

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
National Organization for Women PAC

ADDRESS (number and street) 1100 H Street, NW
3rd Fl
 Check if different than previously reported. (ACC)
Washington DC 20005

2. **FEC IDENTIFICATION NUMBER** C00092247
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 07 01 2005 through 12 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 Latifa Lyles
Signature of Treasurer Electronically Filed by Latifa Lyles Date 02 15 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**

Write or Type Committee Name
National Organization for Women PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
1	2

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; 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>	Y	Y	Y	Y	2	0	0	5		92623.03
Y	Y	Y	Y							
2	0	0	5							
(b) Cash on Hand at Beginning of Reporting Period	48307.98									
(c) Total Receipts (from Line 19)	110691.00	123504.50								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	158998.98	216127.53								
7. Total Disbursements (from Line 31)	30351.64	87480.19								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	128647.34	128647.34								
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
National Organization for Women PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
1	2

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	32246.00	34001.00
(i) Itemized (use Schedule A)	78445.00	89503.50
(ii) Unitemized	110691.00	123504.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	110691.00	123504.50
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	110691.00	123504.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	110691.00	123504.50

DETAILED SUMMARY PAGE
of Disbursements

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.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	28851.64	83480.19
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	28851.64	83480.19
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	3500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
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	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	500.00	500.00
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))..	30351.64	87480.19
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	30351.64	87480.19

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	110691.00	123504.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	110691.00	123504.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	28851.64	83480.19
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	28851.64	83480.19

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Ms. Jan Allen		Date of Receipt M M / D D / Y Y Y Y 07 / 27 / 2005
Mailing Address 620 Sugarberry Road		Transaction ID: SA11A1.20880
City State Zip Code Chapel Hill, NC 2 NC	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	382523	
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. Linda Lee Alter		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2005
Mailing Address 210 W Rittenhouse Sq		Transaction ID: SA11A1.19240
City State Zip Code Philadelphia, PA PA	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	6731483	
Name of Employer self Occupation artist	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 Archer		Date of Receipt M M / D D / Y Y Y Y 10 / 20 / 2005
Mailing Address 244 Cataract Road		Transaction ID: SA11A1.21821
City State Zip Code Bishop CA 93514-7035	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	11481207	
Name of Employer Occupation Retired Engineer	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) ▶	1025.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Mr. James Archer		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 5
Mailing Address 244 Cataract Road		Transaction ID: SA11A1.21990
City State Zip Code Bishop CA 93514-7035	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	11481207	
Name of Employer Occupation Retired Engineer		
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. James Archer		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 0 / 2 0 0 5
Mailing Address 244 Cataract Road		Transaction ID: SA11A1.22152
City State Zip Code Bishop CA 93514-7035	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	11481207	
Name of Employer Occupation Retired Engineer		
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. Mr Paul Armer		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 0 / 2 0 0 5
Mailing Address 18250 Alexandra Way		Transaction ID: SA11A1.22151
City State Zip Code Grass Valley CA 95949-7359	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	11442258	
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	

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 8 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

A. Full Name (Last, First, Middle Initial) Ms. Bonni Axler		Date of Receipt M M / D D / Y Y Y Y 07 / 02 / 2005
Mailing Address 2151 Tioga Dr		Transaction ID: SA11A1.19123
City State Zip Code Land O'Lakes, FL FL	Amount of Each Receipt this Period 226.00	
FEC ID number of contributing federal political committee. C	3155603	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 226.00	
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. BACALL		Date of Receipt M M / D D / Y Y Y Y 10 / 20 / 2005
Mailing Address 15 EAGLE DRIVE		Transaction ID: SA11A1.21819
City State Zip Code NEW MARKET NH 03857-1742	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	6976542	
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) ▼		

C. Full Name (Last, First, Middle Initial) MS JOAN H. BACALL		Date of Receipt M M / D D / Y Y Y Y 11 / 21 / 2005
Mailing Address 15 EAGLE DRIVE		Transaction ID: SA11A1.21988
City State Zip Code NEW MARKET NH 03857-1742	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	6976542	
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) ▶	276.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

A. Full Name (Last, First, Middle Initial) MS JOAN H. BACALL		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 0 / 2 0 0 5	
Mailing Address 15 EAGLE DRIVE		Transaction ID: SA11A1.22149	
City State Zip Code NEW MARKET NH 03857-1742		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		6976542	
Name of Employer Occupation RETIRE			
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. Rebecca Bahr		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 5	
Mailing Address 101 W 90Th St Apt 22-E		Transaction ID: SA11A1.21596	
City State Zip Code New York, NY 1002 NY		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		11835097	
Name of Employer Occupation HORACE MANN HIGH SCHOOL, NY, NY HIGH SCHOOL TEACHER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	

C. Full Name (Last, First, Middle Initial) Ms. Rebecca Bahr		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 101 W 90Th St Apt 22-E		Transaction ID: SA11A1.21771	
City State Zip Code New York, NY 1002 NY		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		11835097	
Name of Employer Occupation HORACE MANN HIGH SCHOOL, NY, NY HIGH SCHOOL TEACHER			
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) ▶	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 10 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

A. Full Name (Last, First, Middle Initial) Ms. Rebecca Bahr		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 5
Mailing Address 101 W 90Th St Apt 22-E		Transaction ID: SA11A1.21935
City State Zip Code New York, NY 1002	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00
Name of Employer HORACE MANN HIGH SCHOOL, NY, NY	Occupation HIGH SCHOOL TEACHER	11835097
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. Rebecca Bahr		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 2 / 2 0 0 5
Mailing Address 101 W 90Th St Apt 22-E		Transaction ID: SA11A1.22094
City State Zip Code New York, NY 1002	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00
Name of Employer HORACE MANN HIGH SCHOOL, NY, NY	Occupation HIGH SCHOOL TEACHER	11835097
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) M Coleen Barker		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 33542 Valle Road		Transaction ID: SA11A1.21824
City State Zip Code San Juan CA 92675-4800	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00
Name of Employer	Occupation NOT GIVEN	5662994
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) ▶	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 11 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. M Coleen Barker		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 5
Mailing Address 33542 Valle Road		Transaction ID: SA11A1.21992
City State Zip Code San Juan CA 92675-4800	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	5662994	
Name of Employer Occupation NOT GIVEN	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. M Coleen Barker		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 0 / 2 0 0 5
Mailing Address 33542 Valle Road		Transaction ID: SA11A1.22153
City State Zip Code San Juan CA 92675-4800	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	5662994	
Name of Employer Occupation NOT GIVEN	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) C. Ms. Laura Barrett		Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 7 / 2 0 0 5
Mailing Address 1120 Crooked Creek Ln		Transaction ID: SA11A1.21492
City State Zip Code New Richmond, OH OH	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	12528429	
Name of Employer Occupation	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) ▶	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 12 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Dr. Marjie Barrett		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 5	
Mailing Address 1210 W. Lilly Lane		Transaction ID: SA11A1.21972	
City Arlington, TX	State TX	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		6144315	
Name of Employer University of Texas at Arlington	Occupation professor and social worker		
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. Marjie Barrett		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 0 / 2 0 0 5	
Mailing Address 1210 W. Lilly Lane		Transaction ID: SA11A1.22134	
City Arlington, TX	State TX	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		6144315	
Name of Employer University of Texas at Arlington	Occupation professor and 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 Sheila Bayne		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 10 Whitcomb Street		Transaction ID: SA11A1.21731	
City Belmont	State MA	Amount of Each Receipt this Period 25.00	
Zip Code 02478		3580370	
FEC ID number of contributing federal political committee. C			
Name of Employer TUFTS UNIVERSITY, MEDFORD, MA	Occupation ADMINISTRATOR		
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) ▶	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 13 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Ms Sheila Bayne		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 5
Mailing Address 10 Whitcomb Street		Transaction ID: SA11A1.21899
City State Zip Code Belmont MA 02478		Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		3580370
Name of Employer TUFTS UNIVERSITY, MEDFORD, MA	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) B. Ms Sheila Bayne		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 2 / 2 0 0 5
Mailing Address 10 Whitcomb Street		Transaction ID: SA11A1.22058
City State Zip Code Belmont MA 02478		Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		3580370
Name of Employer TUFTS UNIVERSITY, MEDFORD, MA	Occupation ADMINISTRATOR	
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. Rebecca Behrendt		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 2 / 2 0 0 5
Mailing Address 3403 Field Avenue		Transaction ID: SA11A1.22075
City State Zip Code Anacortes WA 98221		Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		7066681
Name of Employer The Cat's Pajamas, Inc	Occupation programmer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

