angeles WA 98362

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Ordained Minister

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
10 / 17 / 2005

Transaction ID: 1841783

Amount of Each Receipt this Period
22.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Linda Hansen

Mailing Address 9828 N Bentsen Road

City State Zip Code
McAllen TX 78504

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
10 / 31 / 2005

Transaction ID: 1845875

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Adalyn S. Brugger

Mailing Address 1973 Retreat Drive

City State Zip Code
Mechanicsville VA 23111

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Law Offices of Robert Parker-lawyer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
10 / 12 / 2005

Transaction ID: 1838230

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1725 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Mary A. Frey		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 1327 Eden Meadows Way		Transaction ID: 1841512
City State Zip Code Dayton OH 45440	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Barbara Lafer		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 44 Mandeville Drive		Transaction ID: 1841555
City State Zip Code Wayne NJ 07470	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Self	Occupation Psychologist Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Dr. Naomi Nakashima		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 44 Dawnview		Transaction ID: 1843516
City State Zip Code San Francisco CA 94131	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer	Occupation Retired Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1726 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Clair A. Sharpless		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address 1 Drumlin Road		Transaction ID: 1836865	
City State Zip Code West Simsbury CT 06092		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation Homemaker		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Mr. Jon Michael Asmundson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 1324 La Pointe Road		Transaction ID: 1841630	
City State Zip Code Eureka CA 95503		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation Retired		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Mr. Howard C. Poulter		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5	
Mailing Address 4375 Bridgeview Drive		Transaction ID: 1845239	
City State Zip Code Oakland CA 94602		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation Retired		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1727 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Loain S. Olsen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 437 Wild Indigo Ln		Transaction ID: 1841764
City State Zip Code Madison WI 53717	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Adalyn S. Brugger		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address 1973 Retreat Drive		Transaction ID: 1837840
City State Zip Code Mechanicsville VA 23111	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation Law Offices of Robert Parkerson lawyer	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Mildred L. Glimcher		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 435 E. 52nd Street, #24C		Transaction ID: 1837197
City State Zip Code New York NY 10022	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation PaceWildenstern Art Historian	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1728 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mrs. Joyce A. Mihanovich		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 4338 Marl Way		Transaction ID: 1843527	
City State Zip Code Carmichael CA 95608	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Lee Ann Swarm		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 432 Little Switzerland Road		Transaction ID: 1842984	
City State Zip Code Knoxville TN 37920	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions		
Name of Employer Occupation Legal Aid of E TN Attorney	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Mr. Murray Laver		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address 1950 SW Whiteside Drive		Transaction ID: 1836782	
City State Zip Code Corvallis OR 97333	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1729 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Nancy Lincoln Mailing Address 43 Hedge Road City State Zip Code Brookline MA 02445 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1841002 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	4		2	0	0	5	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	4		2	0	0	5														
100.00																							
Name of Employer: Walker Home & School Occupation: Educator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

B. Full Name (Last, First, Middle Initial) Mr. Steve L. Schwartz Mailing Address 425 S. Chickasaw Trail #348 City State Zip Code Orlando FL 32825 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1840987 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	0	5	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	5		2	0	0	5														
100.00																							
Name of Employer: Self Occupation: Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

C. Full Name (Last, First, Middle Initial) Ms. Helen E. Longino Mailing Address 1318 Noe Street City State Zip Code San Francisco CA 94131 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1844518 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	5		2	0	0	5	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		2	5		2	0	0	5														
100.00																							
Name of Employer: U. of Minnesota Occupation: Univ. Professor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1730 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Patricia J. Cabe

Mailing Address 19332 Evening Hill

City State Zip Code
Huntington Beach CA 92648

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Piano Teacher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836856

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. Fred Golding

Mailing Address 1113 Emeral Bay

City State Zip Code
Laguna Beach CA 92655

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 5

Transaction ID: 1845272

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Hillary A. Mayers

Mailing Address 425 Riverside Drive

City State Zip Code
New York NY 10025

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Social Worker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836340

Amount of Each Receipt this Period
200.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1731 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Joan Hull

Mailing Address 193 San Andreas Drive

City State Zip Code
Novato CA 94945

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1835587

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mrs. Kathleen Witowski

Mailing Address 13152 S. Cicero PMB 290

City State Zip Code
Crestwood IL 60445

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 5

Transaction ID: 1845256

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Joanne Skirving

Mailing Address 4220 South East Copper St.

City State Zip Code
Portland OR 97206

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Metro Family Service Comm Coordinator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837392

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1732 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Susan G. Morrison

Mailing Address 4205 Ramsey Avenue

City State Zip Code
Austin TX 78756

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1841523

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. Arthur Fry

Mailing Address 1923 E. Joyce Blvd. Apt. 323

City State Zip Code
Fayetteville AR 72703

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842941

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Laura Petersen

Mailing Address 418 E 59th Street #36B

City State Zip Code
New York NY 10022

FEC ID number of contributing federal political committee. **C**

Name of Employer Accenture Occupation Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836361

Amount of Each Receipt this Period
200.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1733 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Mary L. Richeson

Mailing Address 1312 Deveron Drive

City State Zip Code
New Haven IN 46774

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837217

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Suzanne M. Angevine

Mailing Address 4160 26th Street

City State Zip Code
Boulder CO 80304

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Lucent Technologies Software Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1841564

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Rosemary Vimont

Mailing Address 1922 Oregon Street

City State Zip Code
Berkeley CA 94703

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841624

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1734 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Harriet Miller		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 4119 Highwood Drive		Transaction ID: 1843559	
City State Zip Code Fort Wayne IN 46815		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation Aon Consulting Consultant		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Mr. Jonathan Salomon		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 3 / 2 0 0 5	
Mailing Address 192 Waterman St # 3		Transaction ID: 1835666	
City State Zip Code Providence RI 02906		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation Boston University Graduate Student		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Dr. Susan Conley		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 4116 Longview Road		Transaction ID: 1837388	
City State Zip Code Little Rock AR 72212		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation Self Physician		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1735 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Susan Borke		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 4102 38th St NW		Transaction ID: 1836881
City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer National Geographic Occupation Attorney	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Gloria Deison		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5
Mailing Address 1311 Peacefield Place		Transaction ID: 1838461
City State Zip Code Tallahassee FL 32308	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Marilyn T. Clements		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address 104 Wallacks Point		Transaction ID: 1836103
City State Zip Code Stamford CT 06902	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Self Occupation Artist	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1736 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Linda R. Dietel

Mailing Address P.O. Box 309

City State Zip Code
Flint Hill VA 22627

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 ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1844534

Amount of Each Receipt this Period
500.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Robin Hanes

Mailing Address 191 Lynn Cove Road

City State Zip Code
Asheville NC 28804

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Artist/Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 5

Transaction ID: 1845305

Amount of Each Receipt this Period
250.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms Mary Gabriella Gallatin

Mailing Address 408 Ira Avenue #L3

City State Zip Code
San Antonio TX 78209

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844833

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ 0.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1737 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Karen A. Curtis Mailing Address 406 W. 34th Street City State Zip Code Wilmington DE 19802 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 0 5 Transaction ID: 1843510 Amount of Each Receipt this Period 50.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation University of Delaware College professor Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Jean Thurston Mailing Address 10 Fiske Lane City State Zip Code Weston MA 02493 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5 Transaction ID: 1841712 Amount of Each Receipt this Period 50.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation REQUESTED Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Kristin W. Olsson Mailing Address 11127 Midway Road City State Zip Code Dallas TX 75229 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 3 / 2 0 0 5 Transaction ID: 1836350 Amount of Each Receipt this Period 10.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Worshan, Fortsythe & Wol Legal Assitant Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1738 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Katherine Simpson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 1001 Spring Street, Apt. 805		Transaction ID: 1841085	
City State Zip Code Silver Spring MD 20910	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] MEMO	

Full Name (Last, First, Middle Initial) B. Dr. Rachel Z. Ritvo		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5	
Mailing Address 4020 Everett Street		Transaction ID: 1845293	
City State Zip Code Kensington MD 20895	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation Physician	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] MEMO	

Full Name (Last, First, Middle Initial) C. Ms. Jean W. Campbell		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 4001 Glacier Hills Drive Unit 125		Transaction ID: 1844452	
City State Zip Code Ann Arbor MI 48105	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] MEMO	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1739 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. Richard Parrish		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5	
Mailing Address 30862 Turquoise Pl		Transaction ID: 1838448	
City State Zip Code Lebanon OR 97355	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Geraldine A. Herbert		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5	
Mailing Address 400 North Hulen Way PO Box 479		Transaction ID: 1844441	
City State Zip Code Ketchum ID 83340	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation Investor	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Valerie Merriam		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5	
Mailing Address 1900 W. Burma Road		Transaction ID: 1845280	
City State Zip Code Gosport IN 47433	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1740 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Dorothy G. Whitmore		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5	
Mailing Address 1309 N. Clayton Street		Transaction ID: 1838519	
City State Zip Code Wilmington DE 19806	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Ms. Martha H. McMahon		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 1900 SW Parkwood Drive		Transaction ID: 1841612	
City State Zip Code Portland OR 97225	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions		
Name of Employer Occupation IBM Contact Mgr	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Dr. Lisa A. Lowery		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 4 Lexington Road		Transaction ID: 1842467	
City State Zip Code Little Rock AR 72227	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions		
Name of Employer Occupation Little Rock Diagnostic Clinic Physician	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1741 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Ethel S. Brody Mailing Address 19 Quinine Hill City State Zip Code Columbia SC 29204 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5 Transaction ID: 1845915 Amount of Each Receipt this Period 100.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Dr. Joan Lamb Ulyot, M.D. Mailing Address 39805 North 112th Street City State Zip Code Scottsdale AZ 85262 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5 Transaction ID: 1836898 Amount of Each Receipt this Period 250.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Mr. John E. Schumacher Mailing Address 397 Hudson Avenue City State Zip Code Albany NY 12203 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5 Transaction ID: 1845924 Amount of Each Receipt this Period 30.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1742 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Catherine Kelley Mailing Address 19 Pleasant St City Gt Barrington State MA Zip Code 01230 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5 Transaction ID: 1838195 Amount of Each Receipt this Period 100.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Margaret C. Sheppard Mailing Address 3945 Magnolia Avenue Apt. 1E City Saint Louis State MO Zip Code 63110 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5 Transaction ID: 1841763 Amount of Each Receipt this Period 100.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Elinor Finkelstein Mailing Address 1307 Stotesbury Avenue City Wyndmoor State PA Zip Code 19038 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5 Transaction ID: 1842986 Amount of Each Receipt this Period 25.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1743 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Sue Lindner

Mailing Address 392 Sylvan Avenue

City State Zip Code
Mountain View CA 94041

FEC ID number of contributing federal political committee. **C**

Name of Employer Objectivity Inc. Occupation Technical Writer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1841751

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
B. J. Mill

Mailing Address 1887 Greenfield Avenue #3

City State Zip Code
Los Angeles CA 90025

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: 1837844

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Greta Newman

Mailing Address 39 Steppingstone Lane

City State Zip Code
Great Neck NY 11024

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836829

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1744 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Victoria H. Lowell		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address 188 Sippewissett Road		Transaction ID: 1844782	
City State Zip Code Falmouth MA 02540		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation Barnstable County County Commissioner		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Dr. Sharon M. Stein		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 5	
Mailing Address 1035 Leonello Avenue		Transaction ID: 1835030	
City State Zip Code Los Altos CA 94024		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation TPMG Physician		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Jennifer S. Whitaker		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5	
Mailing Address 39 5th Avenue		Transaction ID: 1835592	
City State Zip Code New York NY 10003		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation SELF WRITER		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1745 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Dr. Nancy G. Wilds

Mailing Address 1305 Windsor Point Road

City Norfolk State VA Zip Code 23509

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1840826

Amount of Each Receipt this Period
250.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Dorothy Merrill

Mailing Address 3831 Casper Avenue NW

City Grand Rapids State MI Zip Code 49544

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1841553

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Barbara Lawrence

Mailing Address 383 South Middlebush Road

City Somerset State NJ Zip Code 08873

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836398

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1746 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Samona Sheppard Mailing Address 1301 N Tamiami Trl Apt 713 City State Zip Code Sarasota FL 34236 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5 Transaction ID: 1844531 Amount of Each Receipt this Period 25.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Judy Lumbert Mailing Address 11102 Lincoln Trl City State Zip Code Indianapolis IN 46236 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5 Transaction ID: 1838082 Amount of Each Receipt this Period 100.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Annette Stewart Mailing Address 1822 Marydale Road City State Zip Code Dallas TX 75208 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5 Transaction ID: 1838140 Amount of Each Receipt this Period 100.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1747 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Gail McBride

Mailing Address 3703 Hillbrook Drive

City Austin State TX Zip Code 78731

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Investments

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836792

Amount of Each Receipt this Period
250.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Linda Manry

Mailing Address 18179 Bancroft Avenue

City Monte Sereno State CA Zip Code 95030

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1835630

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mrs. Joan M. Wendling

Mailing Address 11089 VanKal Ave.

City Lawton State MI Zip Code 49065

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation medical transcriptionist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845877

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1748 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Melinda K. Reed

Mailing Address 3671 Ward Road

City State Zip Code
Wheat Ridge CO 80033

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1841593

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mrs. Susanna Davison

Mailing Address 1301 Irving Avenue

City State Zip Code
Wheaton IL 60187

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Health Dept. Nursing Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836296

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Leni Klaimitz

Mailing Address 367 Locust Avenue

City State Zip Code
Rye NY 10580

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1844454

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1749 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Eugenia M. Durdall

Mailing Address 1812 Edgewood Lane

City State Zip Code
Menlo Park CA 94025

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 21 / 2005

Transaction ID: 1843497

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Luana E. Sever

Mailing Address 3635 64th Avenue, West

City State Zip Code
University PI WA 98466

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 17 / 2005

Transaction ID: 1841787

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Mary Sieber

Mailing Address 3621 Georgetown Street

City State Zip Code
Houston TX 77005

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 11 / 2005

Transaction ID: 1838021

Amount of Each Receipt this Period
25.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1750 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Rosamond L. Douglass

Mailing Address 1106 Catalina Road W

City State Zip Code
Jacksonville FL 32216

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843491

Amount of Each Receipt this Period
25.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Phyllis Winkler

Mailing Address 3610 Yacht Club Drive Suite 502

City State Zip Code
Aventura FL 33180

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836407

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Wendy Goldman

Mailing Address 3606 Fairmount St

City State Zip Code
Dallas TX 75219

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843503

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ 0.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1751 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Ellen Jacobsen-Isserman		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 1 / 2 0 0 5	
Mailing Address 3604 S vine St		Transaction ID: 1838059	
City State Zip Code Urbana IL 61802	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation WV University Dermatologist	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Mrs. Muriel Turetsky		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 1301 Carter Drive		Transaction ID: 1842955	
City State Zip Code Rockaway NJ 07866	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation Bergen Community College Professor	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Catherine C. Gerhold		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 1 / 2 0 0 5	
Mailing Address 1804 Wightman Street		Transaction ID: 1838159	
City State Zip Code Pittsburgh PA 15217	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation Self/Allegheny Homemaker/Lawyer	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1752 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Howard Kaufman

Mailing Address 130 Sunrise Avenue Apt. 505

City State Zip Code
Palm Beach FL 33480

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841065

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. John O'Toole

Mailing Address 3601 Connecticut Avenue NW # 410

City State Zip Code
Washington DC 20008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 5

Transaction ID: 1845295

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Dr. Libby A. Tanner

Mailing Address 1800 Sunset Harbour Drive Unit 1012

City State Zip Code
Miami FL 33139

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation
Occupation Psychotherapist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844779

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1753 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Lyndsay Downs Mailing Address 3562 NW 68th Street City State Zip Code Seattle WA 98117 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5 Transaction ID: 1836286 Amount of Each Receipt this Period 100.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Occupation homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Elteen K. Stone Mailing Address 3550 Pacific Avenue Apt. 705 City State Zip Code Livermore CA 94550 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5 Transaction ID: 1836794 Amount of Each Receipt this Period 100.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Lawrence Laboratory Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Marilyn M. Freeman Mailing Address 130 Pheasant Run Drive City State Zip Code Sequim WA 98382 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5 Transaction ID: 1836886 Amount of Each Receipt this Period 50.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1754 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Linda Byers		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 1105 Perkins		Transaction ID: 1837336	
City State Zip Code San Marcos TX 78666	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions		
Name of Employer Community Action	Occupation Nurse Practitioner	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Ms. Virginia Mattson		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 3517 17th Way SE		Transaction ID: 1840841	
City State Zip Code Olympia WA 98501	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions		
Name of Employer	Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Miss Rebecca L. Sterner		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 35 Horst Avenue		Transaction ID: 1843562	
City State Zip Code Lebanon PA 17042	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions		
Name of Employer Veteran's Admin Med Center	Occupation Optometrist	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1755 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Marcia J. Romick Mailing Address 1293 Regency City Eugene State OR Zip Code 97401 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1843549 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	1		2	0	0	5	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		2	1		2	0	0	5														
100.00																							
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

B. Full Name (Last, First, Middle Initial) Mr. Kenneth W. Salinger Mailing Address 18 Putnam Road City Arlington State MA Zip Code 02474 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1837620 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	9		2	0	0	5	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		0	9		2	0	0	5														
100.00																							
Name of Employer Occupation Palmer & Dodge LLP Lawyer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

C. Full Name (Last, First, Middle Initial) Ms. Lois Snedden Mailing Address 6093 Carriage House Way City Reno State NV Zip Code 89509 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1841684 Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	4		2	0	0	5	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	4		2	0	0	5														
50.00																							
Name of Employer Occupation Self Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1756 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. Donald C. Pelz Mailing Address 3470 Carpenter Road, # 211 City Ypsilanti State MI Zip Code 48197 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 1 / 2 0 0 5 Transaction ID: 1838070 Amount of Each Receipt this Period 100.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Mrs. Alice R. Burks Mailing Address 3445 Vintage Valley Road City Ann Arbor State MI Zip Code 48105 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 1 / 2 0 0 5 Transaction ID: 1838181 Amount of Each Receipt this Period 50.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Self Writer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Elisabeth N. Pantaleoni Mailing Address 18 Deshon Avenue City Bronxville State NY Zip Code 10708 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 1 / 2 0 0 5 Transaction ID: 1838189 Amount of Each Receipt this Period 100.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1757 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Catherine L. Fiore		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 18 Battle Green Road		Transaction ID: 1845249
City State Zip Code Lexington MA 02421	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation MIT Physicist	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Nancy M. Hay		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address 341 Harbor View Avenue		Transaction ID: 1835590
City State Zip Code Pismo Beach CA 93449	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Hollace S McCormick		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 341 Fern Glen		Transaction ID: 1836669
City State Zip Code La Jolla CA 92037	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1758 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Rose M. Hamlin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 1102 K Street		Transaction ID: 1845285
City State Zip Code Crescent City CA 95531	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Rebecca Behrendt		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 3403 Field Avenue		Transaction ID: 1844501
City State Zip Code Anacortes WA 98221	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation The Cat's Pajamas Programmer	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Joy S. Katoski		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 12740 Tiara Street		Transaction ID: 1836780
City State Zip Code Valley Village CA 91607	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1759 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Terry Saario Mailing Address 34 Park Ln City State Zip Code Minneapolis MN 55416 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Transaction ID: 1841537 Amount of Each Receipt this Period 250.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation NW Area Foundation Foundation President Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Margery Markowich Mailing Address 1785 Westwood Avenue City State Zip Code Columbus OH 43212 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5 Transaction ID: 1836944 Amount of Each Receipt this Period 50.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Dr. Estelle K. Meislich Mailing Address 338 Lacey Drive City State Zip Code New Milford NJ 07646 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5 Transaction ID: 1838466 Amount of Each Receipt this Period 500.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1760 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Susan Spero Mailing Address 1774 S. Uinta Way City State Zip Code Denver CO 80231 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5 Transaction ID: 1836685 Amount of Each Receipt this Period 50.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Spero and Company Principal Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Mr. Roy A Ickes Mailing Address 1274 Overlook Drive City State Zip Code Washington PA 15301 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5 Transaction ID: 1836381 Amount of Each Receipt this Period 100.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation W & J College Biology Professor Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Mr. Glenn H. Watts Mailing Address 1767 Southview Dr City State Zip Code Yellow Spgs OH 45387 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5 Transaction ID: 1837409 Amount of Each Receipt this Period 50.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation REQUESTED Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1761 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Janice Miller

Mailing Address 1266 West 20th Avenue

City Oshkosh State WI Zip Code 54902

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843591

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. Robert F. Hartmann

Mailing Address 335 Via Concha

City Aptos State CA Zip Code 95003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Lawyer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: 1837829

Amount of Each Receipt this Period
1000.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Dorothy L. Flaster

Mailing Address 1760 East Valley Road

City Montecito State CA Zip Code 93108

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842927

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1762 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Cynthia L. Wicker		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address Ste. 105 Pmb 283 9121 E. Tanque Verde Road		Transaction ID: 1841696
City Tucson State AZ Zip Code 85749	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Mrs. Bernice B. Pernhall		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address Rainberry Bay 1330 NW 26th Lane		Transaction ID: 1837817
City Delray Beach State FL Zip Code 33445	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Dr. Lynn Seaman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 3324 Vernal Avenue		Transaction ID: 1841671
City Merced State CA Zip Code 95340	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer SRI International	Occupation Senior Research Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1763 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Jean Pasche Mailing Address 1100 University Street, Apt 3F City State Zip Code Seattle WA 98101 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 0 5 Transaction ID: 1844462 Amount of Each Receipt this Period 50.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation PNRI Librarian Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Mr. Matthew Morris Mailing Address PO Box 9157 City State Zip Code Aspen CO 81612 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 8 / 2 0 0 5 Transaction ID: 1844757 Amount of Each Receipt this Period 5.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation FRD Project Inc Butler/Chef Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Nora Alice Rowe Mailing Address 1029 Meadowwood Lane City State Zip Code Bowling Green KY 42104 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 5 Transaction ID: 1837394 Amount of Each Receipt this Period 50.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1764 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Joan Steele Mailing Address 332 Glenn Street City Ashland State OR Zip Code 97520 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5 Transaction ID: 1841044 Amount of Each Receipt this Period 20.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Carolyn Franck Mailing Address 12618 W. Butter Field Drive City Sun City West State AZ Zip Code 85375 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Transaction ID: 1841580 Amount of Each Receipt this Period 50.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Mr. Joel Ginzberg Mailing Address PO Box 873 City Stone Ridge State NY Zip Code 12484 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5 Transaction ID: 1835636 Amount of Each Receipt this Period 250.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer self, semi-retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Psychologist Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1765 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Anne S. Carriere Mailing Address PO Box 84 City Norfolk State AR Zip Code 72658 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1837827 Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	7		2	0	0	5	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		0	7		2	0	0	5														
50.00																							
Name of Employer Occupation Name of Employer Occupation RECEIVED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

B. Full Name (Last, First, Middle Initial) Mrs. Jennifer Reynolds Mailing Address PO Box 83886 City Fairbanks State AK Zip Code 99708 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1841615 Amount of Each Receipt this Period <table border="1"> <tr> <td>250.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	4		2	0	0	5	250.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	4		2	0	0	5														
250.00																							
Name of Employer Occupation Name of Employer Occupation Geologist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

C. Full Name (Last, First, Middle Initial) Dr. Sarah K. Weinberg Mailing Address 3304 81st Place, SE City Mercer Island State WA Zip Code 98040 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1836281 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	3		2	0	0	5	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		0	3		2	0	0	5														
100.00																							
Name of Employer Occupation Name of Employer Occupation Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

SUBTOTAL of Receipts This Page (optional) ▶	<table border="1"> <tr> <td>0.00</td> </tr> </table>	0.00
0.00		
TOTAL This Period (last page this line number only) ▶	<table border="1"> <tr> <td></td> </tr> </table>	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1766 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Dr. Carl Brown

Mailing Address 1260 Los Arcos

City State Zip Code
Prescott AZ 86305

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Youth Count Youth Coordinator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836356

Amount of Each Receipt this Period
250.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Mary Jo Harbold

Mailing Address 1100 University Street
Apt. 7L

City State Zip Code
Seattle WA 98101

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843489

Amount of Each Receipt this Period
200.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Andrew Carson

Mailing Address PO Box 709

City State Zip Code
Wilson WY 83014

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Cony Corp mtn guide

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1835642

Amount of Each Receipt this Period
25.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1767 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Claire S. Davidson

Mailing Address 3300 Darby Road, Apt. 3311

City State Zip Code
Haverford PA 19041

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844847

Amount of Each Receipt this Period
25.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Madeleine Littman

Mailing Address 175 Richdale Avenue, # 114

City State Zip Code
Cambridge MA 02140

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Psychologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836387

Amount of Each Receipt this Period
5.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Margaret Poole

Mailing Address 33 Sunset Road

City State Zip Code
Wayland MA 01778

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Mitre Corp. Elec. Engr.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836391

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1768 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Elaine Howe Mailing Address PO Box 624 City Sulphur State OK Zip Code 73086 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 5 Transaction ID: 1837165 Amount of Each Receipt this Period 150.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Name of Employer Occupation Requested Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Maureen McCarthy Mailing Address 126 Waverly Place, Apt. 3E City New York State NY Zip Code 10011 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 0 5 Transaction ID: 1843480 Amount of Each Receipt this Period 100.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Patterson, Belknap, Webb & Tyler Lawyer Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Carol M. Edmunds Mailing Address PO Box 58 City Readsboro State VT Zip Code 05350 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 5 Transaction ID: 1837212 Amount of Each Receipt this Period 50.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1769 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Dennis White		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5	
Mailing Address PO Box 540127		Transaction ID: 1837764	
City Dallas	State TX	Zip Code 75354	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Self	Occupation Investor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

Full Name (Last, First, Middle Initial) B. Ms. Lynette B. Reilly		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 12516 Davan Drive		Transaction ID: 1844515	
City Silver Spring	State MD	Zip Code 20904	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

Full Name (Last, First, Middle Initial) C. Lois James		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 328 Paseo Pacifica		Transaction ID: 1843598	
City Encinitas	State CA	Zip Code 92024	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1770 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Miriam F. Yantis

Mailing Address 3269 Las Palmas

City State Zip Code
Houston TX 77027

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836786

Amount of Each Receipt this Period
25.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Anita Siegenthaler

Mailing Address PO Box 336

City State Zip Code
Pt. Clyde ME 04855

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843569

Amount of Each Receipt this Period
25.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Robert M. Lande

Mailing Address 325 Central Park W.

City State Zip Code
New York NY 10025

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842920

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1771 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Rhoda L. Honigman

Mailing Address PO Box 294

City State Zip Code
Oilville VA 23129

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: 1837822

Amount of Each Receipt this Period
300.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Sheila Gershen

Mailing Address PO Box 292

City State Zip Code
Santa Fe NM 87504

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844827

Amount of Each Receipt this Period
25.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Ed L. Rocker

Mailing Address 3230 Chenu Avenue

City State Zip Code
Sacramento CA 95821

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1840907

Amount of Each Receipt this Period
15.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1772 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Dorothy S. Hines		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 1 / 2 0 0 5	
Mailing Address PO Box 274		Transaction ID: 1838053	
City Warren	State VT	Zip Code 05674	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer self	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

B. Full Name (Last, First, Middle Initial) Ms. Lucinda Briggs		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 3 / 2 0 0 5	
Mailing Address 17028 NE 18th Street		Transaction ID: 1836288	
City Bellevue	State WA	Zip Code 98008	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Bellevue Public School	Occupation Teacher		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

C. Full Name (Last, First, Middle Initial) Mr. Arthur Lazarus, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 3201 Fessenden Street, N.W.		Transaction ID: 1843537	
City Washington	State DC	Zip Code 20008	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Sonosky, Chambers	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1773 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Cynthia Kayser

Mailing Address PO Box 48

City State Zip Code
Fairfax CA 94978

FEC ID number of contributing federal political committee. **C**

Name of Employer PG & E Occupation Utility Worker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1841756

Amount of Each Receipt this Period
75.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. Richard Toole

Mailing Address PO Box 256

City State Zip Code
Oak Bluffs MA 02557

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1841573

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Lorette Zirker

Mailing Address PO Box 249

City State Zip Code
High Rolls NM 88325

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836321

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1774 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Robert Bridgham

Mailing Address PO Box 242

City Eaton Center State NH Zip Code 03832

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836253

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Diane E. Grotz

Mailing Address 1241 Huron Road

City North Brunswick State NJ Zip Code 08902

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Schering Plough Inc Scientist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 5

Transaction ID: 1835181

Amount of Each Receipt this Period
25.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Sheridan Harvey

Mailing Address 110 6th Street SE # 303

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Library of Congress Librarian

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1841568

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1775 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Eleanor Grant

Mailing Address 1025 Bamar Lane

City State Zip Code
Galveston TX 77554

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836869

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. Gerrish H. Milliken

Mailing Address PO Box 1880

City State Zip Code
Oroville WA 98844

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1844504

Amount of Each Receipt this Period
1000.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Catherine Jacobson

Mailing Address 316 W 57th St

City State Zip Code
Hinsdale IL 60521

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
St. Luke's Medical Ctr Chief Financial Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838496

Amount of Each Receipt this Period
250.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1776 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Dorothy L. Shaw		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 1 / 2 0 0 5	
Mailing Address 316 Helen Street		Transaction ID: 1838164	
City Midland	State MI	Amount of Each Receipt this Period 50.00	
Zip Code 48640		Maria Cantwell Contributions	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] MEMO	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Nancy J. McCarthy		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address PO Box 178		Transaction ID: 1837166	
City Stinson Beach	State CA	Amount of Each Receipt this Period 50.00	
Zip Code 94970		Maria Cantwell Contributions	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] MEMO	
Name of Employer United Airlines Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Ft. Attendant Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Suzanne Seubert		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address PO Box 174		Transaction ID: 1836771	
City Wilmington	State DE	Amount of Each Receipt this Period 100.00	
Zip Code 19899		Maria Cantwell Contributions	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] MEMO	
Name of Employer State Of Del. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Lawyer Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1777 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Miss Doris Faber

Mailing Address 17 Cobble Road # 0-1

City State Zip Code
Salisbury CT 06068

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1841737

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. John M. Wolf, Jr.

Mailing Address PO Box 1429

City State Zip Code
Sanibel FL 33957

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836922

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Angelina K. Erbes

Mailing Address PO Box 1149

City State Zip Code
Whitefish MT 59937

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1844482

Amount of Each Receipt this Period
20.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1778 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Helga Y. Eaddy		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 2 / 2 0 0 5	
Mailing Address 313 Templeton		Transaction ID: 1838487	
City State Zip Code Shelbyville TN 37160	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions		
Name of Employer Occupation Kentucky Fried Chicken Cook	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Ms. Maria Pedak-Kari		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 24129 New Bury Road		Transaction ID: 1843561	
City State Zip Code Gaithersburg MD 20882	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions		
Name of Employer Occupation Montgomery Co. Librarian	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Kristina Santos		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address PO Box 1058		Transaction ID: 1841766	
City State Zip Code Patterson CA 95363	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions		
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1779 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Barbara Matthews

Mailing Address PO Box 10553

City State Zip Code
Fairbanks AK 99710

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837110

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Dortha E. Marquis

Mailing Address 124 Marshall Corner Woodville

City State Zip Code
Hopewell NJ 08525

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836382

Amount of Each Receipt this Period
500.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Julie C. Monson

Mailing Address PO Box 1029

City State Zip Code
Point Reyes Sta. CA 94956

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843522

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1780 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Roberta Ballard		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5
Mailing Address PO Box 1022		Transaction ID: 1838204
City State Zip Code Bodega Bay CA 94923	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation U of Penn Physician	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Mrs. Esther H. Palmer		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address Pennwood Vlg. # K205		Transaction ID: 1845865
City State Zip Code Newtown PA 18940	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Patricia Folkert		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 31 Shearwater		Transaction ID: 1844490
City State Zip Code Irvine CA 92604	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1781 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. Raymond Tchou Mailing Address 16765 Sunderland Road City State Zip Code Detroit MI 48219 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5 Transaction ID: 1838168 Amount of Each Receipt this Period 25.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Mrs. Barbara Ryder Mailing Address 166 Grove Avenue City State Zip Code Metuchen NJ 08840 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5 Transaction ID: 1841753 Amount of Each Receipt this Period 100.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Occupation Professor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Lorraine Barnhart Mailing Address P.O. Box 382 City State Zip Code Great Falls VA 22066 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5 Transaction ID: 1844467 Amount of Each Receipt this Period 100.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Occupation Executive Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1782 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Margaret Solomon Mailing Address P.O. Box 3303 City State Zip Code <u>Incline Village</u> <u>NV</u> <u>89450</u> FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1844797 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	8		2	0	0	5	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		2	8		2	0	0	5														
100.00																							
Name of Employer Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

B. Full Name (Last, First, Middle Initial) Ms. Arlene R. Popkin Mailing Address 307 Knollwood Road Ext City State Zip Code <u>Elmsford</u> <u>NY</u> <u>10523</u> FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1836811 Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	4		2	0	0	5	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		0	4		2	0	0	5														
50.00																							
Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

C. Full Name (Last, First, Middle Initial) Ms. Patsy Rogers Mailing Address PO Box 616 City State Zip Code <u>New Suffolk</u> <u>NY</u> <u>11956</u> FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1842971 Amount of Each Receipt this Period <table border="1"> <tr> <td>250.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	0		2	0	0	5	250.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		2	0		2	0	0	5														
250.00																							
Name of Employer Occupation Self Composer/Teacher Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1783 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Lisa B. Arbeiter		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address P.O. Box 311		Transaction ID: 1844859	
City Metuchen	State NJ	Zip Code 08840	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer NATO	Occupation Software Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

B. Full Name (Last, First, Middle Initial) Mrs. Martha Panetti		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 3061 Wintergreen Drive		Transaction ID: 1841667	
City Florissant	State MO	Zip Code 63033	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

C. Full Name (Last, First, Middle Initial) Ms. Linda Perez		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 1650 County Road 112		Transaction ID: 1837237	
City Floresville	State TX	Zip Code 78114	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer self	Occupation rancher		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1784 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Andrew Carson

Mailing Address PO Box 709

City State Zip Code
Wilson WY 83014

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Cony Corp mtn guide

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 1 / 2 0 0 5

Transaction ID: 1835097

Amount of Each Receipt this Period
25.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Patricia P. Voelz

Mailing Address 3055 Bentwater Drive

City State Zip Code
Montgomery TX 77356

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838245

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Susan Moundalexis

Mailing Address 16460 Machodoc Creek Lane

City State Zip Code
King George VA 22485

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842961

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1785 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Ingrid Heide Mailing Address 305 E. 24th Street City State Zip Code New York NY 10010 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 4 / 2 0 0 5 Transaction ID: 1841635 Amount of Each Receipt this Period 15.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Rosemary Rowan Mailing Address 666 Upas Street Unit 404 City State Zip Code San Diego CA 92103 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 5 Transaction ID: 1845850 Amount of Each Receipt this Period 50.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Urban Planner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Susan L. Hazard Mailing Address 1025 5th Avenue # 3CN City State Zip Code New York NY 10028 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 5 Transaction ID: 1837353 Amount of Each Receipt this Period 50.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1786 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Ruth R. Hailperin

Mailing Address 175 W. North Street, Apt. 234C

City State Zip Code
Nazaret PA 18064

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843528

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Margaret R. Greer

Mailing Address Dept. of Romances Studies
Duke University

City State Zip Code
Durham NC 27708

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Duke Univ. Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844822

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Mary Sue Ittner

Mailing Address Bob Rutemoeller
P.O. Box 587

City State Zip Code
Gualala CA 95445

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Financial Planner/Volunteer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838505

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ► 0.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1787 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. W. P. Harbour		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5	
Mailing Address 3302 Roxburg Drive		Transaction ID: 1838476	
City Lexington	State KY	Amount of Each Receipt this Period 50.00	
Zip Code 40503		Maria Cantwell Contributions	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] MEMO	
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Dr. Lynn E. Hauser		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 5	
Mailing Address 11 Sylvan Lane		Transaction ID: 1843052	
City Dekalb	State IL	Amount of Each Receipt this Period 250.00	
Zip Code 60115		Maria Cantwell Contributions	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] MEMO	
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Anne H. Ehrlich		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address Biological Sciences Stanford University		Transaction ID: 1836878	
City Stanford	State CA	Amount of Each Receipt this Period 100.00	
Zip Code 94305		Maria Cantwell Contributions	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] MEMO	
Name of Employer Stanford Univ.		Occupation Sr. Research Asst.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1788 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Penelope A. Taylor

Mailing Address 1643 Seacayne Blvd.