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 14 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Ms. Priscilla Bellairs		Date of Receipt M M / D D / Y Y Y Y Y 07 / 20 / 2005	
Mailing Address 63 Purchase Street		Transaction ID: SA11A1.20501	
City State Zip Code Newburyport, MA 0 MA 01950		Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C		268177	
Name of Employer N. ESSEX COMM COLLEGE	Occupation TEACHER		
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. Priscilla Bellairs		Date of Receipt M M / D D / Y Y Y Y Y 08 / 22 / 2005	
Mailing Address 63 Purchase Street		Transaction ID: SA11A1.21395	
City State Zip Code Newburyport, MA 0 MA 01950		Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C		268177	
Name of Employer N. ESSEX COMM COLLEGE	Occupation TEACHER		
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. Priscilla Bellairs		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2005	
Mailing Address 63 Purchase Street		Transaction ID: SA11A1.21638	
City State Zip Code Newburyport, MA 0 MA 01950		Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C		268177	
Name of Employer N. ESSEX COMM COLLEGE	Occupation TEACHER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00		

SUBTOTAL of Receipts This Page (optional) ▶	105.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Ms. Priscilla Bellairs		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 63 Purchase Street		Transaction ID: SA11A1.21807	
City State Zip Code Newburyport, MA 0 MA 01950	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. C		268177	
Name of Employer N. ESSEX COMM COLLEGE	Occupation TEACHER		
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. Priscilla Bellairs		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 1 / 2 0 0 5	
Mailing Address 63 Purchase Street		Transaction ID: SA11A1.21971	
City State Zip Code Newburyport, MA 0 MA 01950	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. C		268177	
Name of Employer N. ESSEX COMM COLLEGE	Occupation TEACHER		
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) C. Ms. Priscilla Bellairs		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 0 / 2 0 0 5	
Mailing Address 63 Purchase Street		Transaction ID: SA11A1.22131	
City State Zip Code Newburyport, MA 0 MA 01950	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. C		268177	
Name of Employer N. ESSEX COMM COLLEGE	Occupation TEACHER		
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) ▶	105.00
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 16 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

A. Full Name (Last, First, Middle Initial)
Ms Janet Bonnema

Mailing Address 1007 NW 5th Street

City Okeechobee State FL Zip Code 34973

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

Name of Employer Occupation
Retired Civil Engineer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 2 1 / 2 0 0 5

Transaction ID: SA11A1.22001

Amount of Each Receipt this Period
570721
50.00

B. Full Name (Last, First, Middle Initial)
Ms Janet Bonnema

Mailing Address 1007 NW 5th Street

City Okeechobee State FL Zip Code 34973

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

Name of Employer Occupation
Retired Civil Engineer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 0 / 2 0 0 5

Transaction ID: SA11A1.22164

Amount of Each Receipt this Period
570721
50.00

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

Mailing Address 506 Conshohocken State Rd

City Narbeth State PA Zip Code 19072-3513

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

Name of Employer Occupation
NURSING HOME, PHILADELPHIA, PA NHA

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 5

Transaction ID: SA11A1.20452

Amount of Each Receipt this Period
8546251
50.00

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 17 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

A. Full Name (Last, First, Middle Initial)
Ms Janet Brody

Mailing Address 506 Conshohocken State Rd

City Narbeth State PA Zip Code 19072-3513

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

Name of Employer NURSING HOME, PHILADELPHI-A, PA Occupation NHA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2005

Transaction ID: SA11A1.21389

Amount of Each Receipt this Period
 50.00

8546251

B. Full Name (Last, First, Middle Initial)
Ms Janet Brody

Mailing Address 506 Conshohocken State Rd

City Narbeth State PA Zip Code 19072-3513

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

Name of Employer NURSING HOME, PHILADELPHI-A, PA Occupation NHA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 20 / 2005

Transaction ID: SA11A1.21635

Amount of Each Receipt this Period
 50.00

8546251

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

Mailing Address 506 Conshohocken State Rd

City Narbeth State PA Zip Code 19072-3513

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

Name of Employer NURSING HOME, PHILADELPHI-A, PA Occupation NHA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2005

Transaction ID: SA11A1.21805

Amount of Each Receipt this Period
 50.00

8546251

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 18 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

A. Full Name (Last, First, Middle Initial)
Ms Janet Brody

Mailing Address 506 Conshohocken State Rd

City Narbeth State PA Zip Code 19072-3513

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

Name of Employer NURSING HOME, PHILADELPHI-A, PA Occupation NHA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 1 / 2 0 0 5

Transaction ID: SA11A1.21975

Amount of Each Receipt this Period
 50.00

8546251

B. Full Name (Last, First, Middle Initial)
Ms Janet Brody

Mailing Address 506 Conshohocken State Rd

City Narbeth State PA Zip Code 19072-3513

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

Name of Employer NURSING HOME, PHILADELPHI-A, PA Occupation NHA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 2 0 / 2 0 0 5

Transaction ID: SA11A1.22137

Amount of Each Receipt this Period
 50.00

8546251

C. Full Name (Last, First, Middle Initial)
Ms. Geraldine Buckles, Esq.

Mailing Address 16910 Locherbie

City Birmingham, MI 48 State MI Zip Code

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 ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 0 2 / 2 0 0 5

Transaction ID: SA11A1.22011

Amount of Each Receipt this Period
 500.00

9198664

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 19 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Ms. Marlene Cannova		Date of Receipt M M / D D / Y Y Y Y 08 / 22 / 2005	
Mailing Address 385 Talbot Ave #16		Transaction ID: SA11A1.21388	
City State Zip Code Pacifica CA 94044	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	4221107		
Name of Employer Occupation Berman, Berkley & Lasky Paralegal	Aggregate Year-to-Date ▼ 215.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Marlene Cannova		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2005	
Mailing Address 385 Talbot Ave #16		Transaction ID: SA11A1.21633	
City State Zip Code Pacifica CA 94044	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	4221107		
Name of Employer Occupation Berman, Berkley & Lasky Paralegal	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. Marlene Cannova		Date of Receipt M M / D D / Y Y Y Y 10 / 20 / 2005	
Mailing Address 385 Talbot Ave #16		Transaction ID: SA11A1.21803	
City State Zip Code Pacifica CA 94044	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	4221107		
Name of Employer Occupation Berman, Berkley & Lasky Paralegal	Aggregate Year-to-Date ▼ 265.00		
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 20 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Ms. Marlene Cannova		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 5	
Mailing Address 385 Talbot Ave #16		Transaction ID: SA11A1.21973	
City State Zip Code Pacifica CA 94044	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C		4221107	
Name of Employer Berman, Berkley & Lasky	Occupation Paralegal		
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. Marlene Cannova		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 0 / 2 0 0 5	
Mailing Address 385 Talbot Ave #16		Transaction ID: SA11A1.22135	
City State Zip Code Pacifica CA 94044	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C		4221107	
Name of Employer Berman, Berkley & Lasky	Occupation Paralegal		
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. Ms. Marlene Cannova		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 3 / 2 0 0 5	
Mailing Address 385 Talbot Ave #16		Transaction ID: SA11A1.22173	
City State Zip Code Pacifica CA 94044	Amount of Each Receipt this Period 5.00		
FEC ID number of contributing federal political committee. C		4221107	
Name of Employer Berman, Berkley & Lasky	Occupation Paralegal		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00		

SUBTOTAL of Receipts This Page (optional) ▶	55.00
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 21 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Ms. Sara Carmody		Date of Receipt M M / D D / Y Y Y Y 07 / 02 / 2005
Mailing Address 6301 Belle River Dr		Transaction ID: SA11A1.19125
City State Zip Code Brentwood, TN 370		Amount of Each Receipt this Period 205.00
FEC ID number of contributing federal political committee. C		12559853
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 205.00	