City Aptos State CA Zip Code 95003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836929

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mrs. Anita D. DeVine

Mailing Address 988 Blvd of the Arts #1210

City Sarasota State FL Zip Code 34236

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1835628

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Harriet Gruhn

Mailing Address 3025 NE 137 #207

City Seattle State WA Zip Code 98125

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842935

Amount of Each Receipt this Period
25.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ► 0.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1789 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. Robert Keller Mailing Address 9809 Ramsay Drive City Fredericksburg State VA Zip Code 22408 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1837359 Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	6		2	0	0	5	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		0	6		2	0	0	5														
50.00																							
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

B. Full Name (Last, First, Middle Initial) Ms. Donna Landau Sylvan Mailing Address 9785 Huntcliff Trace City Atlanta State GA Zip Code 30350 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1836805 Amount of Each Receipt this Period <table border="1"> <tr> <td>25.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	4		2	0	0	5	25.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		0	4		2	0	0	5														
25.00																							
Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

C. Full Name (Last, First, Middle Initial) Dr. Sharon Rae Jenkins Mailing Address 301 Coronado Dr Apt 1004 City Denton State TX Zip Code 76209 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1841542 Amount of Each Receipt this Period <table border="1"> <tr> <td>250.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	5	250.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	3		2	0	0	5														
250.00																							
Name of Employer Occupation Professor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1790 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Barbara J. Corwin

Mailing Address 1230 Winding Ridge Terrace

City State Zip Code
Colorado Springs CO 80919

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Sun Microsystems Software Engineering Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 13 / 2005

Transaction ID: 1841550

Amount of Each Receipt this Period
200.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Elizabeth J. Sherer

Mailing Address 96 Perrine Road

City State Zip Code
Monmouth Junction NJ 08852

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Films for the Humanities Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 11 / 2005

Transaction ID: 1838183

Amount of Each Receipt this Period
250.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mrs. Patricia J. Palmer

Mailing Address 96 Fairbanks Ave

City State Zip Code
Wellesley Hls MA 02481

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 04 / 2005

Transaction ID: 1836920

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1791 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Dr. M. Roberta Keiter

Mailing Address 3005 Portofino Isle 0-2

City State Zip Code
Coconut Creek FL 33066

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836800

Amount of Each Receipt this Period
250.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. Steven Mercado

Mailing Address 1628 Peapond Road

City State Zip Code
North Bellmore NY 11710

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845853

Amount of Each Receipt this Period
25.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Kathryn M. Ryan

Mailing Address 951 Hepburn Street

City State Zip Code
Williamsport PA 17701

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Lycoming College Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838073

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1792 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Sandra S. Laurenson

Mailing Address 937 Trimble Place

City State Zip Code
Sagamore Hills OH 44067

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Education Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 9 / 2 0 0 5

Transaction ID: 1837618

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Lynn S. Neuville

Mailing Address 9324 North 110th Street

City State Zip Code
Scottsdale AZ 85259

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Paramus Public Library Librarian

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1841571

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mrs. Joyce Hausdorff

Mailing Address 30 West 60th Street, Apt. 12R

City State Zip Code
New York NY 10023

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1841723

Amount of Each Receipt this Period
250.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1793 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Diane McNeilly		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 924 N. 6th Street		Transaction ID: 1844532	
City State Zip Code Rochelle IL 61068		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation Retired		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Sharon G. Callaway		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 5	
Mailing Address 922 Constellation Drive		Transaction ID: 1841562	
City State Zip Code Great Falls VA 22066		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation Housewife		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Mrs. Beatriz C. Clewell-Romero		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 1 / 2 0 0 5	
Mailing Address 1621 13th Street, N.W.		Transaction ID: 1838153	
City State Zip Code Washington DC 20009		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation National Science Foundation Policy Analyst/Researcher		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1794 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Ellen T. Hanly		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5	
Mailing Address 9205 122nd Court NE #A-3		Transaction ID: 1838464	
City State Zip Code Kirkland WA 98033	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Edith Naismith		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5	
Mailing Address 1224 Cornwall Avenue Apartment 507		Transaction ID: 1838042	
City State Zip Code Bellingham WA 98225	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Ruth M. Katz		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 30 Creekside Way		Transaction ID: 1837148	
City State Zip Code Asheville NC 28804	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Maria Cantwell Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1795 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Estelle T. Dashman

Mailing Address 11 Riverview Farm Road

City State Zip Code
Ossining NY 10562

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836367

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Eva Apfelbaum

Mailing Address 92 Foster Street

City State Zip Code
Littleton MA 01460

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 5

Transaction ID: 1845251

Amount of Each Receipt this Period
20.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Margaret W. Johnson

Mailing Address 9190 Brier Rd.

City State Zip Code
La Mesa CA 91942

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Grossmont College College Instructor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837341

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1796 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Maurine Behrens

Mailing Address 12222 Orange Drive

City State Zip Code
Whittier CA 90601

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837175

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Karen Martin

Mailing Address 916 N Graham Ave

City State Zip Code
Indianapolis IN 46219

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
IDEM Accountant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836303

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Sandra Casey

Mailing Address 915 Pompano drive

City State Zip Code
Jupiter FL 33458

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836280

Amount of Each Receipt this Period
25.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1797 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Debbie Linthorst

Mailing Address 7 Rumson Court

City Pennington State NJ Zip Code 08534

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836257

Amount of Each Receipt this Period
25.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Nancy N. Driscoll

Mailing Address 1620 Lombardi Rd

City Mount Shasta State CA Zip Code 96067

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842950

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Margret Jacoby

Mailing Address 912 Blossom Drive

City Santa Clara State CA Zip Code 95050

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841644

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1798 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Mary B. McMillan Mailing Address 2925 Lincoln Drive #713 City Roseville State MN Zip Code 55113 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1837138 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="2">250.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	5		2	0	0	5	250.00	
M	M	/	D	D	/	Y	Y	Y	Y															
1	0		0	5		2	0	0	5															
250.00																								
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td colspan="2">0.00</td> </tr> </table>		0.00																						
0.00																								

B. Full Name (Last, First, Middle Initial) Ms. Marcia Raeber-McClain Mailing Address 910 Holly Street City Blytheville State AR Zip Code 72315 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1838527 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="2">100.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	2		2	0	0	5	100.00	
M	M	/	D	D	/	Y	Y	Y	Y															
1	0		1	2		2	0	0	5															
100.00																								
Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td colspan="2">0.00</td> </tr> </table>		0.00																						
0.00																								

C. Full Name (Last, First, Middle Initial) Ms. CleoBell Heiple-Tice Mailing Address 1615 N. 2nd Avenue City Upland State CA Zip Code 91784 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1838016 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="2">50.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	1		2	0	0	5	50.00	
M	M	/	D	D	/	Y	Y	Y	Y															
1	0		1	1		2	0	0	5															
50.00																								
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td colspan="2">0.00</td> </tr> </table>		0.00																						
0.00																								

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1799 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Pamela L. Thul-Immler Mailing Address 9060 Madeline Lake Road City State Zip Code Woodruff WI 54568 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5 Transaction ID: 1836858 Amount of Each Receipt this Period 50.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Helen Long Mailing Address 2904 Via Chiquita City State Zip Code Santa Fe NM 87505 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5 Transaction ID: 1843520 Amount of Each Receipt this Period 50.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Margaret E. Layne Mailing Address 1613 Honeysuckle Drive City State Zip Code Blacksburg VA 24060 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5 Transaction ID: 1836338 Amount of Each Receipt this Period 100.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Project Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1800 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Ruth Anderson Zabre Mailing Address 11 N. Hillside Road City South Deerfield State MA Zip Code 01373 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1844851 Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	8		2	0	0	5	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		2	8		2	0	0	5														
50.00																							
Name of Employer Self Occupation Commerical Social Worker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

B. Full Name (Last, First, Middle Initial) Mrs. Sandra W. Wilson Mailing Address 9 Sawmill Lane City Greenwich State CT Zip Code 06830 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1837812 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	7		2	0	0	5	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		0	7		2	0	0	5														
100.00																							
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

C. Full Name (Last, First, Middle Initial) Dr. Jill D. Snyder Mailing Address 12222 Forsythe Drive City Austin State TX Zip Code 78759 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1837334 Amount of Each Receipt this Period <table border="1"> <tr> <td>25.00</td> </tr> </table> Maria Cantwell Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	6		2	0	0	5	25.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		0	6		2	0	0	5														
25.00																							
Name of Employer Self Occupation Editor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1801 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Jean Howard Mailing Address 89 Meridian Street City State Zip Code Melrose MA 02176 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5 Transaction ID: 1843499 Amount of Each Receipt this Period 100.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Partners Health Care Occupation Finance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Carole Sue Light Mailing Address PO Box 99 City State Zip Code Scaly Mtn NC 28775 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5 Transaction ID: 1837318 Amount of Each Receipt this Period 50.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer self Occupation psychologist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Mr. John B. Kerber Mailing Address 8834 Pointe Vista Drive City State Zip Code Victoria MN 55386 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5 Transaction ID: 1841653 Amount of Each Receipt this Period 50.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Hutchinson Area Health Care Occupation Psychologist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1802 / 1975
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Dr. Robert Katzman

Mailing Address 1611 Calle De Andluca

City State Zip Code
La Jolla CA 92037

FEC ID number of contributing federal political committee. **C**

Name of Employer Univ. of Cal Occupation Neurologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836778

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Janet Krack

Mailing Address 8774 Laurel Drive

City State Zip Code
Erie PA 16509

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843576

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Dr. Janet A Randall

Mailing Address 862 Jonive Rd

City State Zip Code
santa rosa CA 95472

FEC ID number of contributing federal political committee. **C**

Name of Employer San Francisco State Occupation Professor of Biology

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1838423

Amount of Each Receipt this Period
250.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1803 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Susan Olsen

Mailing Address 8601 Sultana Drive

City Anchorage State AK Zip Code 99516

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836790

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Ann K. Maddox

Mailing Address 289 Deer Path Ln

City Battle Creek State MI Zip Code 49015

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838484

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mrs. Catherine Manz Smith

Mailing Address 85316 Coyote Creek Road

City Veneta State OR Zip Code 97487

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1841730

Amount of Each Receipt this Period
250.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1804 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Beverlee Mitchell

Mailing Address 1605 N. 7th Street

City State Zip Code
Boise ID 83702

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841657

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Kathryn Kami

Mailing Address 2880 NE 14th Street, Apt. 405
The Pointe of Pompano Beach

City State Zip Code
Pompano Beach FL 33062

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837168

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Betty Grant

Mailing Address 2845 Colfax Ave S Apt 401

City State Zip Code
Minneapolis MN 55408

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
O'Leary and Grant Executive Search Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838149

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1805 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Kendall Tersiguel

Mailing Address Rue Du Groselenberg 54

City State Zip Code
1180 Uccle 00000

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836915

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mrs. S. Tellinghuisen

Mailing Address 837 S. Spring Avenue

City State Zip Code
La Grange IL 60525

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837377

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mrs. Darrell N. Helmuth

Mailing Address 83570 Woodland Lane

City State Zip Code
Florence OR 97439

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838151

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1806 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Virginia M. Ralston		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 8348 Colton Cove		Transaction ID: 1840882
City State Zip Code Germantown TN 38139	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Ida Braun		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 1 Baldwin Avenue, Apt. 709		Transaction ID: 1836875
City State Zip Code San Mateo CA 94401	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Phyllis J. Grossberg		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 831 Vista Grande Ave		Transaction ID: 1836809
City State Zip Code Los Altos CA 94024	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Maria Cantwell Contributions	
Name of Employer Occupation Self Consultant	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1807 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mrs. Mitzi G. Henderson Mailing Address 16 Sunset Lane City State Zip Code Menlo Park CA 94025 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 3 / 2 0 0 5 Transaction ID: 1843039 Amount of Each Receipt this Period 500.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Beulah Frankel-Tillisch Mailing Address 121 Vine Street, Unit 1401 City State Zip Code Seattle WA 98121 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 4 / 2 0 0 5 Transaction ID: 1841057 Amount of Each Receipt this Period 50.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Writer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Sara Anderson Mailing Address 100 South Street, Apt. 104 City State Zip Code Sausalito CA 94965 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 5 Transaction ID: 1837380 Amount of Each Receipt this Period 100.00 Maria Cantwell Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1808 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Renate Wasserman

Mailing Address 102 Tonset Rd.

City Orleans State MA Zip Code 02653

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
10 / 21 / 2005

Transaction ID: 1843504

Amount of Each Receipt this Period
50.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. George Y. Sodowick

Mailing Address 28 Mountain Ridge Drive

City Livingston State NJ Zip Code 07039

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
10 / 31 / 2005

Transaction ID: 1845869

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Dr. Norma K Lawler, Ph.D.

Mailing Address 8207 HWY 252

City Honea Path State SC Zip Code 29654

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Clinical Psychologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
10 / 11 / 2005

Transaction ID: 1838199

Amount of Each Receipt this Period
100.00

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ 0.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1809 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Dr. Kathleen S Crittenden

Mailing Address 820 S. Morgan Street, # 2

City State Zip Code
Chicago IL 60607

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
University of Illinois at Chicago Professor Emerita

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841069

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Marybeth Bronson

Mailing Address 28 Everett Street

City State Zip Code
Jamaica Plain MA 02130

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Massachusetts General Hospital Social Worker

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1840934

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Geraldine T. Hurley

Mailing Address 16 Pine Tree Road

City State Zip Code
Salisbury NC 28144

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837498

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1810 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Joan S. Pate

Mailing Address 1209 Pheasant Ridge

City State Zip Code
Goshen KY 40026

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: 1837835

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Caryle Miller

Mailing Address 8132 Keeler Street

City State Zip Code
Alexandria VA 22309

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DOE Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837426

Amount of Each Receipt this Period
200.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Shirley Gleich

Mailing Address 8116 Pine Circle

City State Zip Code
Tamarac FL 33321

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838114

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1811 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Constance Greenfield

Mailing Address 279 Sturges Highway

City State Zip Code
Westport CT 06880

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 5

Transaction ID: 1845268

Amount of Each Receipt this Period
250.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Dolores Crane

Mailing Address 16 New York Avenue

City State Zip Code
Stony Brook NY 11790

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837140

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Lynn Schoenmann

Mailing Address 800 Powell Street

City State Zip Code
San Francisco CA 94108

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842414

Amount of Each Receipt this Period
200.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1812 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Anne Patterson

Mailing Address 80 Buckingham St

City State Zip Code
Cambridge MA 02138

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1841772

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mrs. Linda J. Ervin

Mailing Address 2731 St Regis Ave

City State Zip Code
Brentwood CA 94513

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842612

Amount of Each Receipt this Period
150.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Lynda J. Wills

Mailing Address 8 MacArthur Street

City State Zip Code
Somerville MA 02145

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Town of Winchester, MA Librarian

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842507

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1813 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. Jesse W. Kehres Mailing Address 8 Classic Cir City Madison State WI Zip Code 53719 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1834882 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="2">100.00</td> </tr> </table> Melissa Bean Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	1		2	0	0	5	100.00	
M	M	/	D	D	/	Y	Y	Y	Y															
1	0		0	1		2	0	0	5															
100.00																								
Name of Employer REQUESTED Occupation Engineer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td colspan="2">0.00</td> </tr> </table>		0.00																						
0.00																								