Full Name (Last, First, Middle Initial) B. Ms Sharon Cebula		Date of Receipt M M / D D / Y Y Y Y 11 / 21 / 2005
Mailing Address 1506 Parkgate Avenue		Transaction ID: SA11A1.21997
City State Zip Code Akron OH 44313-7442		Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		11893567
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation RECEPTIONIST Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) C. Ms Sharon Cebula		Date of Receipt M M / D D / Y Y Y Y 12 / 20 / 2005
Mailing Address 1506 Parkgate Avenue		Transaction ID: SA11A1.22158
City State Zip Code Akron OH 44313-7442		Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		11893567
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation RECEPTIONIST Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional) ▶	245.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Mr. David Chandler		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5
Mailing Address 9754 Bellder Drive		Transaction ID: SA11A1.21756
City State Zip Code Downey CA 90240	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		11247780
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) ▼		

Full Name (Last, First, Middle Initial) B. Mr. David Chandler		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 5
Mailing Address 9754 Bellder Drive		Transaction ID: SA11A1.21923
City State Zip Code Downey CA 90240	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		11247780
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. Mr. David Chandler		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 2 / 2 0 0 5
Mailing Address 9754 Bellder Drive		Transaction ID: SA11A1.22082
City State Zip Code Downey CA 90240	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		11247780
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) ▶	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:	PAGE 23 / 91						
	(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

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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Mr. Patrick Chauncey		Date of Receipt M M / D D / Y Y Y Y 07 / 02 / 2005	
Mailing Address 4615 N. Park Avenue, #1408		Transaction ID: SA11A1.19137	
City State Zip Code Chevy Chase, MD 2 MD	Amount of Each Receipt this Period 270.00		
FEC ID number of contributing federal political committee. C	12553997		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 270.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Mr. Patrick Chauncey		Date of Receipt M M / D D / Y Y Y Y 08 / 05 / 2005	
Mailing Address 4615 N. Park Avenue, #1408		Transaction ID: SA11A1.21092	
City State Zip Code Chevy Chase, MD 2 MD	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C	12553997		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 310.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Mr. Morgan Clark		Date of Receipt M M / D D / Y Y Y Y 12 / 20 / 2005	
Mailing Address 136 Sunnyvale Ct.		Transaction ID: SA11A1.22118	
City State Zip Code Somerset NJ 08873	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	4475349		
Name of Employer letter sent Occupation	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) ▶	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 24 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Ms. Rebecca Cleary		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2005	
Mailing Address 1661 Shoreline Drive		Transaction ID: SA11A1.21579	
City State Zip Code Santa Barbara, CA CA	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	11250453		
Name of Employer LETTER SENT	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. Rebecca Cleary		Date of Receipt M M / D D / Y Y Y Y 10 / 18 / 2005	
Mailing Address 1661 Shoreline Drive		Transaction ID: SA11A1.21757	
City State Zip Code Santa Barbara, CA CA	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	11250453		
Name of Employer LETTER SENT	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. Rebecca Cleary		Date of Receipt M M / D D / Y Y Y Y 11 / 15 / 2005	
Mailing Address 1661 Shoreline Drive		Transaction ID: SA11A1.21924	
City State Zip Code Santa Barbara, CA CA	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	11250453		
Name of Employer LETTER SENT	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)	75.00
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 25 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Ms. Rebecca Cleary		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 2 / 2 0 0 5
Mailing Address 1661 Shoreline Drive		Transaction ID: SA11A1.22084
City State Zip Code Santa Barbara, CA CA	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	11250453	
Name of Employer Occupation LETTER SENT 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) B. Ms. Ann Cooke		Date of Receipt M M / D D / Y Y Y Y 0 7 / 1 5 / 2 0 0 5
Mailing Address 23W364 Greenbriar Dr		Transaction ID: SA11A1.19973
City State Zip Code Naperville, IL 60 IL	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	12552137	
Name of Employer Occupation		
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. Anita Darrow		Date of Receipt M M / D D / Y Y Y Y 0 7 / 2 7 / 2 0 0 5
Mailing Address 1020 Grove St Apt 706		Transaction ID: SA11A1.20882
City State Zip Code Evanston, IL 6020 IL	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	11510500	
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) ▶	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 26 / 91
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
National Organization for Women PAC

A. Full Name (Last, First, Middle Initial)
MS PAMELA DERBY

Mailing Address
630 OAKWOOD DR

City State Zip Code
ASHLAND OR 97520-6618

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	0	/	2	0	0	5

Transaction ID: SA11A1.21665

Amount of Each Receipt this Period
50.00

2399749

B. Full Name (Last, First, Middle Initial)
MS PAMELA DERBY

Mailing Address
630 OAKWOOD DR

City State Zip Code
ASHLAND OR 97520-6618

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

Name of Employer Occupation

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: SA11A1.21838

Amount of Each Receipt this Period
50.00

2399749

C. Full Name (Last, First, Middle Initial)
MS PAMELA DERBY

Mailing Address
630 OAKWOOD DR

City State Zip Code
ASHLAND OR 97520-6618

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

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

Transaction ID: SA11A1.22000

Amount of Each Receipt this Period
50.00

2399749

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 27 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. MS PAMELA DERBY		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 0 / 2 0 0 5	
Mailing Address 630 OAKWOOD DR		Transaction ID: SA11A1.22163	
City ASHLAND	State OR	Amount of Each Receipt this Period 50.00	
Zip Code 97520-6618		2399749	
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) B. MS DIANE DICARLO		Date of Receipt M M / D D / Y Y Y Y 0 7 / 1 8 / 2 0 0 5	
Mailing Address 65 WELLESLEY AVE		Transaction ID: SA11A1.20202	
City NEEDHAM	State MA	Amount of Each Receipt this Period 35.00	
Zip Code 02494		4919130	
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) C. MS DIANE DICARLO		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 5	
Mailing Address 65 WELLESLEY AVE		Transaction ID: SA11A1.21317	
City NEEDHAM	State MA	Amount of Each Receipt this Period 35.00	
Zip Code 02494		4919130	
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 ▼ 245.00		

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 28 / 91		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Ms. Melanie Dietzel		Date of Receipt M M / D D / Y Y Y Y 07 / 20 / 2005	
Mailing Address 1991 Greenview Dr Arkansas NOW State President Arkan		Transaction ID: SA11A1.20463	
City Fayetteville, AR	State AR	Zip Code 72701	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		11184876	
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 ▼ 600.00		

Full Name (Last, First, Middle Initial) B. Ms. Melanie Dietzel		Date of Receipt M M / D D / Y Y Y Y 08 / 22 / 2005	
Mailing Address 1991 Greenview Dr Arkansas NOW State President Arkan		Transaction ID: SA11A1.21394	
City Fayetteville, AR	State AR	Zip Code 72701	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		11184876	
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 ▼ 700.00		

Full Name (Last, First, Middle Initial) C. Ms. Melanie Dietzel		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2005	
Mailing Address 1991 Greenview Dr Arkansas NOW State President Arkan		Transaction ID: SA11A1.21642	
City Fayetteville, AR	State AR	Zip Code 72701	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		11184876	
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 ▼ 800.00		

SUBTOTAL of Receipts This Page (optional) ▶	300.00
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 29 / 91		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Ms. Melanie Dietzel		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 1991 Greenview Dr Arkansas NOW State President Arkan		Transaction ID: SA11A1.21812	
City Fayetteville, AR	State AR	Zip Code 72701	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		11184876	
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 ▼ 900.00		

Full Name (Last, First, Middle Initial) B. Ms. Melanie Dietzel		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 5	
Mailing Address 1991 Greenview Dr Arkansas NOW State President Arkan		Transaction ID: SA11A1.21982	
City Fayetteville, AR	State AR	Zip Code 72701	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		11184876	
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) C. Ms. Melanie Dietzel		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 0 / 2 0 0 5	
Mailing Address 1991 Greenview Dr Arkansas NOW State President Arkan		Transaction ID: SA11A1.22143	
City Fayetteville, AR	State AR	Zip Code 72701	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		11184876	
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 ▼ 1100.00		

SUBTOTAL of Receipts This Page (optional) ▶	300.00
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 30 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

A. Full Name (Last, First, Middle Initial)
Ms. Sue Errington

Mailing Address 3200 Brook Drive

City Muncie State IN Zip Code 47304

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

Name of Employer: Planned Parenthood of E. Indiana
Occupation: Associate Director

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 0 / 2 0 0 5

Transaction ID: SA11A1.21832

Amount of Each Receipt this Period
25.00

410605

B. Full Name (Last, First, Middle Initial)
Ms. Sue Errington

Mailing Address 3200 Brook Drive

City Muncie State IN Zip Code 47304

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

Name of Employer: Planned Parenthood of E. Indiana
Occupation: Associate Director

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 1 / 2 1 / 2 0 0 5

Transaction ID: SA11A1.21996

Amount of Each Receipt this Period
25.00

410605

C. Full Name (Last, First, Middle Initial)
Ms. Sue Errington

Mailing Address 3200 Brook Drive

City Muncie State IN Zip Code 47304

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

Name of Employer: Planned Parenthood of E. Indiana
Occupation: Associate Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 5

Transaction ID: SA11A1.22157

Amount of Each Receipt this Period
25.00

410605

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 31 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

A. Full Name (Last, First, Middle Initial) Mr. James Eyer		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2005	
Mailing Address 6228 Creekview Lane		Transaction ID: SA11A1.19244	
City State Zip Code Brooklyn Park MN 55443		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		7342710	
Name of Employer Occupation unknown unknown			
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. Katherine Ferguson		Date of Receipt M M / D D / Y Y Y Y 10 / 17 / 2005	
Mailing Address 2117 Silver Avenue		Transaction ID: SA11A1.21697	
City State Zip Code Las Vegas, NV 891 NV		Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		11116399	
Name of Employer Occupation			
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) Edna Fillingier		Date of Receipt M M / D D / Y Y Y Y 09 / 10 / 2005	
Mailing Address 315 Ray St		Transaction ID: SA11A1.21503	
City State Zip Code Newcomerstown, OH OH		Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		12527657	
Name of Employer Occupation			
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) ▶	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 32 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

A. Full Name (Last, First, Middle Initial)
MD Juliana Franz

Mailing Address P O Box 549

City State Zip Code
Garrett Park, MD MD

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

Name of Employer Occupation
RETIRED PSYCHIATRIST

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
205.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 14 / 2005

Transaction ID: SA11A1.19924

Amount of Each Receipt this Period
205.00

7046782

B. Full Name (Last, First, Middle Initial)
Ms Phyllis Freedman

Mailing Address 40 N 7Th Avenue

City State Zip Code
Highland Park NJ 08904-2931

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
10 / 18 / 2005

Transaction ID: SA11A1.21764

Amount of Each Receipt this Period
25.00

5647060

C. Full Name (Last, First, Middle Initial)
Ms Phyllis Freedman

Mailing Address 40 N 7Th Avenue

City State Zip Code
Highland Park NJ 08904-2931

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
11 / 15 / 2005

Transaction ID: SA11A1.21929

Amount of Each Receipt this Period
25.00

5647060

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 33 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Ms Phyllis Freedman		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 2 / 2 0 0 5	
Mailing Address 40 N 7Th Avenue		Transaction ID: SA11A1.22090	
City State Zip Code Highland Park NJ 08904-2931	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C		5647060	
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) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Pamela Garrison		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 5	
Mailing Address 3824 La Playa Blvd		Transaction ID: SA11A1.21675	
City State Zip Code Miami FL 33133	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		6484323	
Name of Employer Occupation	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. Sarah Glickenhau		Date of Receipt M M / D D / Y Y Y Y 0 7 / 0 6 / 2 0 0 5	
Mailing Address 100 Dorchester Road		Transaction ID: SA11A1.19163	
City State Zip Code Scarsdale, NY 105 NY	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. C		318493	
Name of Employer Occupation	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) ▶	875.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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)
National Organization for Women PAC

A. Full Name (Last, First, Middle Initial)
Ms. Mary Helen Goode

Mailing Address 9323 Doubloon Road

City Indianapolis State IN Zip Code 46268-3245

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

Name of Employer Crossmann Occupation Home buyer education

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 597.00

Date of Receipt
07 / 02 / 2005

Transaction ID: SA11A1.19091

Amount of Each Receipt this Period
597.00

2060838

B. Full Name (Last, First, Middle Initial)
Ms. Jennifer Gross

Mailing Address 265 Wyoming St W

City Saint Paul, MN State MN Zip Code 55

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

Name of Employer SELF Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
07 / 07 / 2005

Transaction ID: SA11A1.19226

Amount of Each Receipt this Period
300.00

10689305

C. Full Name (Last, First, Middle Initial)
MS URSULA GUSSE

Mailing Address 107 BLYTH AVE #B

City GREENWOOD State SC Zip Code 29649-2403

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

Name of Employer Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
11 / 21 / 2005

Transaction ID: SA11A1.21980

Amount of Each Receipt this Period
20.00

11159373

SUBTOTAL of Receipts This Page (optional)	▶	917.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

A. Full Name (Last, First, Middle Initial)
MS URSULA GUSSE

Mailing Address
107 BLYTH AVE #B

City State Zip Code
GREENWOOD SC 29649-2403

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

Name of Employer Occupation
RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
MM / DD / YYYY
12 / 20 / 2005

Transaction ID: SA11A1.22141

Amount of Each Receipt this Period
20.00

11159373

B. Full Name (Last, First, Middle Initial)
Ms. Leslee Hackenson

Mailing Address 44 Haldeman Rd

City State Zip Code
Santa Monica, CA CA

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 16 / 2005

Transaction ID: SA11A1.21246

Amount of Each Receipt this Period
500.00

5721618

C. Full Name (Last, First, Middle Initial)
James Hadley

Mailing Address 2591 Nicolet Dr.

City State Zip Code
Green Bay WI 54311

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
MM / DD / YYYY
07 / 14 / 2005

Transaction ID: SA11A1.19904

Amount of Each Receipt this Period
400.00

7515596

SUBTOTAL of Receipts This Page (optional)	▶	920.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Ms Laura May Hainisch		Date of Receipt M M / D D / Y Y Y Y 08 / 22 / 2005	
Mailing Address 8520 Gardenia Drive		Transaction ID: SA11A1.21386	
City State Zip Code Seminole FL 33777	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C	394650		
Name of Employer Occupation Retired	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 Laura May Hainisch		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2005	
Mailing Address 8520 Gardenia Drive		Transaction ID: SA11A1.21632	
City State Zip Code Seminole FL 33777	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C	394650		
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 Laura May Hainisch		Date of Receipt M M / D D / Y Y Y Y 10 / 20 / 2005	
Mailing Address 8520 Gardenia Drive		Transaction ID: SA11A1.21813	
City State Zip Code Seminole FL 33777	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C	394650		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 270.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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 37 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Ms Laura May Hainisch		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 5
Mailing Address 8520 Gardenia Drive		Transaction ID: SA11A1.21979
City State Zip Code Seminole FL 33777	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C	394650	
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 Laura May Hainisch		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 0 / 2 0 0 5
Mailing Address 8520 Gardenia Drive		Transaction ID: SA11A1.22128
City State Zip Code Seminole FL 33777	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C	394650	
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) C. Dr. Coleen Hanna		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 5
Mailing Address 1232 Breckenridge Cir.		Transaction ID: SA11A1.21654
City State Zip Code Riva MD 21140	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	11563798	
Name of Employer Occupation Balt. Gas & Elec Psychologist	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) ▶	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 38 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Dr. Coleen Hanna		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 1232 Breckenridge Cir.		Transaction ID: SA11A1.21825
City State Zip Code Riva MD 21140	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	11563798	
Name of Employer Balt. Gas & Elec	Occupation Psychologist	
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. Coleen Hanna		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 5
Mailing Address 1232 Breckenridge Cir.		Transaction ID: SA11A1.21993
City State Zip Code Riva MD 21140	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	11563798	
Name of Employer Balt. Gas & Elec	Occupation 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) C. Dr. Coleen Hanna		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 0 / 2 0 0 5
Mailing Address 1232 Breckenridge Cir.		Transaction ID: SA11A1.22155
City State Zip Code Riva MD 21140	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	11563798	
Name of Employer Balt. Gas & Elec	Occupation Psychologist	
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) ▶	75.00
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 39 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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)
National Organization for Women PAC