B. Full Name (Last, First, Middle Initial) Ms. Janice L. Moritz Mailing Address 272 Getzville Road City Amherst State NY Zip Code 14226 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1845961 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="2">50.00</td> </tr> </table> Melissa Bean Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	5	50.00	
M	M	/	D	D	/	Y	Y	Y	Y															
1	0		3	1		2	0	0	5															
50.00																								
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td colspan="2">0.00</td> </tr> </table>		0.00																						
0.00																								

C. Full Name (Last, First, Middle Initial) Ms. Roberta Reich Mailing Address 7825 Westwood Drive City Elmwood Park State IL Zip Code 60707 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 1837519 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="2">100.00</td> </tr> </table> Melissa Bean Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	6		2	0	0	5	100.00	
M	M	/	D	D	/	Y	Y	Y	Y															
1	0		0	6		2	0	0	5															
100.00																								
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td colspan="2">0.00</td> </tr> </table>		0.00																						
0.00																								

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1814 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Nancy C. Martin

Mailing Address 2706 Belknap Beach

City Prospect State KY Zip Code 40059

FEC ID number of contributing federal political committee. **C**

Name of Employer University of Louisville Occupation Administrator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1840972

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mrs. Mary Besore

Mailing Address 2705 Stampede Court

City Rocklin State CA Zip Code 95765

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836434

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Lynne M. Diamond

Mailing Address 1200 N. College Avenue

City Claremont State CA Zip Code 91711

FEC ID number of contributing federal political committee. **C**

Name of Employer Premier Medical Group Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844853

Amount of Each Receipt this Period
250.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1815 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Nancy Baldwin

Mailing Address 78 Dietz Street

City State Zip Code
Oneonta NY 13820

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842570

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Marcia S. Allen

Mailing Address 1551 Spring Drive

City State Zip Code
Wichita KS 67208

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
University of Iowa Social Worker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837463

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Barbara A. Hopfinger

Mailing Address 773 N. 1st Street

City State Zip Code
El Cajon CA 92021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837454

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1816 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Stephen A. Levy

Mailing Address 7701 Leesburg Drive

City State Zip Code
Bethesda MD 20817

FEC ID number of contributing federal political committee. **C**

Name of Employer self-employed Occupation consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844863

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mrs. Harriet Kogen

Mailing Address 1200 Lindenwood Drive

City State Zip Code
Winnetka IL 60093

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837474

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Dr. Marc F. Collin

Mailing Address 2692 Landon Road

City State Zip Code
Shaker Heights OH 44122

FEC ID number of contributing federal political committee. **C**

Name of Employer MetroHealth Medical Center Occupation physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1843673

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1817 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Charles E. Haley

Mailing Address 15426 W. Fairmount Avenue

City State Zip Code
Goodyear AZ 85338

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: 1837816

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Jennifer Berlekamp

Mailing Address 120 Hazel Lane

City State Zip Code
Piedmont CA 94611

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Housewife/Volunteer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843543

Amount of Each Receipt this Period
500.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Renate Wasserman

Mailing Address 102 Tonset Rd.

City State Zip Code
Orleans MA 02653

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843506

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1818 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Shearer D. Bowman

Mailing Address 756 Garden Grove Walk

City Lexington State KY Zip Code 40502

FEC ID number of contributing federal political committee. **C**

Name of Employer U of Texas, Austin Occupation Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841617

Amount of Each Receipt this Period
150.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Margaret M. Podlich

Mailing Address 2645 E Southern Ave Apt A226

City Tempe State AZ Zip Code 85282

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842516

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Ann S. Lemke

Mailing Address 7450 Olivetas Avenue, # D361

City LaJolla State CA Zip Code 92037

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837486

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1819 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Susan Stanton

Mailing Address 741 W 58th St

City State Zip Code
Casper WY 82601

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Casper Star-Tribune Reporter

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842579

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Merilee O. Ross

Mailing Address 15327 Sherwood Forest Dr

City State Zip Code
Tampa FL 33647

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845960

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Jane L. Godfrey

Mailing Address 7400 Birch Ave

City State Zip Code
Takoma Park MD 20912

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
IMF HR Professional

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845952

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1820 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Aino Husen

Mailing Address 2625 Boone Avenue S

City State Zip Code
Minneapolis MN 55426

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842605

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Lael Braymer

Mailing Address 2604 123rd Avenue SE

City State Zip Code
Bellevue WA 98005

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1841530

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Elizabeth A. Jackets

Mailing Address 7306 Channel View Drive

City State Zip Code
Anacortes WA 98221

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837408

Amount of Each Receipt this Period
10.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1821 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Marjorie B. Harris Mailing Address 1529 West Hood Avenue City Chicago State IL Zip Code 60660 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 5 Transaction ID: 1845943 Amount of Each Receipt this Period 25.00 Melissa Bean Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Mary E. Lerza Mailing Address 2600 Overland Avenue #101 City Los Angeles State CA Zip Code 90064 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 5 Transaction ID: 1845962 Amount of Each Receipt this Period 100.00 Melissa Bean Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Marcia T. Knowles Mailing Address 7300 Dearwester Dr Apt 210 City Cincinnati State OH Zip Code 45236 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 5 Transaction ID: 1836842 Amount of Each Receipt this Period 100.00 Melissa Bean Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Self Housewife Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1822 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Cynthia Metcalfe

Mailing Address 26 Upper Ladue Road

City State Zip Code
Saint Louis MO 63124

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Volunteer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 5

Transaction ID: 1845240

Amount of Each Receipt this Period
200.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Phyllis H. Goldman

Mailing Address 2593 Fairford Ln

City State Zip Code
Northbrook IL 60062

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837461

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Karen Cox

Mailing Address 15214 Manzanita Diggins

City State Zip Code
Nevada City CA 95959

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: 1837795

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1823 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Patricia Perry

Mailing Address 257 Bartram Road

City State Zip Code
Riverside IL 60546

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838436

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Nadine Martin

Mailing Address 102 Poshard Street

City State Zip Code
Pleasant Hill CA 94523

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837543

Amount of Each Receipt this Period
20.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. David G. Stahl, D.M.D.

Mailing Address 100 Magnolia Road

City State Zip Code
Manchester NH 03104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837561

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1824 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Mary Nell Allen

Mailing Address 719 Lincoln Street

City State Zip Code
Sayre PA 18840

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836767

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Georgia R. Locker

Mailing Address 713 Duke Square

City State Zip Code
Fort Collins CO 80525

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
City of Jeffersonville IN Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837333

Amount of Each Receipt this Period
20.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Margaret Hauck

Mailing Address 12 Running Brook Road

City State Zip Code
Bridgewater NJ 08807

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Home Hauck Accountant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1835664

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1825 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Judith E. Sanderson

Mailing Address 1520 15th Avenue East Apt. 48

City State Zip Code
Seattle WA 98112

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: 1837813

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Karen J. Keefer

Mailing Address 705 Chesapeake Avenue

City State Zip Code
Silver Spring MD 20910

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FEMA Em Mgmt Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841676

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Jean B. Schreiber

Mailing Address 152 Glenwood Avenue

City State Zip Code
Winnetka IL 60093

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838063

Amount of Each Receipt this Period
15.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1826 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Yvette Rudnitzky

Mailing Address 702 W. Matson Run Parkway

City State Zip Code
Wilmington DE 19802

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation
Self LCSW

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836409

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Beth Bangert

Mailing Address 10842 Wilkinson Avenue

City State Zip Code
Cupertino CA 95014

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation
Self Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842607

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Andrea Michael

Mailing Address 2504 Briargrove Drive

City State Zip Code
Austin TX 78704

FEC ID number of contributing federal political committee. **C**

Name of Employer Self employed Occupation
Self employed Psychotherapist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1835627

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1827 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Peter A. Politzer

Mailing Address 701 Kettner Blvd. #53

City State Zip Code
San Diego CA 92101

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: 1837808

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. David L. Wells

Mailing Address 7000 Steely Ridge Road

City State Zip Code
Grizzly Flats CA 95636

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1840994

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Catherine Campbell

Mailing Address 2500 S Melanie Lane

City State Zip Code
Sioux Falls SD 57103

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842608

Amount of Each Receipt this Period
20.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1828 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Susan P. Cramer

Mailing Address 25 Autumn Lane

City Amherst State MA Zip Code 01002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
10 / 11 / 2005

Transaction ID: 1838213

Amount of Each Receipt this Period
200.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Jane M. Tripp

Mailing Address 249 Azalea Ln

City West Grove State PA Zip Code 19390

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
10 / 06 / 2005

Transaction ID: 1837541

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Jean R. Reller

Mailing Address 1507 Woodacre Drive

City McLean State VA Zip Code 22101

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
10 / 06 / 2005

Transaction ID: 1837537

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1829 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Carol Stein

Mailing Address 680 N Lake Shore Dr Apt 205

City State Zip Code
Chicago IL 60611

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1840864

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Lynnette McGie

Mailing Address 248 W 3rd Avenue

City State Zip Code
Chico CA 95926

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838086

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Pamela Moore

Mailing Address 6768 Areca Blvd.

City State Zip Code
Sarasota FL 34241

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1840945

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1830 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Betty Head		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 119 Maple Road		Transaction ID: 1837512
City State Zip Code Cobleskill NY 12043	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Prof. Robert F. Meagher		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address 108 Curtis Street		Transaction ID: 1837849
City State Zip Code Somerville MA 02144	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Carol Alsberge		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 673 County Road 335		Transaction ID: 1842584
City State Zip Code Franklin MO 65250	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation Nova Southeastern Univ Fundraiser	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1831 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Irene K Leiwant

Mailing Address 246 Crescenzi Court

City State Zip Code
West Orange NJ 07052

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837160

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. Isaac Heard

Mailing Address 6728 Constitution Lane

City State Zip Code
Charlotte NC 28210

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Enterprise Foundation Urban Planner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842413

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Robert L. Boileau

Mailing Address 6724 Ralston Beach Circle

City State Zip Code
Tampa FL 33614

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842401

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1832 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Ellen C. Siever

Mailing Address 67 Beals Street

City State Zip Code
Brookline MA 02446

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Editor/Writer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842378

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mrs. Barbara B. Seiler

Mailing Address 119 Laurel Hollow Way

City State Zip Code
Saluda NC 28773

FEC ID number of contributing federal political committee. **C**

Name of Employer Heartwood Occupation gallery owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841032

Amount of Each Receipt this Period
250.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Dr. Virginia Y. Blacklidge

Mailing Address 663 Coventry Road

City State Zip Code
Kensington CA 94707

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Psychiatrist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842448

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1833 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Sara M. Pfaff

Mailing Address 2425 Sherwood Road

City Columbus State OH Zip Code 43209

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836425

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Dorothy A. Dayton

Mailing Address 2423 Walden Court

City Iowa City State IA Zip Code 52246

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842456

Amount of Each Receipt this Period
300.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Irene G. Goldman

Mailing Address 15 West 72nd Street, Apt. 21S

City New York State NY Zip Code 10023

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842384

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1834 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Rosemary Anne Smith		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 653 Ravel Court		Transaction ID: 1840952	
City State Zip Code Las Vegas NV 89145	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions		
Name of Employer Occupation Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Mrs. Eleanor Weiss-Zoub		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 6509 N. Kilbourn Avenue		Transaction ID: 1842530	
City State Zip Code Lincolnwood IL 60712	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions		
Name of Employer Occupation Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Mary Catharine Hudspeth		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 118 E. 6th Street		Transaction ID: 1842451	
City State Zip Code Ontario CA 91764	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions		
Name of Employer Occupation Cal Poly-Pomona Director	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1835 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Patricia S. Elvebak

Mailing Address 650 Oakdale Avenue

City State Zip Code
Corte Madera CA 94925

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838498

Amount of Each Receipt this Period
200.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Roberta Martini

Mailing Address 1175 York Avenue #17D

City State Zip Code
New York NY 10021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1841720

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Mary L. Burke

Mailing Address 65 E Elm St

City State Zip Code
Chicago IL 60611

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836423

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1836 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Nancy G Pastroff

Mailing Address 6420 SW 50 Street

City	State	Zip Code
Miami	FL	33155

FEC ID number of contributing federal political committee. **C**

Name of Employer Pastroff, Barja, Kelly & Co.	Occupation Certified Public Accountant
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838117

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Nedra Palmer

Mailing Address 6415 Paradise Pt. Road

City	State	Zip Code
Flowery Br	GA	30542

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation REQUESTED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842600

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Lois J. Lipton

Mailing Address 24 W. Erie Street, Apt. 4N

City	State	Zip Code
Chicago	IL	60610

FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Attorney
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841090

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1837 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Hans Engelke

Mailing Address 640 Weaver Avenue

City State Zip Code
Kalamazoo MI 49006

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838512

Amount of Each Receipt this Period
70.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Ruth M. Holland

Mailing Address 24 Peacock Court

City State Zip Code
San Rafael CA 94901

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Conrad Imports, Inc. President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1840834

Amount of Each Receipt this Period
500.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Carol B. Leibman

Mailing Address 100 Diplomat Drive, # 6F

City State Zip Code
Mt. Kisco NY 10549

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 5

Transaction ID: 1834966

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1838 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Gail W. Chester		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address 24 Mill Road		Transaction ID: 1844457	
City State Zip Code Matawan NJ 07747	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions		
Name of Employer Middlesex Co. Legal Svcs. Occupation Attorney	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date 0.00		

Full Name (Last, First, Middle Initial) B. Ms. Jill G. Kraus		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 791 Park Avenue, Apt. 6A		Transaction ID: 1842548	
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions		
Name of Employer Self Occupation Designer	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Nancy Trick		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 6302 W Halbert Rd		Transaction ID: 1837425	
City State Zip Code Bethesda MD 20817	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions		
Name of Employer self Occupation consultant	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1839 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. Gary Gemmer		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 63 Lincoln Lane		Transaction ID: 1842464
City Lucasville State OH Zip Code 45648	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Melissa Bean Contributions [MEMO ITEM] MEMO
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Ms. Delta J. Osborne		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 148 Crossbow Lane		Transaction ID: 1843600
City Gaithersburg State MD Zip Code 20878	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		Melissa Bean Contributions [MEMO ITEM] MEMO
Name of Employer Occupation NIH of Health Deputy ARC Manager	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Dr. Alan M. Solinger		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 1465 65th St Apt 253		Transaction ID: 1841025
City Emeryville State CA Zip Code 94608	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Melissa Bean Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Amgen Inc. Physician	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1840 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Alison H. Prindle

Mailing Address 235 N. Union Street

City State Zip Code
Delaware OH 43015

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Otterbein College Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842957

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mrs. Helen Volk

Mailing Address 6201 Rutland Drive

City State Zip Code
Carmichael CA 95608

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Cal. Fed. Bank Real Estate Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843487

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Dr. Alice A. Passer

Mailing Address 62 Meadowbrook Road

City State Zip Code
Bangor ME 04401

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Northeast Cardiology Assoc. Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844854

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1841 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Holley Humphrey

Mailing Address 233 Rogue River Highway
#173

City Grants Pass State OR Zip Code 97527

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Speaker/Trainer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838454

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Judy S. Cottle

Mailing Address 1170 Chatfield Road

City Winnetka State IL Zip Code 60093

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837473

Amount of Each Receipt this Period
75.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Robert Brown

Mailing Address 2315 Salem Village Road
Apt. F

City Parkville State MD Zip Code 21234

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Psychologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1835606

Amount of Each Receipt this Period
20.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1842 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Rosalie A. Beloff		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 607 Ocean Drive Apartment 3J		Transaction ID: 1842604
City State Zip Code Key Biscayne FL 33149	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Cordelia N. Merritt		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 8 Mount Hunger Road		Transaction ID: 1837563
City State Zip Code Hartland VT 05048	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Mrs. L. Dietrichson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 231 Sult Road		Transaction ID: 1842377
City State Zip Code Millville PA 17846	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1843 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Cricket Levering

Mailing Address 604 NE 165th Street Apt. 113

City Shoreline State WA Zip Code 98155

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842494

Amount of Each Receipt this Period
20.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Grace Radin

Mailing Address 107 River Road

City Nyack State NY Zip Code 10960

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1835620

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Jerome P. Newmark

Mailing Address 604 19th Street, East

City Jasper State AL Zip Code 35501

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 5

Transaction ID: 1845245

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1844 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Hugh M. Jackson

Mailing Address 6035 W Mansfield Ave Unit 247

City State Zip Code
Denver CO 80235

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845885

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Nancy E Anderson

Mailing Address 23 Teresa Road

City State Zip Code
Hopkinton MA 01748

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
retired writer/organizer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1843630

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Jane L. Davis

Mailing Address 143 Inkberry Road

City State Zip Code
Hendersonville NC 28739

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842446

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1845 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Patricia G. Miller

Mailing Address 6015 Wellesley Avenue

City State Zip Code
Pittsburgh PA 15206

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Reed,Smith,Shaw&McClay Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837208

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Patricia Clark

Mailing Address 23 Lake Drive

City State Zip Code
Plainfield IL 60544

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1835653

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Ellen Siegel

Mailing Address 229 Golf Edge

City State Zip Code
Westfield NJ 07090

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842617

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1846 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Laura D. Peterson

Mailing Address 60 Jacob Gates Road

City State Zip Code
Harvard MA 01451

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1840999

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Sally P. McGarry

Mailing Address 6 Anglers Pond Court

City State Zip Code
Hilton Head SC 29926

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842534

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Judith Wolfe

Mailing Address 11644 Harborview

City State Zip Code
Cleveland OH 44102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Forest City Enterprises Finance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1835615