A. Full Name (Last, First, Middle Initial) Ms. L. Haun Mailing Address 1329 N. Dellrose Street City State Zip Code Wichita, KS 67208 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00		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>0</td><td>7</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: SA11A1.20696 Amount of Each Receipt this Period <table border="1"> <tr> <td>600.00</td> </tr> </table> 9570391	M	M	/	D	D	/	Y	Y	Y	Y	0	7	/	2	5	/	2	0	0	5	600.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	7	/	2	5	/	2	0	0	5														
600.00																							

B. Full Name (Last, First, Middle Initial) Ms. Edith Herron Mailing Address 36 Park Avenue City State Zip Code Rehoboth Beach, DE 16803 FEC ID number of contributing federal political committee. C Name of Employer Occupation SELF EMPLOYED COMPUTER CONSULTANT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 245.00		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>0</td><td>7</td><td>/</td><td>1</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: SA11A1.20250 Amount of Each Receipt this Period <table border="1"> <tr> <td>35.00</td> </tr> </table> 7129521	M	M	/	D	D	/	Y	Y	Y	Y	0	7	/	1	8	/	2	0	0	5	35.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	7	/	1	8	/	2	0	0	5														
35.00																							

C. Full Name (Last, First, Middle Initial) Ms. Edith Herron Mailing Address 36 Park Avenue City State Zip Code Rehoboth Beach, DE 16803 FEC ID number of contributing federal political committee. C Name of Employer Occupation SELF EMPLOYED COMPUTER CONSULTANT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 280.00		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>0</td><td>8</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: SA11A1.21261 Amount of Each Receipt this Period <table border="1"> <tr> <td>35.00</td> </tr> </table> 7129521	M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	1	7	/	2	0	0	5	35.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	8	/	1	7	/	2	0	0	5														
35.00																							

SUBTOTAL of Receipts This Page (optional)	670.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Ms. Edith Herron		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2005
Mailing Address 36 Park Avenue		Transaction ID: SA11A1.21519
City State Zip Code Rehoboth Beach, DE DE 16803	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C	7129521	
Name of Employer SELF EMPLOYED Occupation COMPUTER CONSULTANT		
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. Edith Herron		Date of Receipt M M / D D / Y Y Y Y 10 / 18 / 2005
Mailing Address 36 Park Avenue		Transaction ID: SA11A1.21707
City State Zip Code Rehoboth Beach, DE DE 16803	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C	7129521	
Name of Employer SELF EMPLOYED Occupation COMPUTER 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. Ms. Edith Herron		Date of Receipt M M / D D / Y Y Y Y 11 / 15 / 2005
Mailing Address 36 Park Avenue		Transaction ID: SA11A1.21875
City State Zip Code Rehoboth Beach, DE DE 16803	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C	7129521	
Name of Employer SELF EMPLOYED Occupation COMPUTER CONSULTANT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00	

SUBTOTAL of Receipts This Page (optional) ▶	105.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

A. Full Name (Last, First, Middle Initial) Ms. Edith Herron		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 2 / 2 0 0 5
Mailing Address 36 Park Avenue		Transaction ID: SA11A1.22033
City State Zip Code Rehoboth Beach, DE DE 16803	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C		7129521
Name of Employer SELF EMPLOYED	Occupation COMPUTER CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

B. Full Name (Last, First, Middle Initial) Ms. Betty Holling		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 5
Mailing Address 15 Sylvan Avenue		Transaction ID: SA11A1.21520
City State Zip Code Chelmsford, MA 01 MA	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		1617604
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 ▼ 225.00	

C. Full Name (Last, First, Middle Initial) Ms. Betty Holling		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5
Mailing Address 15 Sylvan Avenue		Transaction ID: SA11A1.21769
City State Zip Code Chelmsford, MA 01 MA	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		1617604
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 ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	85.00
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 42 / 91						
	(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

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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Ms. Betty Holling		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 5	
Mailing Address 15 Sylvan Avenue		Transaction ID: SA11A1.21876	
City State Zip Code Chelmsford, MA 01 MA		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		1617604	
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 ▼ 275.00	

Full Name (Last, First, Middle Initial) B. Ms. Betty Holling		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 2 / 2 0 0 5	
Mailing Address 15 Sylvan Avenue		Transaction ID: SA11A1.22032	
City State Zip Code Chelmsford, MA 01 MA		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		1617604	
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 ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Patricia Holmes		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 2 / 2 0 0 5	
Mailing Address P.O. Box 1123		Transaction ID: SA11A1.22055	
City State Zip Code E. Orleans MA 02643		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		3239167	
Name of Employer Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	

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:	PAGE 43 / 91
	(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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Amy Jaynes		Date of Receipt M M / D D / Y Y Y Y 07 / 21 / 2005	
Mailing Address 7414 Sun Point Ln		Transaction ID: SA11A1.20625	
City State Zip Code Sacramento, CA 95 CA	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	11385473		
Name of Employer Occupation	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 Cynthia Jimenez		Date of Receipt M M / D D / Y Y Y Y 07 / 18 / 2005	
Mailing Address 932 FRANKLIN ST		Transaction ID: SA11A1.20199	
City State Zip Code WYOMISSING PA 19610-3003	Amount of Each Receipt this Period 540.00		
FEC ID number of contributing federal political committee. C	354035		
Name of Employer Occupation RETIRED	Aggregate Year-to-Date ▼ 540.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Patricia Jolicoeur		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2005	
Mailing Address 25 Timber Ridge Road		Transaction ID: SA11A1.19266	
City State Zip Code W. Springfield MA 01089	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C	6144091		
Name of Employer Occupation	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) ▶	1340.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

A. Full Name (Last, First, Middle Initial)
Ms. Jane Karp

Mailing Address 44 Coconut Row #B117118

City State Zip Code
Palm Beach, FL 33 FL

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

Name of Employer self Occupation
Karp Development Co., Inc

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
07 / 13 / 2005

Transaction ID: SA11A1.19585

Amount of Each Receipt this Period
250.00

11829371

B. Full Name (Last, First, Middle Initial)
Mr. Robert Kaufman

Mailing Address 345 East 52nd Street

City State Zip Code
New York, NY 1002 NY

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

Name of Employer Proskauer Rose, LLP Occupation
Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2005

Transaction ID: SA11A1.21165

Amount of Each Receipt this Period
1000.00

12037131

C. Full Name (Last, First, Middle Initial)
Ms. Joyce Keener

Mailing Address PO Box 3349

City State Zip Code
Florence, OR 9743 OR

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
07 / 14 / 2005

Transaction ID: SA11A1.19805

Amount of Each Receipt this Period
250.00

11836921

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 45 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

A. Full Name (Last, First, Middle Initial)
Marion Kellogg

Mailing Address 772 Brush Hill Rd.

City State Zip Code
Stowe VT 05672

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 ▼
500.00

Date of Receipt
MM / DD / YYYY
12 / 01 / 2005

Transaction ID: SA11A1.22009

Amount of Each Receipt this Period
500.00

56648

B. Full Name (Last, First, Middle Initial)
Ms Sheila Kerrigan

Mailing Address 2310 STANSBURY RD

City State Zip Code
CHAPEL HILL NC 27516-9399

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
07 / 07 / 2005

Transaction ID: SA11A1.19243

Amount of Each Receipt this Period
500.00

4318317

C. Full Name (Last, First, Middle Initial)
Mr. John Kluge

Mailing Address 1833 Crestview Dr

City State Zip Code
New Ulm, MN 56073 MN 56073

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

Name of Employer ACUTE CARE INC Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt
MM / DD / YYYY
07 / 18 / 2005

Transaction ID: SA11A1.20100

Amount of Each Receipt this Period
35.00

440370

SUBTOTAL of Receipts This Page (optional)	▶	1035.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Mr. John Kluge		Date of Receipt M M / D D / Y Y Y Y 08 / 17 / 2005
Mailing Address 1833 Crestview Dr		Transaction ID: SA11A1.21259
City State Zip Code New Ulm, MN 56073 MN 56073	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C	440370	
Name of Employer ACUTE CARE INC	Occupation PHYSICIAN	
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) B. Mr. John Kluge		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2005
Mailing Address 1833 Crestview Dr		Transaction ID: SA11A1.21599
City State Zip Code New Ulm, MN 56073 MN 56073	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C	440370	
Name of Employer ACUTE CARE INC	Occupation PHYSICIAN	
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. Mr. John Kluge		Date of Receipt M M / D D / Y Y Y Y 10 / 18 / 2005
Mailing Address 1833 Crestview Dr		Transaction ID: SA11A1.21704
City State Zip Code New Ulm, MN 56073 MN 56073	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C	440370	
Name of Employer ACUTE CARE INC	Occupation PHYSICIAN	
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)	105.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

A. Full Name (Last, First, Middle Initial) Mr. John Kluge Mailing Address 1833 Crestview Dr City New Ulm, MN 56073 State MN Zip Code 56073 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>1</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: SA11A1.21872 Amount of Each Receipt this Period <table border="1"> <tr> <td>35.00</td> </tr> </table> 440370	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	5		2	0	0	5	35.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	1		1	5		2	0	0	5														
35.00																							
Name of Employer ACUTE CARE INC 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>385.00</td> </tr> </table>		385.00																					
385.00																							

B. Full Name (Last, First, Middle Initial) Mr. John Kluge Mailing Address 1833 Crestview Dr City New Ulm, MN 56073 State MN Zip Code 56073 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>2</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: SA11A1.22026 Amount of Each Receipt this Period <table border="1"> <tr> <td>35.00</td> </tr> </table> 440370	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	2		2	0	0	5	35.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		1	2		2	0	0	5														
35.00																							
Name of Employer ACUTE CARE INC 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>420.00</td> </tr> </table>		420.00																					
420.00																							

C. Full Name (Last, First, Middle Initial) Ms Janet Laytham Mailing Address PO Box 690 City Oneonta State NY Zip Code 13820-0690 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>0</td><td>7</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: SA11A1.20294 Amount of Each Receipt this Period <table border="1"> <tr> <td>200.00</td> </tr> </table> 11465515	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	8		2	0	0	5	200.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	7		1	8		2	0	0	5														
200.00																							
Name of Employer Ultimate Broadcasting Occupation owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>1200.00</td> </tr> </table>		1200.00																					
1200.00																							

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: (check only one)	PAGE 48 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

A. Full Name (Last, First, Middle Initial)
Ms Janet Laytham

Mailing Address PO Box 690

City State Zip Code
Oneonta NY 13820-0690

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

Name of Employer Ultimate Broadcasting Occupation owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1400.00

Date of Receipt
MM / DD / YYYY
08 / 17 / 2005

Transaction ID: SA11A1.21344

Amount of Each Receipt this Period
200.00

11465515

B. Full Name (Last, First, Middle Initial)
Ms Janet Laytham

Mailing Address PO Box 690

City State Zip Code
Oneonta NY 13820-0690

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

Name of Employer Ultimate Broadcasting Occupation owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1600.00

Date of Receipt
MM / DD / YYYY
09 / 15 / 2005

Transaction ID: SA11A1.21605

Amount of Each Receipt this Period
200.00

11465515

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

Mailing Address PO Box 690

City State Zip Code
Oneonta NY 13820-0690

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

Name of Employer Ultimate Broadcasting Occupation owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1800.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2005

Transaction ID: SA11A1.21779

Amount of Each Receipt this Period
200.00

11465515

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 49 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Ms Janet Laytham		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 5
Mailing Address PO Box 690		Transaction ID: SA11A1.21944
City State Zip Code Oneonta NY 13820-0690	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C	11465515	
Name of Employer Ultimate Broadcasting Occupation owner		
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 Janet Laytham		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 2 / 2 0 0 5
Mailing Address PO Box 690		Transaction ID: SA11A1.22108
City State Zip Code Oneonta NY 13820-0690	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C	11465515	
Name of Employer Ultimate Broadcasting Occupation owner		
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) C. Mr. Richard Lightman		Date of Receipt M M / D D / Y Y Y Y 0 7 / 2 6 / 2 0 0 5
Mailing Address 226 W. Cherry Circle		Transaction ID: SA11A1.20846
City State Zip Code Memphis TN 38117	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	398065	
Name of Employer SECF (Malco Theatres Inc) Occupation Theatre Owner/Executive		
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) ▶	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 50 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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)
National Organization for Women PAC

A. Full Name (Last, First, Middle Initial) Mr. Austin Lin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5
Mailing Address 3835 20th Street		Transaction ID: SA11A1.21726
City State Zip Code San Francisco CA 94114	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		4015889
Name of Employer YAHOO! INC	Occupation feminist	
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) Mr. Austin Lin		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 5
Mailing Address 3835 20th Street		Transaction ID: SA11A1.21894
City State Zip Code San Francisco CA 94114	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		4015889
Name of Employer YAHOO! INC	Occupation feminist	
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. Austin Lin		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 2 / 2 0 0 5
Mailing Address 3835 20th Street		Transaction ID: SA11A1.22053
City State Zip Code San Francisco CA 94114	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		4015889
Name of Employer YAHOO! INC	Occupation feminist	
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) ▶	75.00
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 51 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Ms Joanne Lyman		Date of Receipt M M / D D / Y Y Y Y 08 / 12 / 2005
Mailing Address 163 E 81St Street Apt 9B		Transaction ID: SA11A1.21203
City State Zip Code New York NY 10028-1806	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C	314492	
Name of Employer Occupation METROPOLITAN MUSEUM OF ART DESIGNER/MANAGER		
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. Susan MacKenzie		Date of Receipt M M / D D / Y Y Y Y 07 / 02 / 2005
Mailing Address 1387 Linden Ave		Transaction ID: SA11A1.19115
City State Zip Code Memphis, TN 38104 TN	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	760926	
Name of Employer Occupation METROPOLITAN MUSEUM OF ART DESIGNER/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) C. Ms. Morgan McBride		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2005
Mailing Address 17340 Kennedy Rd		Transaction ID: SA11A1.21570
City State Zip Code Sonora, CA 95370- CA	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	10909695	
Name of Employer Occupation COLUMBIA COLLEGE, SONORA, CA 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) ▶	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 52 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Ms Margaret Mccartney		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 19381 Via Real Dr		Transaction ID: SA11A1.21761	
City State Zip Code Saratoga CA 95070-4527	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	1823350		
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) ▼			

Full Name (Last, First, Middle Initial) B. Ms Margaret Mccartney		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 5	
Mailing Address 19381 Via Real Dr		Transaction ID: SA11A1.21882	
City State Zip Code Saratoga CA 95070-4527	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	1823350		
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 Margaret Mccartney		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 2 / 2 0 0 5	
Mailing Address 19381 Via Real Dr		Transaction ID: SA11A1.22040	
City State Zip Code Saratoga CA 95070-4527	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	1823350		
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) ▶	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 53 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

A. Full Name (Last, First, Middle Initial)
Ms. Carolyn Megal

Mailing Address 3490 Oak Knoll Dr

City State Zip Code
Brighton, MI 4811 MI

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

Name of Employer Occupation
VANTICO INC SALES MGR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
12 / 01 / 2005

Transaction ID: SA11A1.22008

Amount of Each Receipt this Period
500.00

420323

B. Full Name (Last, First, Middle Initial)
Ms Mary Melville

Mailing Address 4 Paul Revere Road

City State Zip Code
Worcester MA 01609-1210

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
MM / DD / YYYY
07 / 06 / 2005