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1847 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Betty Jean Adamson

Mailing Address 228 N. Colony Drive

City State Zip Code
Edgewood KY 41017

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842453

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Clare B. Crane

Mailing Address 5950 Avenida Chamnez

City State Zip Code
La Jolla CA 92037

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837467

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Anne M. Vawser

Mailing Address 22608 Melia Road

City State Zip Code
Gretna NE 68028

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
National Park Service Archeologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844841

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1848 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Elizabeth J. Jones

Mailing Address 226 Countryview Road

City State Zip Code
Slippery Rock PA 16057

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837451

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Ann Donovan Lee

Mailing Address 116 Channing Lane

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1840968

Amount of Each Receipt this Period
75.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Joanne Senyk

Mailing Address 5800 Trailridge Drive

City State Zip Code
Austin TX 78731

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837482

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1849 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Phyllis R. Farley

Mailing Address 580 Park Avenue
#6-A

City State Zip Code
New York NY 10021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836841

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Marilyn W. Reed

Mailing Address 22501 130th Street

City State Zip Code
Danville IA 52623

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837214

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mrs. Andrea Jackson

Mailing Address 568 Bedford Avenue

City State Zip Code
Saint Louis MO 63130

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Attorney

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842532

Amount of Each Receipt this Period
200.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1850 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Irene E. Wright

Mailing Address 5654 El Gato Lane

City State Zip Code
Meridian ID 83642

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842557

Amount of Each Receipt this Period
30.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. William Midboe

Mailing Address 1408 Cooper Avenue

City State Zip Code
Turlock CA 95380

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845940

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Colette Meunier

Mailing Address 564 Sandy Way

City State Zip Code
Benicia CA 94510

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842540

Amount of Each Receipt this Period
150.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1851 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Sharon Murphy

Mailing Address 2233 Summit Avenue

City State Zip Code
Saint Paul MN 55105

FEC ID number of contributing federal political committee. **C**

Name of Employer U of MN Occupation Biochemist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1837975

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Janet Cook Howard

Mailing Address 5624 Boatwright Circle

City State Zip Code
Williamsburg VA 23185

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842436

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Jacob S. Samkoff

Mailing Address 560 Jackson Avenue

City State Zip Code
Washington Tp NJ 07676

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845959

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1852 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Jennifer Helen Campbell, M.D.		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 2230 Ridge Drive		Transaction ID: 1845945
City Mars State PA Zip Code 16046	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Melissa Bean Contributions [MEMO ITEM] MEMO
Name of Employer Unemployed Occupation Physician	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Mary Brucklacher		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 560 Deer Lake Dr		Transaction ID: 1841511
City Findlay State OH Zip Code 45840	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Melissa Bean Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Homemaker	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Yvonne C. Martin		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 2230 Chestnut St		Transaction ID: 1844469
City Waukegan State IL Zip Code 60087	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Melissa Bean Contributions [MEMO ITEM] MEMO
Name of Employer Abbott Labs Occupation Research scientist	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1853 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Joan F. Green

Mailing Address 555 Laurel Street

City State Zip Code
San Francisco CA 94118

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation educator/consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 8 / 2 0 0 5

Transaction ID: 1837607

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mrs. Jean Brown

Mailing Address 1400 North Green Bay Road

City State Zip Code
Lake Forest IL 60045

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842976

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Miss Dolores M. Lowry

Mailing Address 5501 Legend Hills Ln

City State Zip Code
Spring Hill FL 34609

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836450

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1854 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Katharine Mieszkowski

Mailing Address 220 Filbert Street

City State Zip Code
San Francisco CA 94133

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Salon.com Writer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841692

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Joan Chrisler

Mailing Address 116 5th Ave.

City State Zip Code
Milford CT 06460

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Connecticut College Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843496

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Rae Jeanne Kier

Mailing Address 55 Spring Garden St.

City State Zip Code
Hampden CT 06517

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: 1837809

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1855 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. James T. Langland

Mailing Address 1014 Oakland Park Road

City State Zip Code
Thief River Falls MN 56701

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Dakota Clinic Physician

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836292

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Diana Simon

Mailing Address 55 E. Erie Street, Apt. 4505

City State Zip Code
Chicago IL 60611

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841608

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Mary Nicholaisen

Mailing Address 216 Reservoir Road

City State Zip Code
San Rafael CA 94901

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842596

Amount of Each Receipt this Period
45.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1856 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Caroline G. Lieberman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address 55 Arroyo Way		Transaction ID: 1841522
City State Zip Code San Francisco CA 94127	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation City College San Francisc Instructor	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Cheryl L. Hiipakka		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 5487 S. Cornell Avenue		Transaction ID: 1842427
City State Zip Code Chicago IL 60615	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Barbara Asner		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 5436 S. Hyde Park Blvd.		Transaction ID: 1843588
City State Zip Code Chicago IL 60615	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1857 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Nathan Savin

Mailing Address 216 Magowan Ave

City State Zip Code
Iowa City IA 52246

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
U IA Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838511

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mrs. Virginia G. Barksdale

Mailing Address 140 Crestmont Drive

City State Zip Code
Madison VA 22727

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: 1837837

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Peg Shaw

Mailing Address 2147 O Street, N.W.
#306

City State Zip Code
Washington DC 20037

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841686

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ 0.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1858 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Carolyn C. Meisel		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 54 Westview Cres		Transaction ID: 1837565	
City State Zip Code Geneseo NY 14454	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C		Melissa Bean Contributions	
Name of Employer Occupation Suny Geneseo Professor	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date 0.00		

B. Full Name (Last, First, Middle Initial) Ms. A Murray Johnson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 54 Roosevelt Drive		Transaction ID: 1842519	
City State Zip Code Poughquag NY 12570	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Melissa Bean Contributions	
Name of Employer Occupation IBM Manager	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date 0.00		

C. Full Name (Last, First, Middle Initial) Ms. June Walkington		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 2140 Ohio Avenue #D		Transaction ID: 1837421	
City State Zip Code Signal Hill CA 90755	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Melissa Bean Contributions	
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1859 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Laura Foster

Mailing Address 14 Suzanne Road

City Lexington State MA Zip Code 02420

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842546

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Adelle Lemon

Mailing Address 1063 Cragmont

City Berkeley State CA Zip Code 94708

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837375

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Jacquelyn McElhaneey

Mailing Address 5340 Tanbark

City Dallas State TX Zip Code 75229

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Writer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836872

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1860 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Karen A. Packer

Mailing Address 21355 SW Hillsboro Highway

City State Zip Code
Newberg OR 97132

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837562

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Della H. Huber

Mailing Address 5308 Boyd Ave # B

City State Zip Code
Oakland CA 94618

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837126

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Margaret McCamant

Mailing Address 2130 Orrington

City State Zip Code
Evanston IL 60201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
All Saint's Church Church Music Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837475

Amount of Each Receipt this Period
200.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1861 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Alice B. Scott

Mailing Address 213 N. Main Street

City Elizabethtown State KY Zip Code 42701

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842556

Amount of Each Receipt this Period
35.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Frances L. Eller

Mailing Address 213 Lincolnshire Blvd.

City Belleville State IL Zip Code 62221

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837513

Amount of Each Receipt this Period
20.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Emmons S. Ellis

Mailing Address 14 Hillside Avenue

City Winchester State MA Zip Code 01890

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845843

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1862 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. William Winternitz

Mailing Address 53 Guildswood

City Tuscaloosa State AL Zip Code 35401

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845847

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Francoise Delvaux

Mailing Address 2121 February Court

City San Diego State CA Zip Code 92110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Housewife

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842561

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Janet Brown-Liberman

Mailing Address 528 Lake Sherwood Drive

City Lake Sherwood State CA Zip Code 91361

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837523

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1863 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Emmons S. Ellis

Mailing Address 14 Hillside Avenue

City Winchester State MA Zip Code 01890

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 5

Transaction ID: 1845241

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Marsha Pedersen

Mailing Address 5250 W. Avenue L6

City Quartz Hill State CA Zip Code 93536

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842566

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Fred Reames

Mailing Address 522 Virginia Terrace

City Madison State WI Zip Code 53726

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation University of Wisconsin Teacher/Scientist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843585

Amount of Each Receipt this Period
150.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1864 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Phyllis B. Wender

Mailing Address 115 E 67th Street #6C

City State Zip Code
New York NY 10021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Rosenstone Writer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842400

Amount of Each Receipt this Period
150.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Linda Brandenburger

Mailing Address 5201 Pleasant Drive

City State Zip Code
Sacramento CA 95822

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837115

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Joan Goldstein

Mailing Address 2100 North Salisbury Street

City State Zip Code
West Lafayette IN 47906

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Purdue University Counselor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1840892

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1865 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Edith Biondi		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 520 Haworth Avenue		Transaction ID: 1840973	
City State Zip Code Haworth NJ 07641	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Melissa Bean Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Sally R. Coughlin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 52 Upland Road		Transaction ID: 1842547	
City State Zip Code Brookline MA 02445	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Melissa Bean Contributions	
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Nancy Hall		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 210 Zelle Avenue		Transaction ID: 1841719	
City State Zip Code Moorestown NJ 08057	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		Melissa Bean Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1866 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Melanie W.S. Loo		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 1395 56th Street		Transaction ID: 1845958
City State Zip Code Sacramento CA 95819	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation CSU Sacramento Professor	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Melanie W.S. Loo		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 1395 56th Street		Transaction ID: 1842522
City State Zip Code Sacramento CA 95819	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation CSU Sacramento Professor	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Lisa Bevill		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 1014 Alton Avenue		Transaction ID: 1844466
City State Zip Code Madison IL 62060	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1867 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Mary V. Barnettler

Mailing Address 1388 Cordelia Avenue

City State Zip Code
San Jose CA 95129

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841060

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Linda Lee Alter

Mailing Address 210 W Rittenhouse Square
Apartment 1506

City State Zip Code
Philadelphia PA 19103

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Artist/Philanthropist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837184

Amount of Each Receipt this Period
1600.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. B. Ellen Fisher

Mailing Address 5137 S. Kimbark Avenue

City State Zip Code
Chicago IL 60615

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837117

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1868 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Mary Forman Kaufman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5		
Mailing Address 210 Villard Avenue		Transaction ID: 1836813		
City State Zip Code Hastings Hdsn. NY 10706	Amount of Each Receipt this Period 35.00		Melissa Bean Contributions [MEMO ITEM] MEMO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 0.00		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 0.00			

Full Name (Last, First, Middle Initial) B. Ms. Annette Sobel		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5		
Mailing Address 5135 Coldwater Canyon Ave Apt 210		Transaction ID: 1836437		
City State Zip Code Sherman Oaks CA 91423	Amount of Each Receipt this Period 25.00		Melissa Bean Contributions [MEMO ITEM] MEMO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 0.00		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 0.00			

Full Name (Last, First, Middle Initial) C. Ms. Nancy J. Martin-Perdue		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5		
Mailing Address 1385 Twymans Mill Road		Transaction ID: 1837437		
City State Zip Code Madison VA 22727	Amount of Each Receipt this Period 100.00		Melissa Bean Contributions [MEMO ITEM] MEMO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 0.00		
Name of Employer University of Virginia Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Scholar-in-Residence (unp) Aggregate Year-to-Date ▼ 0.00			

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1869 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Jacqueline R. Cameron		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address 513 W Aldine Ave Apt 2		Transaction ID: 1844811	
City State Zip Code Chicago IL 60657	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions		
Name of Employer Occupation Northwestern University Physician	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Mrs. Ragnhild H. Latchford		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 511 Marine Avenue		Transaction ID: 1837471	
City State Zip Code Manhattan Beach CA 90266	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions		
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Mrs. Jack Rosenberg		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 51 Island Drive		Transaction ID: 1842533	
City State Zip Code Boynton Beach FL 33436	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions		
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1870 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Ann Wansley

Mailing Address 51 Chula Lane

City State Zip Code
San Francisco CA 94114

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1841603

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Hadassah Thursz

Mailing Address 11410 Strand Dr. Apt. 416

City State Zip Code
Rockville MD 20852

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842610

Amount of Each Receipt this Period
15.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mrs. Virginia H. Mays

Mailing Address 2090 Bonita Avenue

City State Zip Code
Melbourne Beach FL 32951

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842562

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1871 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Willard H. Elsbee

Mailing Address 209 Grosvenor Street

City Athens State OH Zip Code 45701

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843604

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Esther Portnoy

Mailing Address 208 W. Florida Avenue

City Urbana State IL Zip Code 61801

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836943

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Jo Whetzel

Mailing Address 5036 Castleman Street

City Pittsburgh State PA Zip Code 15232

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842569

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1872 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mrs. Katherine W. Akers		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 5026 West Lake Road		Transaction ID: 1842514	
City State Zip Code Mayville NY 14757	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions		
Name of Employer Occupation Housewife	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Virginia S. Mueller		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 106 L Street Old Sacramento		Transaction ID: 1840916	
City State Zip Code Sacramento CA 95814	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions		
Name of Employer Occupation Self Lawyer	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Deborah Weinstein		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 5021 W. Cedar Lane		Transaction ID: 1842411	
City State Zip Code Bethesda MD 20814	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions		
Name of Employer Occupation Children's Defense Fund Director	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1873 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. James K. Donnell

Mailing Address 207 Norman Drive

City State Zip Code
Cranberry Twp PA 16066

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845913

Amount of Each Receipt this Period
500.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Lois Myers

Mailing Address 5006 Break Heart Road

City State Zip Code
Crozet VA 22932

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845948

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Dr. Jape Taylor

Mailing Address 500 N.W. 80th Boulevard

City State Zip Code
Gainesville FL 32607

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837179

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1874 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Nancy Allison

Mailing Address 137 E. 19th Street # 1

City State Zip Code
New York NY 10003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1841548

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Jean M. Shepard

Mailing Address 50 Main Street

City State Zip Code
Northfield MA 01360

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837441

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Clair A. Sharpless

Mailing Address 1 Drumlin Road

City State Zip Code
West Simsbury CT 06092

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836866

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1875 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Bonnie B Morgan

Mailing Address 205 East Joppa Road
#703

City State Zip Code
Towson MD 21286

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1838428

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mrs. Elizabeth H. Russell

Mailing Address 202 Saponi Drive

City State Zip Code
Hillsborough NC 27278

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844802

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Patricia G. Hoffman

Mailing Address 202 Main Street

City State Zip Code
New Ipswich NH 03071

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844816

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1876 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Lynne Scheer

Mailing Address 1350 Sky High Road

City State Zip Code
Tully NY 13159

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1840976

Amount of Each Receipt this Period
75.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Ruth R. Ferm

Mailing Address 202 Dogford Road

City State Zip Code
Etna NH 03750

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1844450

Amount of Each Receipt this Period
75.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mrs. Lois Wynn

Mailing Address 1128 Linden Avenue

City State Zip Code
Highland Park IL 60035

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842385

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1877 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Ellen S. Haring

Mailing Address 4857 Colorado Avenue NW

City Washington State DC Zip Code 20011

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837551

Amount of Each Receipt this Period
200.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Kathleen O'Brien

Mailing Address 4848 Northrop Drive

City Minneapolis State MN Zip Code 55406

FEC ID number of contributing federal political committee. **C**

Name of Employer University of MN Occupation Administrator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842397

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Dr. Edward D. Greaves

Mailing Address 4831 Keane Drive

City Carmichael State CA Zip Code 95608

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842390

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1878 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Dorothy Sohm

Mailing Address 4824 East Indianapolis Avenue

City State Zip Code
Fresno CA 93726

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837550

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Virginia Royden

Mailing Address 13466 Three Forks Lane

City State Zip Code
Los Altos Hills CA 94022

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838441

Amount of Each Receipt this Period
250.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Ellen M. Kinney

Mailing Address 2000 King James Pkwy # 111

City State Zip Code
Westlake OH 44145

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842497

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1879 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Mark Krueger

Mailing Address 200 West 54th Street
Apt. 4E

City State Zip Code
New York NY 10019

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Mark Krueger & Associates President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845911

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Linda White

Mailing Address 1120 E. Balboa Boulevard

City State Zip Code
Balboa CA 92661

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Artist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843553

Amount of Each Receipt this Period
200.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Linda L. Wise

Mailing Address 4749 Old Post Ct

City State Zip Code
Boulder CO 80301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841646

Amount of Each Receipt this Period
250.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1880 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Jeanne Snodgrass

Mailing Address 10501 Lagrima De Oro NE

City State Zip Code
Albuquerque NM 87111

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1841536

Amount of Each Receipt this Period
200.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Allison F. Brower

Mailing Address 4745 Espana Court

City State Zip Code
Carmichael CA 95608

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
San Juan Unified School Teacher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 5

Transaction ID: 1845261

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Joyce M. Greenfield

Mailing Address 200 Blake Rd

City State Zip Code
Hamden CT 06517

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Creative Arts Workshop Artist/Teacher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837509

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1881 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Vera Anne Green		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 4737 Dolphin Cay Lane S		Transaction ID: 1842425
City State Zip Code St Petersburg FL 33711	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Mr. John J. Poplawski		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address 4726 San Feliciano Drive		Transaction ID: 1835659
City State Zip Code Woodland Hills CA 91364	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Mrs. Marcia Rider		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 20 Acacia Way		Transaction ID: 1836933
City State Zip Code Santa Cruz CA 95062	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation Capitola Book Cafe Bookseller	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1882 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Aurelia T. Fule