Transaction ID: SA11A1.19168

Amount of Each Receipt this Period
250.00

2050334

C. Full Name (Last, First, Middle Initial)
Ms. Rebecca Mericle

Mailing Address 1982 Kroupa Road

City State Zip Code
Traverse City, MI MI

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
07 / 13 / 2005

Transaction ID: SA11A1.19163

Amount of Each Receipt this Period
300.00

72942

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 54 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Ms. Caryle Miller		Date of Receipt M M / D D / Y Y Y Y 07 / 01 / 2005	
Mailing Address 8132 Keeler Street		Transaction ID: SA11A1.19083	
City State Zip Code Alexandria, VA 22	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C		377416	
Name of Employer DOE	Occupation engineer		
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. John Mitchell		Date of Receipt M M / D D / Y Y Y Y 12 / 29 / 2005	
Mailing Address 1868 Wyandotte Rd.		Transaction ID: SA11A1.22176	
City State Zip Code Columbus OH 43212	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		765123	
Name of Employer Retired	Occupation 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) C. Marilyn Monter		Date of Receipt M M / D D / Y Y Y Y 07 / 08 / 2005	
Mailing Address 421 Berry Hill Road		Transaction ID: SA11A1.19333	
City State Zip Code Syosset NY 11791	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		11891876	
Name of Employer Holiday Management Associates	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) ▶	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 55 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Mrs. Avis Ogilvy Moore		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2005	
Mailing Address 436 Russell Avenue		Transaction ID: SA11A1.19224	
City State Zip Code Gaithersburg, MD MD	Amount of Each Receipt this Period 450.00		
FEC ID number of contributing federal political committee. C		10767515	
Name of Employer Occupation RETIRED HOUSEWIFE	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. Ms. Victoria Morris		Date of Receipt M M / D D / Y Y Y Y 07 / 12 / 2005	
Mailing Address 300 Mt Holly Rd		Transaction ID: SA11A1.19374	
City State Zip Code Katona, NY 10536- NY	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C		90175	
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. Janet Morrow		Date of Receipt M M / D D / Y Y Y Y 12 / 05 / 2005	
Mailing Address 86 Rock Place		Transaction ID: SA11A1.22017	
City State Zip Code Big Fork, MT 5991 MT	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		9425257	
Name of Employer Occupation HOMEMAKER	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) ▶	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: (check only one)	PAGE 56 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Ms Constance Murray		Date of Receipt M M / D D / Y Y Y Y 07 / 28 / 2005	
Mailing Address 10 Oak Meadow Ln		Transaction ID: SA11A1.20942	
City State Zip Code Carmel Valley CA 93924-9455	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	11987161		
Name of Employer SELF Occupation INVESTOR	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 Maxine Myers		Date of Receipt M M / D D / Y Y Y Y 07 / 15 / 2005	
Mailing Address 128 Coccio Dr		Transaction ID: SA11A1.20039	
City State Zip Code W Orange NJ 07052	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C	907766		
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 Shirley Plapp		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2005	
Mailing Address 5120 E. Woodgate Lane		Transaction ID: SA11A1.21628	
City State Zip Code Tucson AZ 85712-1343	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	472019		
Name of Employer Occupation RN, 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: (check only one)	PAGE 57 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Ms Shirley Plapp		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 5120 E. Woodgate Lane		Transaction ID: SA11A1.21817
City State Zip Code Tucson AZ 85712-1343	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	472019	
Name of Employer Occupation Occupation RN, 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 Shirley Plapp		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 5
Mailing Address 5120 E. Woodgate Lane		Transaction ID: SA11A1.21964
City State Zip Code Tucson AZ 85712-1343	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C	472019	
Name of Employer Occupation Occupation RN, Retired	Aggregate Year-to-Date ▼ 280.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms Shirley Plapp		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 0 / 2 0 0 5
Mailing Address 5120 E. Woodgate Lane		Transaction ID: SA11A1.22125
City State Zip Code Tucson AZ 85712-1343	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C	472019	
Name of Employer Occupation Occupation RN, Retired	Aggregate Year-to-Date ▼ 310.00	
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 58 / 91						
	(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

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)
National Organization for Women PAC

A. Full Name (Last, First, Middle Initial) Ms. Cheryl Pope		Date of Receipt M M / D D / Y Y Y Y 08 / 10 / 2005	
Mailing Address 2232 34Th Ave S		Transaction ID: SA11A1.21167	
City State Zip Code Seattle, WA 98144 WA	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	6607030		
Name of Employer Occupation	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. Doreen Quinn		Date of Receipt M M / D D / Y Y Y Y 07 / 06 / 2005	
Mailing Address 569 Evanswood Place		Transaction ID: SA11A1.19180	
City State Zip Code Cincinnati OH 45220	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	4635223		
Name of Employer Occupation Retired Teacher	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. Marilyn Raplinger		Date of Receipt M M / D D / Y Y Y Y 07 / 25 / 2005	
Mailing Address 11897 210th Street W.		Transaction ID: SA11A1.20739	
City State Zip Code Lakeville, MN 550 MN	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C	6677355		
Name of Employer Occupation	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) ▶	1550.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

A. Full Name (Last, First, Middle Initial) Ms. Carmen Reid		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 5	
Mailing Address 1201 Juniper Court		Transaction ID: SA11A1.21904	
City State Zip Code Ft Collins, CO 80 CO		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		4265013	
Name of Employer WILD OATS MARKET, FT COLL-INS, CO		Occupation BAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	

B. Full Name (Last, First, Middle Initial) Ms. Carmen Reid		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 2 / 2 0 0 5	
Mailing Address 1201 Juniper Court		Transaction ID: SA11A1.22065	
City State Zip Code Ft Collins, CO 80 CO		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		4265013	
Name of Employer WILD OATS MARKET, FT COLL-INS, CO		Occupation BAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

C. Full Name (Last, First, Middle Initial) Ms Peggy Reid		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address 105-8 Maple Avenue		Transaction ID: SA11A1.21702	
City State Zip Code Vernon CT 06066-5447		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		595165	
Name of Employer NONE		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) ▶	65.00
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 60 / 91
	(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)
National Organization for Women PAC

A. Full Name (Last, First, Middle Initial) Ms Peggy Reid		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 5	
Mailing Address 105-8 Maple Avenue		Transaction ID: SA11A1.21938	
City State Zip Code Vernon CT 06066-5447	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C		595165	
Name of Employer NONE	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 Peggy Reid		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 2 / 2 0 0 5	
Mailing Address 105-8 Maple Avenue		Transaction ID: SA11A1.22030	
City State Zip Code Vernon CT 06066-5447	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C		595165	
Name of Employer NONE	Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00		

C. Full Name (Last, First, Middle Initial) Ms Karen Moore Reynolds		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 2 / 2 0 0 5	
Mailing Address 458 W SAN JOSE		Transaction ID: SA11A1.22097	
City State Zip Code CLOVIS CA 93612-2336	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C		514943	
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		