Mailing Address 101 Camino Santiago

City State Zip Code
Santa Fe NM 87501

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842588

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Jeanne Richie

Mailing Address 134 Franklin

City State Zip Code
Santa Cruz CA 95060

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845873

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Coline Jenkins

Mailing Address 20 1/2 Forest Avenue

City State Zip Code
Old Greenwich CT 06870

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed R.E. Owner/Mgr.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842602

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1883 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Joan Spaulding

Mailing Address 112 Oxford Lane

City State Zip Code
Cambridge WI 53523

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842581

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Joan Amron

Mailing Address 47 E. 88th Street

City State Zip Code
New York NY 10128

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1835618

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Charlotte Moss

Mailing Address 134 E 71st St

City State Zip Code
New York NY 10021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Designer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1835598

Amount of Each Receipt this Period
250.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1884 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Laurie Barenborg

Mailing Address 4610 S. Bradford Street

City State Zip Code
Seattle WA 98118

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841079

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Dr. Gustav Papanek

Mailing Address 2 Mason Street

City State Zip Code
Lexington MA 02421

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BIDE Economist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842097

Amount of Each Receipt this Period
75.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Catherine W. Claman

Mailing Address 4600 N. Versailles Avenue

City State Zip Code
Dallas TX 75209

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Downing and Thomas Architect

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842389

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1885 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Cheryl C. Randall

Mailing Address 460 Leslie Street SE

City State Zip Code
Salem OR 97301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842408

Amount of Each Receipt this Period
20.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Leah L. Fink

Mailing Address 457 Main Street

City State Zip Code
Norhrtport NY 11768

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845937

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Barbara Gleason

Mailing Address 4556 Graywood Avenue

City State Zip Code
Long Beach CA 90808

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837514

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1886 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Mary Everts

Mailing Address 4504 Mount Vernon Dr

City State Zip Code
Bradenton FL 34210

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842455

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mrs. Karen Offen

Mailing Address 450 Raymundo Drive

City State Zip Code
Woodside CA 94062

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation
historian

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842592

Amount of Each Receipt this Period
150.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Robert Stern

Mailing Address 2 Imperial Landing

City State Zip Code
Westport CT 06880

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844849

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1887 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Mary A. Delsman

Mailing Address 4487 Picacho Drive

City State Zip Code
Riverside CA 92507

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836796

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Elsa K. Boyce

Mailing Address 2 Benker School Way

City State Zip Code
Cropseyville NY 12052

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836415

Amount of Each Receipt this Period
200.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Athena Caul

Mailing Address 4432 Sudley Road

City State Zip Code
Gainesville VA 20155

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
General Dynamics Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845900

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1888 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Kathleen Carrell

Mailing Address 1115 Brownings Lane

City State Zip Code
Lake Zurich IL 60047

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837502

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Judith Ann Marshik

Mailing Address 4422 Napier Parkway NE

City State Zip Code
St. Michael MN 55376

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Realtor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 5

Transaction ID: 1845254

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Andrea Bolliger

Mailing Address 4415 SW Othello Street

City State Zip Code
Seattle WA 98136

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Student

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842543

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1889 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Ann Friend		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 4414 Durant Street, # 111		Transaction ID: 1841776
City State Zip Code Deer Park TX 77536	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation Calpine Corp. Engineer	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Marie Basel		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address 13339 W Paintbrush Drive		Transaction ID: 1836428
City State Zip Code Sun City West AZ 85375	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Dr. Caroline A. Kilbourne		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 4400 East West Hwy. #714		Transaction ID: 1837424
City State Zip Code Bethesda MD 20814	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation NASA Physicist	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1890 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Adalyn S. Brugger

Mailing Address 1973 Retreat Drive

City State Zip Code
Mechanicsville VA 23111

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Law Offices of Robert Parkerson lawyer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838229

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Dora Gianoulakis

Mailing Address 44 Clearview Park

City State Zip Code
Saint Louis MO 63138

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845941

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Mildred L. Glimcher

Mailing Address 435 E. 52nd Street, #24C

City State Zip Code
New York NY 10022

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PaceWildenstein Art Historian

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837199

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1891 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Helen Katz

Mailing Address 1973 DeMille Drive

City State Zip Code
Los Angeles CA 90027

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
community activist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1840919

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Diane A. Wiesenfeld

Mailing Address 4325 Pioneer Trail SE

City State Zip Code
Cedar Rapids IA 52403

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Mount Mercy College Faculty Nurse

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842515

Amount of Each Receipt this Period
10.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Helen McCool

Mailing Address 43169 N. John Templet Road

City State Zip Code
Gonzales LA 70737

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 5

Transaction ID: 1845260

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1892 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Nancy Lincoln

Mailing Address 43 Hedge Road

City State Zip Code
Brookline MA 02445

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Walker Home & School Educator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841001

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. Philip J. Carrigan

Mailing Address 1944 Ash St

City State Zip Code
Waukegan IL 60087

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Abbott Labs Pharmacist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836304

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Steve L. Schwartz

Mailing Address 425 S. Chickasaw Trail #348

City State Zip Code
Orlando FL 32825

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 5

Transaction ID: 1840986

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1893 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Betty Dunhaver

Mailing Address 424 N. State Street

City State Zip Code
Bellingham WA 98225

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842559

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Caroline Willis

Mailing Address 4235 Fordham Road NW

City State Zip Code
Washington DC 20016

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837427

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Marshall McDonald

Mailing Address 4231 Park Boulevard

City State Zip Code
Palo Alto CA 94306

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843556

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1894 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Debra Dodson

Mailing Address 4209 Huerfano Avenue

City San Diego State CA Zip Code 92117

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845936

Amount of Each Receipt this Period
 50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Patricia Sharpe

Mailing Address 1923 Sherman Avenue

City Evanston State IL Zip Code 60201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842438

Amount of Each Receipt this Period
 50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Arthur Fry

Mailing Address 1923 E. Joyce Blvd. Apt. 323

City Fayetteville State AR Zip Code 72703

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842942

Amount of Each Receipt this Period
 50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1895 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
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		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Susan G. Morrison

Mailing Address 4205 Ramsey Avenue

City State Zip Code
Austin TX 78756

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Attorney

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1841526

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. Fred Golding

Mailing Address 1113 Emeral Bay

City State Zip Code
Laguna Beach CA 92655

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 5

Transaction ID: 1845276

Amount of Each Receipt this Period
60.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. S. Kay Keskinen

Mailing Address 1042 S. Harding Street

City State Zip Code
Moscow ID 83843

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
University of Idaho Systems Analyst

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842449

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1896 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Debby Kremsdorf		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5
Mailing Address 4172 Combe Way		Transaction ID: 1837868
City State Zip Code San Diego CA 92122	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Sharon L. Cross-Friedman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 4160 Jade St Space 68		Transaction ID: 1842539
City State Zip Code Capitola CA 95010	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation Haskell&Goodman, LLP Office Clerk	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Rosemary Vimont		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 1922 Oregon Street		Transaction ID: 1841625
City State Zip Code Berkeley CA 94703	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1897 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Gloria Deison

Mailing Address 1311 Peacefield Place

City State Zip Code
Tallahassee FL 32308

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838456

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Robin Bennett

Mailing Address 41 Terra Cotta Road

City State Zip Code
Hewitt NJ 07421

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842402

Amount of Each Receipt this Period
10.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Dolores H. Braun

Mailing Address 41 Laurel Grove Avenue

City State Zip Code
Kentfield CA 94904

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837457

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1898 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Dr. James A. Clever

Mailing Address 41 Glen Drive

City State Zip Code
Mill Valley CA 94941

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation
Self Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837378

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Robin Hanes

Mailing Address 191 Lynn Cove Road

City State Zip Code
Asheville NC 28804

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation
Self Artist/Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 5

Transaction ID: 1845302

Amount of Each Receipt this Period
250.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Jamie L. Berndt

Mailing Address 409 E. Chicago Avenue

City State Zip Code
Naperville IL 60540

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837518

Amount of Each Receipt this Period
1000.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1899 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Dr. Carol Farthing

Mailing Address 406 Dale Dr.

City State Zip Code
Silver Spring MD 20910

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
St. Luke's Institute Psychologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1837859

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mrs. Joyce Waters

Mailing Address 4046 Tenango Road

City State Zip Code
Claremont CA 91711

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845896

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Betty B. Lourie

Mailing Address 104 Litchfield Drive

City State Zip Code
Syracuse NY 13224

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842498

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1900 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Janet S. Ellis

Mailing Address 401 Regents Park Lane

City State Zip Code
Noblesville IN 46062

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843494

Amount of Each Receipt this Period
20.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mrs. Janice Doxtator

Mailing Address 1909 Plover Street

City State Zip Code
Stevens Point WI 54481

FEC ID number of contributing federal political committee. **C**

Name of Employer Portage Co. Pub. Library Occupation Librarian

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1841561

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Kristin W. Olsson

Mailing Address 11127 Midway Road

City State Zip Code
Dallas TX 75229

FEC ID number of contributing federal political committee. **C**

Name of Employer Worshan, Fortsythe & Wol Occupation Legal Assitant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836355

Amount of Each Receipt this Period
5.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ 0.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1901 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Dr. Mary Lou Courrage

Mailing Address 1905 Princess Street

City State Zip Code
Wilmington NC 28405

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845920

Amount of Each Receipt this Period
250.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. Thomas R. Curtis

Mailing Address 1903 Rolling Hills Avenue SE

City State Zip Code
Renton WA 98055

FEC ID number of contributing federal political committee. **C**

Name of Employer State of Washington Occupation Social Worker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837448

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Dorothy G. Whitmore

Mailing Address 1309 N. Clayton Street

City State Zip Code
Wilmington DE 19806

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838521

Amount of Each Receipt this Period
250.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1902 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Lee Estes		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5
Mailing Address 1036 S. Los Robles Avenue		Transaction ID: 1837862
City State Zip Code Pasadena CA 91106	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Mary Lou Woods		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 4 Cove Ridge Lane		Transaction ID: 1845942
City State Zip Code Old Greenwich CT 06870	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Dr. Joan Lamb Ulyot, M.D.		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 39805 North 112th Street		Transaction ID: 1836900
City State Zip Code Scottsdale AZ 85262	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation Self Physician	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1903 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Dr. Sharon M. Stein		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 5	
Mailing Address 1035 Leonello Avenue		Transaction ID: 1835032	
City State Zip Code Los Altos CA 94024	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions		
Name of Employer Occupation TPMG Physician	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Katherine Simpson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 1001 Spring Street, Apt. 805		Transaction ID: 1841084	
City State Zip Code Silver Spring MD 20910	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions		
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Nancy C. Schneider		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 3930 Grand Avenue #302		Transaction ID: 1837524	
City State Zip Code Des Moines IA 50312	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions		
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1904 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Nancy K. Henderlite

Mailing Address 391 Holder Ln SE

City Salem State OR Zip Code 97306

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842594

Amount of Each Receipt this Period
15.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Greta Newman

Mailing Address 39 Steppingstone Lane

City Great Neck State NY Zip Code 11024

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836826

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Charleen Z. Behrschmidt

Mailing Address 1306 Parkhill Court

City Camarillo State CA Zip Code 93010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837485

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1905 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Judith G. Tracy

Mailing Address 3881 San Ysidro Way

City State Zip Code
Sacramento CA 95864

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
US EPA Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842518

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Samona Sheppard

Mailing Address 1301 N Tamiami Trl Apt 713

City State Zip Code
Sarasota FL 34236

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1844527

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Sandra Cummings

Mailing Address 3804 Sweeten Creek Road

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Northern Telecom BUSINESS OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1837860

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1906 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Barbara Madden-Bittle		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address 3801 Green Branch Drive		Transaction ID: 1837137	
City State Zip Code W. Des Moines IA 50265	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Melissa Bean Contributions	
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Ms. Debra Metcalf		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 376 Farmhouse Ln		Transaction ID: 1840930	
City State Zip Code Wind Gap PA 18091	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C		Melissa Bean Contributions	
Name of Employer Occupation Self Homemaker	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Miss Alice Marie Garrison		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 3737 Atlantic Avenue Apt. 1405		Transaction ID: 1845964	
City State Zip Code Long Beach CA 90807	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Melissa Bean Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1907 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Ann R. Kelley

Mailing Address 3704 Providence Court

City State Zip Code
Wilmington NC 28412

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837472

Amount of Each Receipt this Period
75.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Linda Cooper

Mailing Address 3700 S. Westport Avenue # 1096

City State Zip Code
Sioux Falls SD 57106

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Consulting

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1835654

Amount of Each Receipt this Period
20.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mrs. Susanna Davison

Mailing Address 1301 Irving Avenue

City State Zip Code
Wheaton IL 60187

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Health Dept. Nursing Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836300

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1908 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Deb Preston

Mailing Address 3690 Mount Vernon Road

City State Zip Code
Sebastopol CA 95472

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838507

Amount of Each Receipt this Period
20.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mrs. Dolores D Ginter

Mailing Address 1816 Yermo Place

City State Zip Code
Fullerton CA 92833

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842977

Amount of Each Receipt this Period
20.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Jerald A. Nice

Mailing Address 365 Newtown Road, Apt. B21

City State Zip Code
Warminster PA 18974

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842457

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1909 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Mary Sieber		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5
Mailing Address 3621 Georgetown Street		Transaction ID: 1838022
City State Zip Code Houston TX 77005	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation Occupation REQUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Patricia Pardee		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 362 North Jefferson Street		Transaction ID: 1837446
City State Zip Code Batavia IL 60510	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation Occupation REQUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Melinda McDonald		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 1806 Charmeran Avenue		Transaction ID: 1844808
City State Zip Code San Jose CA 95124	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation Self Court reporter	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1910 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Muriel Turetsky		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 1301 Carter Drive		Transaction ID: 1842956	
City State Zip Code Rockaway NJ 07866	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions		
Name of Employer Occupation Bergen Community College Professor	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Ms. Celia J. Stuart-Powles		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 3610 E. 24th Street		Transaction ID: 1842461	
City State Zip Code Tulsa OK 74114	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions		
Name of Employer Occupation Fluor Daniel Wms. Bros. Electrical Designer	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Catherine C. Gerhold		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5	
Mailing Address 1804 Wightman Street		Transaction ID: 1838160	
City State Zip Code Pittsburgh PA 15217	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions		
Name of Employer Occupation Self/Allegheny Homemaker/Lawyer	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1911 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Dr. Ellen Jacobsen-Isserman

Mailing Address 3604 S vine St

City Urbana State IL Zip Code 61802

FEC ID number of contributing federal political committee. **C**

Name of Employer WV University Occupation Dermatologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838061

Amount of Each Receipt this Period
 50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. John O'Toole

Mailing Address 3601 Connecticut Avenue NW # 410

City Washington State DC Zip Code 20008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 2 7 / 2 0 0 5

Transaction ID: 1845297

Amount of Each Receipt this Period
 100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Holly G. Burnes

Mailing Address 359 Heath Street

City Chestnut Hill State MA Zip Code 02467

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 1 3 / 2 0 0 5

Transaction ID: 1841547

Amount of Each Receipt this Period
 100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1912 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Ellie Barrett Wilder

Mailing Address 130 Spencer Avenue

City State Zip Code
Sausalito CA 94965

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation
Self Artist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845944

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. Richard C. Foust

Mailing Address 180 N. 4th Street, Apt. 607

City State Zip Code
San Jose CA 95112

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation
Self Architect

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1844521

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Lee S. Hornstein

Mailing Address 18 Waters Edge

City State Zip Code
Mount Vernon OH 43050

FEC ID number of contributing federal political committee. **C**

Name of Employer American Health Network Occupation
American Health Network Pediatrician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836424

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1913 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Patricia A. Keating

Mailing Address 10347 Calvin Avenue

City State Zip Code
Los Angeles CA 90025

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Regents of UC Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 1841539

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. James S. Foster

Mailing Address 346 W. Hunt Road

City State Zip Code
Rushville IN 46173

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842575

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Marjorie D. Main

Mailing Address 3440 S Jefferson Street
Apt. 725

City State Zip Code
Falls Church VA 22041

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Unemployed None

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837469

Amount of Each Receipt this Period
200.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1914 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Ann H. Beyer

Mailing Address 343 Rim Road

City State Zip Code
Los Alamos NM 87544

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843610

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Dorothy R. Weed

Mailing Address 12853 Dunbarton Drive

City State Zip Code
Bristow VA 20136

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: 1837828

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Deborah Whitehurst

Mailing Address 128 Shady Lane

City State Zip Code
Lexington KY 40503

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Registered Nurse

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842567

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ► **0.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1915 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Madelein J. Arnow

Mailing Address 179 Griffin Avenue

City State Zip Code
Scarsdale NY 10583

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Housewife

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836817

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Dr. James C. Beck, M.D.