SUBTOTAL of Receipts This Page (optional) ▶	70.00
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 61 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Ms. Sarah Beinecke Richardson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5	
Mailing Address 305 Beavertail Rd		Transaction ID: SA11A1.21849	
City State Zip Code Jamestown, RI 028	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		7345283	
Name of Employer SELF	Occupation PHILANTHROPIST		
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 Carol Roggenstein		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 0 / 2 0 0 5	
Mailing Address 3852 Dunes Rd		Transaction ID: SA11A1.22144	
City State Zip Code Palm Beach Gardens FL 33410-2348	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C		5029301	
Name of Employer PALM BEACH COUNTY, FL	Occupation LIBRARIAN		
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. MD Lucille Rosenberg		Date of Receipt M M / D D / Y Y Y Y 0 7 / 0 8 / 2 0 0 5	
Mailing Address 3431 N Lake Dr		Transaction ID: SA11A1.19282	
City State Zip Code Milwaukee, WI 532	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C		4372769	
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) ▶	570.00
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 62 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Mrs. Irene Rubenstein		Date of Receipt M M / D D / Y Y Y Y 07 / 14 / 2005	
Mailing Address 4805 W Beach Park Dr		Transaction ID: SA11A1.19807	
City State Zip Code Tampa, FL 33609-3	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C	10797090		
Name of Employer returned Occupation	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. MD Valerie Rusch		Date of Receipt M M / D D / Y Y Y Y 07 / 12 / 2005	
Mailing Address 203 East 72Nd Street #22B		Transaction ID: SA11A1.19482	
City State Zip Code New York, NY 1002	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	6626295		
Name of Employer Occupation	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. Ph D Alva Sachs		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2005	
Mailing Address 74-946 Lania Place		Transaction ID: SA11A1.19218	
City State Zip Code Kailua-Kona, HI 9	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	535112		
Name of Employer Occupation	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) ▶	1800.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Ms. Yoriko Saneyoshi		Date of Receipt M M / D D / Y Y Y Y 07 / 13 / 2005
Mailing Address 13335 Mulholland Dr.		Transaction ID: SA11A1.19527
City State Zip Code Beverly Hills CA 90210	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C	501403	
Name of Employer Self Occupation Self Executive		
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. Stanley Schroeder		Date of Receipt M M / D D / Y Y Y Y 10 / 20 / 2005
Mailing Address 572 Wapiti Loop		Transaction ID: SA11A1.21791
City State Zip Code Hamilton, MT 5984 MT	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	7508435	
Name of Employer NONE Occupation NONE 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. Mr. Stanley Schroeder		Date of Receipt M M / D D / Y Y Y Y 11 / 21 / 2005
Mailing Address 572 Wapiti Loop		Transaction ID: SA11A1.21960
City State Zip Code Hamilton, MT 5984 MT	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	7508435	
Name of Employer NONE Occupation NONE RETIRED		
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) ▶	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 64 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Mr. Stanley Schroeder		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 0 / 2 0 0 5	
Mailing Address 572 Wapiti Loop		Transaction ID: SA11A1.22122	
City Hamilton, MT	State MT	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		7508435	
Name of Employer NONE	Occupation RETIRED		
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) B. Ms Elsa Schultz		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 2 / 2 0 0 5	
Mailing Address 50 Coe Rd #111		Transaction ID: SA11A1.22049	
City Belleair	State FL	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		3075280	
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. Ms. Maxine Sclar		Date of Receipt M M / D D / Y Y Y Y 0 7 / 2 0 / 2 0 0 5	
Mailing Address P.O. Box 357		Transaction ID: SA11A1.20446	
City North Windham, ME	State ME	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		574632	
Name of Employer	Occupation		
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) ▶	345.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Ms. Linda Smith		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 5	
Mailing Address 3864 Treeline Cir		Transaction ID: SA11A1.21917	
City State Zip Code Dallas, TX 75224- TX	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C	6609408		
Name of Employer POLLAK & SKAN Occupation COMPONENTS ENGR	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. Linda Smith		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 2 / 2 0 0 5	
Mailing Address 3864 Treeline Cir		Transaction ID: SA11A1.22076	
City State Zip Code Dallas, TX 75224- TX	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C	6609408		
Name of Employer POLLAK & SKAN Occupation COMPONENTS ENGR	Aggregate Year-to-Date ▼ 220.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Susan Steif		Date of Receipt M M / D D / Y Y Y Y 0 7 / 1 2 / 2 0 0 5	
Mailing Address 1012 Oakleaf Cir		Transaction ID: SA11A1.19455	
City State Zip Code Blythewood, SC 29 SC	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	11719432		
Name of Employer Occupation	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) ▶	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 66 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Ms. Gretchen Stewart		Date of Receipt M M / D D / Y Y Y Y 07 / 02 / 2005	
Mailing Address 36 Mack Hill Rd		Transaction ID: SA11A1.19141	
City State Zip Code Amherst, NH 03031 NH	Amount of Each Receipt this Period 560.00		
FEC ID number of contributing federal political committee. C	11778206		
Name of Employer Hewlett Packard Company	Occupation Senior Marketing Mgr.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 560.00		

Full Name (Last, First, Middle Initial) B. Ms. Laurie Swett		Date of Receipt M M / D D / Y Y Y Y 07 / 14 / 2005	
Mailing Address 59 Grove St		Transaction ID: SA11A1.19903	
City State Zip Code Auburndale, MA 02 MA	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	2987600		
Name of Employer LIFETIME LEARNING (NEWTON, MA)	Occupation PROGRAM COORDINATOR		
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. Frances Taheri		Date of Receipt M M / D D / Y Y Y Y 08 / 08 / 2005	
Mailing Address 1500 S. Ocean Boulevard #1206		Transaction ID: SA11A1.21116	
City State Zip Code Boca Raton, FL 33 FL	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	6332340		
Name of Employer	Occupation		
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) ▶	2060.00
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 67 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Ms Mona Taylor		Date of Receipt M M / D D / Y Y Y Y 07 / 20 / 2005	
Mailing Address 138 N. Garfield Road		Transaction ID: SA11A1.20458	
City Hinsdale State IL Zip Code 60521-3720	Amount of Each Receipt this Period 35.00		10699023
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	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 Mona Taylor		Date of Receipt M M / D D / Y Y Y Y 08 / 22 / 2005	
Mailing Address 138 N. Garfield Road		Transaction ID: SA11A1.21392	
City Hinsdale State IL Zip Code 60521-3720	Amount of Each Receipt this Period 35.00		10699023
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) ▼			

Full Name (Last, First, Middle Initial) C. Ms Mona Taylor		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2005	
Mailing Address 138 N. Garfield Road		Transaction ID: SA11A1.21639	
City Hinsdale State IL Zip Code 60521-3720	Amount of Each Receipt this Period 35.00		10699023
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	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) ▶	105.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Ms Mona Taylor		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 138 N. Garfield Road		Transaction ID: SA11A1.21809	
City Hinsdale	State IL	Amount of Each Receipt this Period 35.00	
Zip Code 60521-3720		10699023	
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 ▼ 315.00		

Full Name (Last, First, Middle Initial) B. Ms Mona Taylor		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 1 / 2 0 0 5	
Mailing Address 138 N. Garfield Road		Transaction ID: SA11A1.21978	
City Hinsdale	State IL	Amount of Each Receipt this Period 35.00	
Zip Code 60521-3720		10699023	
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 Mona Taylor		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 0 / 2 0 0 5	
Mailing Address 138 N. Garfield Road		Transaction ID: SA11A1.22140	
City Hinsdale	State IL	Amount of Each Receipt this Period 35.00	
Zip Code 60521-3720		10699023	
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		

SUBTOTAL of Receipts This Page (optional) ▶	105.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Ms Mary Anne Thomas		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2005
Mailing Address 965 Shorepoint Court Apt 203		Transaction ID: SA11A1.21655
City Alameda State CA Zip Code 94501-5862	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		11677291
Name of Employer US Government Occupation Computer Specialist	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 Mary Anne Thomas		Date of Receipt M M / D D / Y Y Y Y Y 10 / 20 / 2005
Mailing Address 965 Shorepoint Court Apt 203		Transaction ID: SA11A1.21827
City Alameda State CA Zip Code 94501-5862	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		11677291
Name of Employer US Government Occupation Computer Specialist	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 Mary Anne Thomas		Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2005
Mailing Address 965 Shorepoint Court Apt 203		Transaction ID: SA11A1.21994
City Alameda State CA Zip Code 94501-5862	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		11677291
Name of Employer US Government Occupation Computer Specialist	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) ▶	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 70 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Ms Mary Anne Thomas		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 0 / 2 0 0 5
Mailing Address 965 Shorepoint Court Apt 203		Transaction ID: SA11A1.22156
City Alameda State CA Zip Code 94501-5862	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		11677291
Name of Employer US Government	Occupation Computer Specialist	
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. MRS. MARY C. VASSALLO		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 2 / 2 0 0 5
Mailing Address 81 GREENMOUNT TERRACE		Transaction ID: SA11A1.22046
City WATERBURY State CT Zip Code 06708-4212	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		1986009
Name of Employer	Occupation RETIRED EDUCATOR	
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 Vaughan		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 2 / 2 0 0 5
Mailing Address 1014 W. Nicolet ST.		Transaction ID: SA11A1.22083
City Banning C State CA Zip Code 92220	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		2387686
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 ▼ 220.00	

SUBTOTAL of Receipts This Page (optional) ▶	65.00
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 71 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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)
National Organization for Women PAC

A. Full Name (Last, First, Middle Initial) Ms. Joni Ward		Date of Receipt M M / D D / Y Y Y Y 07 / 02 / 2005
Mailing Address 1257 Summer Haven Cir		Transaction ID: SA11A1.19129
City State Zip Code Franklin, TN 3706 TN	Amount of Each Receipt this Period 476.00	
FEC ID number of contributing federal political committee. C	12550592	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 476.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Ms Cynthia Warner		Date of Receipt M M / D D / Y Y Y Y 07 / 18 / 2005
Mailing Address 7308 Elbow Lane		Transaction ID: SA11A1.20170