Mailing Address 34 Bates Street

City State Zip Code
Cambridge MA 02140

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Harvard Medical School Psychiatrist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836418

Amount of Each Receipt this Period
500.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Helen M. Burgener

Mailing Address 1101 Sunrise Lane

City State Zip Code
Estes Park CO 80517

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837491

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1916 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Dr. Estelle K. Meislich

Mailing Address 338 Lacey Drive

City State Zip Code
New Milford NJ 07646

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838469

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Nancy J. Letourneau

Mailing Address 3362 Brittan Avenue, # 14

City State Zip Code
San Carlos CA 94070

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837540

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Gail Spane

Mailing Address 1101 G Street SE

City State Zip Code
Washington DC 20003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self TAX ADVISOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842944

Amount of Each Receipt this Period
150.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1917 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Nora Alice Rowe

Mailing Address 1029 Meadowwood Lane

City State Zip Code
Bowling Green KY 42104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837397

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Mary T. Zeis

Mailing Address 335 Whispering Pines

City State Zip Code
Loveland OH 45140

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Procter & Gamble Chemical Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836334

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Robert F. Hartmann

Mailing Address 335 Via Concha

City State Zip Code
Aptos CA 95003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Hartmann & Miller Lawyer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: 1837830

Amount of Each Receipt this Period
500.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1918 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Dr. Toni Delisi		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address The Statler Building 20 Park Plaza Suite 611		Transaction ID: 1840915
City Boston State MA Zip Code 02116	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Melissa Bean Contributions [MEMO ITEM] MEMO
Name of Employer Self-employed Occupation Clinical Psychologist	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Ms. Elinor F. McCloskey		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address 335 Skyline Drive SW		Transaction ID: 1836449
City Pullman State WA Zip Code 99163	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Melissa Bean Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Ms. Jane Burkhardt		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address RR 1 Box 115		Transaction ID: 1836442
City North Bennington State VT Zip Code 05257	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C		Melissa Bean Contributions [MEMO ITEM] MEMO
Name of Employer Self Occupation Clinical Medical SW	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1919 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Dorothy L. Flaster

Mailing Address 1760 East Valley Road

City State Zip Code
Montecito CA 93108

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842928

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Dr. Lynn Seaman

Mailing Address 3324 Vernal Avenue

City State Zip Code
Merced CA 95340

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SRI International Senior Research Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841669

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Judith L. Gass

Mailing Address 1265 Beacon Street # 406

City State Zip Code
Brookline MA 02446

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842434

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1920 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Evelyn O. Evans

Mailing Address PO Box 99

City State Zip Code
Pebble Beach CA 93953

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844839

Amount of Each Receipt this Period
250.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. Matthew Morris

Mailing Address PO Box 9157

City State Zip Code
Aspen CO 81612

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FRD Project Inc Butler/Chef

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844756

Amount of Each Receipt this Period
5.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Donald E. Myers

Mailing Address 3322 E. Waverly Street

City State Zip Code
Tucson AZ 85716

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837487

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1921 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Joan Steele

Mailing Address 332 Glenn Street

City Ashland State OR Zip Code 97520

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 5

Transaction ID: 1841046

Amount of Each Receipt this Period
10.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. Joel Ginzberg

Mailing Address PO Box 873

City Stone Ridge State NY Zip Code 12484

FEC ID number of contributing federal political committee. **C**

Name of Employer self, semi-retired Occupation Psychologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1835635

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Holly Nelson

Mailing Address 1750 P St NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844868

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ 0.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1922 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Robert A. Sharrer

Mailing Address PO Box 770453

City State Zip Code
Eagle River AK 99577

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837527

Amount of Each Receipt this Period
30.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Carolyn Simonson

Mailing Address PO Box 7487

City State Zip Code
Tacoma WA 98406

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837560

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Andrew Carson

Mailing Address PO Box 709

City State Zip Code
Wilson WY 83014

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Cony Corp mtn guide

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1835641

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1923 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Andrew Carson

Mailing Address PO Box 709

City State Zip Code
Wilson WY 83014

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Cony Corp mtn guide

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 1 / 2 0 0 5

Transaction ID: 1835099

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Elaine Howe

Mailing Address PO Box 624

City State Zip Code
Sulphur OK 73086

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837164

Amount of Each Receipt this Period
150.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Betty B. Baril

Mailing Address PO Box 62

City State Zip Code
Wilson WY 83014

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837459

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1924 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Margaret Poole

Mailing Address 33 Sunset Road

City State Zip Code
Wayland MA 01778

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Mitre Corp. Elec. Engr.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 1836394

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Dr. Erma W. Manoncourt

Mailing Address PO Box 5747

City State Zip Code
New York NY 10163

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
United Nations UNICEF Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838174

Amount of Each Receipt this Period
250.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Dennis White

Mailing Address PO Box 540127

City State Zip Code
Dallas TX 75354

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Investor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: 1837766

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1925 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Dr. Patricia M. Dorman

Mailing Address 33 Mesa Vista Drive

City State Zip Code
Boise ID 83705

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842609

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Florence DeRose

Mailing Address PO Box 482

City State Zip Code
Leeds MA 01053

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843601

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Martha Helen Smith

Mailing Address 3297 Malone Drive

City State Zip Code
Lexington KY 40513

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837516

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1926 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Jean Crichton

Mailing Address 173 Summit Avenue

City State Zip Code
Summit NJ 07901

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Freelance Writer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837204

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Lynda A. McNeive

Mailing Address 1100 E. Stanford Avenue

City State Zip Code
Englewood CO 80113

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Brownstein Hyatt et al Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837488

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Cynthia Kayser

Mailing Address PO Box 48

City State Zip Code
Fairfax CA 94978

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PG & E Utility Worker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1841759

Amount of Each Receipt this Period
75.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1927 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Cynthia S. Schmidt

Mailing Address 329 S Shelley Lake Ln

City State Zip Code
Spokane Valley WA 99037

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 5

Transaction ID: 1844636

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mrs. Karen Hollins

Mailing Address PO Box 4737

City State Zip Code
Basalt CO 81621

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841004

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mrs. Sheila Pfafflin

Mailing Address 173 Gates Avenue

City State Zip Code
Gillette NJ 07933

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837322

Amount of Each Receipt this Period
250.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1928 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Laurie Berman

Mailing Address PO Box 390

City State Zip Code
Isle of Palms SC 29451

FEC ID number of contributing federal political committee. **C**

Name of Employer
Quill, Hair, & Ferrula, LTD.

Occupation
Coatings Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843611

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Judith Grubner

Mailing Address 1726 Ashland Avenue

City State Zip Code
Evanston IL 60201

FEC ID number of contributing federal political committee. **C**

Name of Employer
Laff, Whitesel, Conte & Saret, Ltd

Occupation
Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842395

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Anita Siegenthaler

Mailing Address PO Box 336

City State Zip Code
Pt. Clyde ME 04855

FEC ID number of contributing federal political committee. **C**

Name of Employer

Occupation
Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842568

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1929 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Robert M. Lande

Mailing Address 325 Central Park W.

City State Zip Code
New York NY 10025

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 1842922

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Rhoda L. Honigman

Mailing Address PO Box 294

City State Zip Code
Oilville VA 23129

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: 1837824

Amount of Each Receipt this Period
300.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Debra E. Burger

Mailing Address 110 Evans Drive

City State Zip Code
McMurray PA 15317

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842573

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1930 / 1975
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sheila Gershen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address PO Box 292		Transaction ID: 1844826	
City State Zip Code Santa Fe NM 87504	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Mr. John McKinney		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address PO Box 266		Transaction ID: 1837534	
City State Zip Code Maggie Valley NC 28751	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Mr. Arthur Lazarus, Jr.		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 3201 Fessenden Street, N.W.		Transaction ID: 1843535	
City State Zip Code Washington DC 20008	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions		
Name of Employer Occupation Sonosky, Chambers Attorney	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1931 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. Richard Toole		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 5
Mailing Address PO Box 256		Transaction ID: 1841575
City State Zip Code Oak Bluffs MA 02557	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Patricia J. Ryan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5
Mailing Address 17 south Ferris Street		Transaction ID: 1837870
City State Zip Code Irvington NY 10533	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation freelance writer	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Gretchen E. Keiser		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address PO Box 21883		Transaction ID: 1837113
City State Zip Code Juneau AK 99802	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation State of Alaska Program Manager	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1932 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Mary Winston

Mailing Address 3173 Riverbend Avenue

City Eugene State OR Zip Code 97408

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837522

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Michaelann Herring

Mailing Address PO Box 2102

City Telluride State CO Zip Code 81435

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837557

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Catherine Jacobson

Mailing Address 316 W 57th St

City Hinsdale State IL Zip Code 60521

FEC ID number of contributing federal political committee. **C**

Name of Employer St. Luke's Medical Ctr Occupation Chief Financial Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838497

Amount of Each Receipt this Period
250.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1933 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Gerrish H. Milliken

Mailing Address PO Box 1880

City State Zip Code
Oroville WA 98844

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: 1844505

Amount of Each Receipt this Period
500.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. John M. Wolf, Jr.

Mailing Address PO Box 1429

City State Zip Code
Sanibel FL 33957

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836924

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Dr. Joseph Moore

Mailing Address 315 W. 70th Street, Apt. 5H

City State Zip Code
New York NY 10023

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Psychotherapist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837497

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1934 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Sara Saylor

Mailing Address 3137 Kaiser Way

City State Zip Code
Carmichael CA 95608

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Care Giver/ Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842441

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Sandra Schlachtmeyer

Mailing Address 124 Princess St

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837423

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Phillip Corin

Mailing Address PO Box 1096

City State Zip Code
Mercer Island WA 98040

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842445

Amount of Each Receipt this Period
250.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1935 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Dr. Rachel Schonberger

Mailing Address 1686 Grove Park Way

City State Zip Code
Decatur GA 30033

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842576

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Charlotte Cohen

Mailing Address 310 S. Bentley Avenue

City State Zip Code
Los Angeles CA 90049

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842565

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Selma Rosenfield Josell

Mailing Address 31 Silver Street

City State Zip Code
Lanesboro MA 01237

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837442

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1936 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Audrey Miller

Mailing Address P.O. Box 888

City State Zip Code
Ferndale CA 95536

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: 1841711

Amount of Each Receipt this Period
60.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. Richard Parrish

Mailing Address 30862 Turquoise Pl

City State Zip Code
Lebanon OR 97355

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838451

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Lucille Bacon

Mailing Address P.O. Box 616

City State Zip Code
Gleneden Beach OR 97388

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842595

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1937 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Margaret Solomon

Mailing Address P.O. Box 3303

City State Zip Code
Incline Village NV 89450

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 1844796

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. Gaylord Capes

Mailing Address 11 Whitehaven Way

City State Zip Code
Lewes DE 19958

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842380

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Dr. Beverly J. Gibbs

Mailing Address P.O. Box 279

City State Zip Code
Manchaca TX 78652

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842440

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1938 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Janice W. Eddy

Mailing Address P.O. Box 27

City State Zip Code
Kittery Point ME 03905

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842381

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Barbara Boley Adelman

Mailing Address P.O. Box 225

City State Zip Code
Moro IL 62067

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
International Institute - St. Louis ESL Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838025

Amount of Each Receipt this Period
500.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Susan J. Gordon

Mailing Address 306 West St.

City State Zip Code
Pittsfield MA 01201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Your Kitchen Retailer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842513

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1939 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Joan Golder

Mailing Address 1235 Whitebridge Lane

City State Zip Code
Winnetka IL 60093

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837503

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Frances Tibbits

Mailing Address P.O. Box 205

City State Zip Code
Pacific Palisades CA 90272

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1835582

Amount of Each Receipt this Period
200.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Roberta Frissell

Mailing Address P.O. Box 116

City State Zip Code
Pt. Townsend WA 98368

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837481

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1940 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Joan L. Stephenson

Mailing Address 165 E. 35th Street, Apt. 4J

City State Zip Code
New York NY 10016

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
IBM Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842433

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Jeanne M Brett

Mailing Address MORS Kellogg Northwestern University

City State Zip Code
Evanston IL 60208

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Northwestern University Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837225

Amount of Each Receipt this Period
500.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Ingrid Heide

Mailing Address 305 E. 24th Street

City State Zip Code
New York NY 10010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841637

Amount of Each Receipt this Period
15.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1941 / 1975
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Dr. Lynn E. Hauser

Mailing Address 11 Sylvan Lane

City State Zip Code
Dekalb IL 60115

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 5

Transaction ID: 1843051

Amount of Each Receipt this Period
250.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Sarah Crites

Mailing Address 1000 Franklin Avenue, # 304

City State Zip Code
Essex MD 21221

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838147

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Patti Kile

Mailing Address E3412 Bunker Road

City State Zip Code
Waupaca WI 54981

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Thedacare Waupaca Healthcare

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837230

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1942 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Mary Sue Ittner

Mailing Address Bob Rutemoeller
P.O. Box 587

City Gualala State CA Zip Code 95445

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Financial Planner/Volunteer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: 1838500

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Marilyn A. Dowdell

Mailing Address 1645 Randall Road

City Yellow Springs State OH Zip Code 45387

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1841628

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Mary E. Mostaghim

Mailing Address 304 Pineridge Street

City Ann Arbor State MI Zip Code 48103

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843514

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1943 / 1975
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Cynthia Linton

Mailing Address 990 N. Lake Shore Drive
Apt. 15E

City State Zip Code
Chicago IL 60611

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Northwestern University Professor

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842442

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Janice Paneth

Mailing Address 301 W. 108th Street

City State Zip Code
New York NY 10025

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842430

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Susan L. Swan

Mailing Address 96 Winfield Avenue

City State Zip Code
San Francisco CA 94110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Pre-pub. Writer

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842407

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1944 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
E. W. DeChene

Mailing Address 1629 Selby Avenue

City State Zip Code
Los Angeles CA 90024

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842409

Amount of Each Receipt this Period
10.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Ann C. Bailey

Mailing Address 3001 Albemarle Street, N.W.

City State Zip Code
Washington DC 20008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842421

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Victoria A. Welch

Mailing Address 932 Twisp River Road

City State Zip Code
Twisp WA 98856

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Farmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837530

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1945 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Frances M. Shaw

Mailing Address 123 Arthur J. Moore Drive

City State Zip Code
Saint Simons Isl. GA 31522

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842509

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Sena Zinn

Mailing Address 9217 E Rocky Lake Drive

City State Zip Code
Sun Lakes AZ 85248

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842386

Amount of Each Receipt this Period
10.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Nancy King

Mailing Address 92 Ponquogue Avenue

City State Zip Code
Hampton Bay NY 11946

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Riverhead Central Schools Teacher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842506

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1946 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Margaret W. Johnson

Mailing Address 9190 Brier Rd.

City State Zip Code
La Mesa CA 91942

FEC ID number of contributing federal political committee. **C**

Name of Employer Grossmont College Occupation College Instructor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837343

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Deborah L. Gray

Mailing Address 915 Arbor Avenue

City State Zip Code
Wheaton IL 60187

FEC ID number of contributing federal political committee. **C**

Name of Employer City of Wheaton Occupation Secretary

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 1837120

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. June S. Dwyer

Mailing Address 30 5th Avenue, Apt. 16C

City State Zip Code
New York NY 10011

FEC ID number of contributing federal political committee. **C**

Name of Employer Manhattan College Occupation Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843605

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1947 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Daniel L. Milligan

Mailing Address 2912 Arlington Drive

City State Zip Code
Springfield IL 62704

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838020

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Pamela L. Thul-Immler

Mailing Address 9060 Madeline Lake Road

City State Zip Code
Woodruff WI 54568

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 1836859

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Lisa R. Lindeman

Mailing Address 906 Flindt Drive

City State Zip Code
Storm Lake IA 50588

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 1842419

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1948 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Dr. Nancy E. Duckles

Mailing Address 9048 Hemingway Grove Circle

City State Zip Code
Knoxville TN 37922

FEC ID number of contributing federal political committee. **C**

Name of Employer Children's Anesthesiologists, P.C. Occupation Anesthesiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1840963

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Virginia Covey

Mailing Address 900 E. Harrison Avenue #D33-34

City State Zip Code
Pomona CA 91767

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837480

Amount of Each Receipt this Period
50.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Mary B. Stark

Mailing Address 2900 W. Park Blvd.

City State Zip Code
Shaker Hts OH 44120

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837539

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1949 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Susan V. Parsons		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 8918 Day Lilly Court		Transaction ID: 1837429
City State Zip Code Fairfax VA 22031	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation DFI International Defense Contracting	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Dr. Robert Katzman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 1611 Calle De Andluca		Transaction ID: 1836776
City State Zip Code La Jolla CA 92037	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation Univ. of Cal Neurologist	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Mr. John B. Kerber		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 8834 Pointe Vista Drive		Transaction ID: 1841654
City State Zip Code Victoria MN 55386	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation Hutchinson Area Health Care Psychologist	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1950 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Karen Sonderby		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address 88 W. Schiller Street, # 2602		Transaction ID: 1842405	
City State Zip Code Chicago IL 60610	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions		
Name of Employer San-J International Occupation Sales manager	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Mr. William Hayles		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 29 Lake Park Drive		Transaction ID: 1837531	
City State Zip Code Piscataway NJ 08854	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Beth Bentley		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5	
Mailing Address 8762 25th Place NE		Transaction ID: 1841762	
City State Zip Code Seattle WA 98115	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1951 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Mary Strubbe		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address 1021 N Sheridan Rd		Transaction ID: 1837801
City State Zip Code Waukegan IL 60085	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Mrs. Catherine Manz Smith		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 85316 Coyote Creek Road		Transaction ID: 1841733
City State Zip Code Veneta OR 97487	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Carolyn Koster		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5
Mailing Address 850 Powell Street, Apt. 203		Transaction ID: 1837869
City State Zip Code San Francisco CA 94108	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Melissa Bean Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1952 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Joan Nissman

Mailing Address 286 Clinton Road

City State Zip Code
Brookline MA 02445

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation
Art Historian

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 1840889

Amount of Each Receipt this Period
12.50

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Beverlee Mitchell

Mailing Address 1605 N. 7th Street

City State Zip Code
Boise ID 83702

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: 1837533

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Anita E. Krantz

Mailing Address 11 Monson Turnpike Road

City State Zip Code
Ware MA 01082

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation
Teacher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 1843615

Amount of Each Receipt this Period
25.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1953 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Dana L. Herpe		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5	
Mailing Address 2828 North Burling Street Apt. 404		Transaction ID: 1838048	
City Chicago	State IL	Zip Code 60657	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Melissa Bean Contributions	
Name of Employer Lyric Opera of Chicago	Occupation Personnel Mgr.		[MEMO ITEM] MEMO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Mrs. Harriet C. Stone		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 8312 Kilbourn Avenue		Transaction ID: 1837436	
City Skokie	State IL	Zip Code 60076	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Melissa Bean Contributions	
Name of Employer	Occupation REQUESTED		[MEMO ITEM] MEMO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Jeanne Vale		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 827 Kenmare Ter		Transaction ID: 1837493	
City Crown Point	State IN	Zip Code 46307	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Melissa Bean Contributions	
Name of Employer	Occupation Retired		[MEMO ITEM] MEMO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1954 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Dr. Elle Milholland

Mailing Address 2800 Windrush Lane

City Roswell State GA Zip Code 30076

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 5

Transaction ID: 1843624

Amount of Each Receipt this Period
250.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. George Y. Sodowick

Mailing Address 28 Mountain Ridge Drive

City Livingston State NJ Zip Code 07039

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1845871

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Frances M. Danaher

Mailing Address 16 S. Main Street, # 407

City Barre State VT Zip Code 05641

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Disabled

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: 1838166

Amount of Each Receipt this Period
100.00

Melissa Bean Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1955 / 1975
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Rev. Gordon D. Gibson Mailing Address 821 Hiawatha Drive City Elkhart State IN Zip Code 46517 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5 Transaction ID: 1841680 Amount of Each Receipt this Period 25.00 Melissa Bean Contributions [MEMO ITEM] MEMO
Name of Employer Unitarian Occupation Clergy Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Julie Peppard Mailing Address 1094 Palms Blvd City Venice State CA Zip Code 90291 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5 Transaction ID: 1838036 Amount of Each Receipt this Period 50.00 Melissa Bean Contributions [MEMO ITEM] MEMO
Name of Employer Gartner & Young Occupation Secretary Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Elizabeth Benedict Mailing Address City REQUESTED State Zip Code 11111 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5 Transaction ID: 1845252 Amount of Each Receipt this Period 100.00 Melissa Bean Contributions [MEMO ITEM] MEMO
Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	433935.33

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1956 / 1975
	<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	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. AFSCME PAC		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 555 New Jersey Avenue NW		Transaction ID: 1837309
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Committee on Letter Carriers Political		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 5
Mailing Address 100 Indiana Avenue NW		Transaction ID: 1843766
City State Zip Code Washington DC 20001	Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. New Leadership for America		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 424 C Street, N.E.		Transaction ID: 1841370
City State Zip Code Washington DC 20002	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	11500.00
TOTAL This Period (last page this line number only) ▶	11500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1957 / 1975
	<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 checked="" type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Grassroots Solutions		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address 1120 Conn Ave NW 11th Floor		Transaction ID: 4188
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 4200.00	
FEC ID number of contributing federal political committee. C	Sublease Rent	
Name of Employer Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Susan Markham		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address 1423 A Street SE		Transaction ID: 4189
City State Zip Code Washington DC 20003	Amount of Each Receipt this Period 7.44	
FEC ID number of contributing federal political committee. C	Telephone	
Name of Employer Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Susan Markham		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address 4123 A Street SE		Transaction ID: 4190
City State Zip Code Washington DC 20003	Amount of Each Receipt this Period 4.07	
FEC ID number of contributing federal political committee. C	Postage	
Name of Employer Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	4211.51
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1958 / 1975
	<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 checked="" type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Susan Markham		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5	
Mailing Address 1423 A Street SE		Transaction ID: 4191	
City State Zip Code Washington DC 20003	Amount of Each Receipt this Period 34.01		
FEC ID number of contributing federal political committee. C	Deliveries		
Name of Employer Occupation	Aggregate Year-to-Date ▼ .00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Joanne Wilson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5	
Mailing Address 3806 Viser Court		Transaction ID: 4192	
City State Zip Code Bowie MD 20715	Amount of Each Receipt this Period 8.74		
FEC ID number of contributing federal political committee. C	Telephone		
Name of Employer Occupation	Aggregate Year-to-Date ▼ .00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Joanne Wilson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5	
Mailing Address 1423 A Street SE		Transaction ID: 4193	
City State Zip Code Washington DC 20003	Amount of Each Receipt this Period 0.74		
FEC ID number of contributing federal political committee. C	Postage		
Name of Employer Occupation	Aggregate Year-to-Date ▼ .00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	34.49
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1959 / 1975
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Tiffany Reed		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address 2450 Ontario Rd, NW		Transaction ID: 4195
City Washington	State DC	Zip Code 20009
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.50
Name of Employer	Occupation	Postage
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) B. Martha McKenna		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address 913 South Decker Avenue		Transaction ID: 4196
City Baltimore	State MD	Zip Code 21224
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 8.45
Name of Employer	Occupation	Telephone
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) C. Martha McKenna		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address 913 South Decker Avenue		Transaction ID: 4197
City Baltimore	State MD	Zip Code 21224
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.55
Name of Employer	Occupation	Postage
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

SUBTOTAL of Receipts This Page (optional)	19.50
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1960 / 1975
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Callie Fines

Mailing Address 10621 Regent Park Court

City State Zip Code
Fairfax VA 22030

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: 4198

Amount of Each Receipt this Period
2.68

Postage

B. Full Name (Last, First, Middle Initial)
Cheryl Gregory

Mailing Address 4551 Sawgrass Court

City State Zip Code
Alexandria VA 22312

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: 4199

Amount of Each Receipt this Period
0.74

Postage

C. Full Name (Last, First, Middle Initial)
Cheryl Gregory

Mailing Address 4551 Sawgrass Court

City State Zip Code
Alexandria VA 22312

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: 4200

Amount of Each Receipt this Period
10.00

Parking

SUBTOTAL of Receipts This Page (optional) ► **13.42**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1961 / 1975
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Britt Cocanour

Mailing Address 3100 Connecticut Avenue, NW
Apt 330

City State Zip Code
Washington DC 20008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: 4201

Amount of Each Receipt this Period
343.00

Office Supplies

B. Full Name (Last, First, Middle Initial)
Lisa Robillard

Mailing Address 4326 S 36th St

City State Zip Code
Arlington VA 22206

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 4203

Amount of Each Receipt this Period
50.00

Office Supplies

C. Full Name (Last, First, Middle Initial)
Britt Cocanour

Mailing Address 3100 Conn Ave NW
Apt 330

City State Zip Code
Washington DC 20008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 4202

Amount of Each Receipt this Period
140.00

Office Supplies

SUBTOTAL of Receipts This Page (optional) ► **533.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1962 / 1975
	<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	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mary Hodge		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 908 Harrison Circle		Transaction ID: 4204	
City State Zip Code Alexandria VA 22304	Amount of Each Receipt this Period 30.74		
FEC ID number of contributing federal political committee. C	Travel & Accommodations		
Name of Employer Occupation	Aggregate Year-to-Date ▼ .00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Jeanne Duncan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 1416 Shepherd St NW		Transaction ID: 4205	
City State Zip Code Washington DC 20011	Amount of Each Receipt this Period 5.67		
FEC ID number of contributing federal political committee. C	Telephone		
Name of Employer Occupation	Aggregate Year-to-Date ▼ .00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Jeanne Duncan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 1416 Shepherd St NW		Transaction ID: 4206	
City State Zip Code Washington DC 20011	Amount of Each Receipt this Period 30.13		
FEC ID number of contributing federal political committee. C	Deliveries		
Name of Employer Occupation	Aggregate Year-to-Date ▼ .00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	66.54
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1963 / 1975
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Karen White
 Mailing Address 1334 Walnut Avenue
 City State Zip Code
 Annapolis MD 21403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ .00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 4 / 2 0 0 5
Transaction ID: 4207
 Amount of Each Receipt this Period
 0.44
 Telephone

B. Full Name (Last, First, Middle Initial)
Karen White
 Mailing Address 1334 Walnut Avenue
 City State Zip Code
 Annapolis MD 21403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ .00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 4 / 2 0 0 5
Transaction ID: 4208
 Amount of Each Receipt this Period
 3.85
 Postage

C. Full Name (Last, First, Middle Initial)
Carrie Giddins
 Mailing Address 4601 Connecticut Ave NW #909
 City State Zip Code
 Washington DC 20008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ .00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 4 / 2 0 0 5
Transaction ID: 4209
 Amount of Each Receipt this Period
 1.91
 Telephone

SUBTOTAL of Receipts This Page (optional) ► **6.20**
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1964 / 1975
(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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Anne Caprara

Mailing Address 8925 Braeburn Drive

City State Zip Code
Annandale VA 22003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: 4210

Amount of Each Receipt this Period
86.40

Travel & Accommodations

B. Full Name (Last, First, Middle Initial)
US Post Office

Mailing Address 1050 Conn Ave NW

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 4211

Amount of Each Receipt this Period
818.00

Postage

C. Full Name (Last, First, Middle Initial)
US Post Office

Mailing Address 1050 Conn Ave NW

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 4212

Amount of Each Receipt this Period
1262.00

Postage

SUBTOTAL of Receipts This Page (optional)	▶	2166.40
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1965 / 1975
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Jessica Klonsky

Mailing Address 2211 40th Street NW
#2

City State Zip Code
Washington DC 20007

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	0	5

Transaction ID: 4223

Amount of Each Receipt this Period
0.03

Telephone

B. Full Name (Last, First, Middle Initial)
Jessica Klonsky

Mailing Address 2211 40th Street NW

City State Zip Code
Washington DC 20007

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	0	5

Transaction ID: 4224

Amount of Each Receipt this Period
17.93

Postage

C. Full Name (Last, First, Middle Initial)
Kate Chapek

Mailing Address 1320 N Veitch St
#1037

City State Zip Code
Arlington VA 22201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	0	5

Transaction ID: 4213

Amount of Each Receipt this Period
3.17

Postage

SUBTOTAL of Receipts This Page (optional) ► **21.13**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1966 / 1975
	(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	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Kate Chapek		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 1320 N Veitch St #1037		Transaction ID: 4214	
City Arlington	State VA	Zip Code 22201	Amount of Each Receipt this Period 33.31
FEC ID number of contributing federal political committee. C		Deliveries	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) B. Sabrina Brown		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address P.O. Box 1265		Transaction ID: 4215	
City North Beach	State MD	Zip Code 20714	Amount of Each Receipt this Period 5.72
FEC ID number of contributing federal political committee. C		Telephone	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) C. Ellen Malcolm		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 1120 Conn Ave NW Suite 1100		Transaction ID: 4216	
City Washington	State DC	Zip Code 20036	Amount of Each Receipt this Period 0.08
FEC ID number of contributing federal political committee. C		Telephone	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

SUBTOTAL of Receipts This Page (optional) ▶	39.11
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1967 / 1975
	<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 checked="" type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ellen Malcolm		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 1120 Conn Ave NW Suite 1100		Transaction ID: 4217	
City Washington State DC Zip Code 20036	Amount of Each Receipt this Period 15.16		
FEC ID number of contributing federal political committee. C		Deliveries	
Name of Employer Occupation	Aggregate Year-to-Date ▼ .00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Alimar Partners		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 1120 Conn Ave 11th Floor		Transaction ID: 4218	
City Washington State DC Zip Code 20036	Amount of Each Receipt this Period 1.26		
FEC ID number of contributing federal political committee. C		Copies	
Name of Employer Occupation	Aggregate Year-to-Date ▼ .00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Alimar Partners		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5	
Mailing Address 1120 Conn Ave NW 11th Floor		Transaction ID: 4219	
City Washington State DC Zip Code 20036	Amount of Each Receipt this Period 23.51		
FEC ID number of contributing federal political committee. C		Telephone	
Name of Employer Occupation	Aggregate Year-to-Date ▼ .00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	39.93
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1968 / 1975
	<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	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Alimar Partners		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 1120 Conn Ave NW 11th Floor		Transaction ID: 4220
City Washington State DC Zip Code 20036	Amount of Each Receipt this Period 6.24	
FEC ID number of contributing federal political committee. C	Postage	
Name of Employer Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Maren Hesla		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 5515 Little Falls Rd		Transaction ID: 4221
City Arlington State VA Zip Code 22207	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C	Parking	
Name of Employer Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Maren Hesla		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 5515 Little Falls Rd		Transaction ID: 4222
City Arlington State VA Zip Code 22207	Amount of Each Receipt this Period 6.44	
FEC ID number of contributing federal political committee. C	Postage	
Name of Employer Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	42.68
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1969 / 1975
	<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	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) 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		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5 Transaction ID: 4225 Amount of Each Receipt this Period 15470.12 Mailing Expense at Fair Market Value
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00	

B. Full Name (Last, First, Middle Initial) McCaskill for Missouri Mailing Address PO Box 6771 City State Zip Code St Louis MO 63144 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5 Transaction ID: 4226 Amount of Each Receipt this Period 15470.12 Mailing Expense at Fair Market Value
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00	

C. Full Name (Last, First, Middle Initial) Farrell for Congress Mailing Address PO Box 5136 City State Zip Code Westport CT 06881 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5 Transaction ID: 4227 Amount of Each Receipt this Period 15740.12 Mailing Expense at Fair Market Value
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00	

SUBTOTAL of Receipts This Page (optional)	46680.36
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1970 / 1975
	<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 checked="" type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Murphy for Congress		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address PO Box 1006		Transaction ID: 4228
City Paoli	State PA	Zip Code 19301
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 15261.71
Name of Employer	Occupation	Mailing Expense at Fair Market Value
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) B. Re-Elect Cantwell 2006		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address PO Box 61528		Transaction ID: 4229
City Vancouver	State WA	Zip Code 98666
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 15261.71
Name of Employer	Occupation	Mailing Expense at Fair Market Value
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) C. Mary Hodge		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 908 Harrison Circle		Transaction ID: 4230
City Alexandria	State VA	Zip Code 22304
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 7.05
Name of Employer	Occupation	Travel & Accommodations
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

SUBTOTAL of Receipts This Page (optional) ▶	30530.47
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1971 / 1975
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Jamie Natelson

Mailing Address 4870 MacArthur Blvd. NW
#3

City State Zip Code
Washington DC 20007

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 4231

Amount of Each Receipt this Period
2.36

Telephone

B. Full Name (Last, First, Middle Initial)
Katherine Pregliasco

Mailing Address 1900 South Eads Street
#215

City State Zip Code
Arlington VA 22202

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 4232

Amount of Each Receipt this Period
0.37

Postage

C. Full Name (Last, First, Middle Initial)
Grassroots Solutions

Mailing Address 1120 Connecticut Ave NW
11th Floor

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: 4233

Amount of Each Receipt this Period
4275.00

Sublease rent

SUBTOTAL of Receipts This Page (optional) ► **4277.73**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1972 / 1975
	(check only one)	
<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 checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
US Post Office

Mailing Address 1050 Connecticut Ave NW

City	State	Zip Code
Washington	DC	20036

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	5

Transaction ID: 4235

Amount of Each Receipt this Period

Postage

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="409.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="89100.47"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1973 / 1975
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Fifth Third Bancorp		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 38 Fountain Square Plaza		Transaction ID: 4234
City State Zip Code Cincinnati OH 45263	Amount of Each Receipt this Period 5.70	
FEC ID number of contributing federal political committee. C	Dividend	
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 21.45		

Full Name (Last, First, Middle Initial) B. Bank of America		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 1501 Pennsylvania Ave NW		Transaction ID: 4236
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 1120.49	
FEC ID number of contributing federal political committee. C	Sweep Interest	
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 13514.65		

Full Name (Last, First, Middle Initial) C. Bank of America		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 1501 Pennsylvania Ave NW		Transaction ID: 4237
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 155.66	
FEC ID number of contributing federal political committee. C	Interest	
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 1279.86		

SUBTOTAL of Receipts This Page (optional) ▶	1281.85
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1974 / 1975
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Merrill Lynch Mailing Address 1850 K Street NW City State Zip Code Washington DC 20006 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 0 / 2 0 0 5 Transaction ID: 4238 Amount of Each Receipt this Period 530.15 Dividend
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1124.98		

B. Full Name (Last, First, Middle Initial) Merrill Lynch Mailing Address 1850 K Street NW City State Zip Code Washington DC 20006 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 2 / 2 0 0 5 Transaction ID: 4239 Amount of Each Receipt this Period 4869.38 Sale of 80 shares of Lowes
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

C. Full Name (Last, First, Middle Initial) Alexandra Moses Mailing Address 1132 Union Street City State Zip Code San Francisco CA 94109 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 5 Transaction ID: 4240 Amount of Each Receipt this Period 5000.00 80 shares of Lowes [MEMO ITEM] Memo
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

SUBTOTAL of Receipts This Page (optional)	5399.53
TOTAL This Period (last page this line number only)	6681.38

Image# 26930151975

Form/Schedule: **23**

Memo Entry Y-T-D Contributions to Non Federal Candidates \$116,186.28

Transaction ID:

Form/Schedule: **H4 & 21B** No expenditures reported on Lines 21a or 21b were made on behalf of federal candidates.

Transaction ID:
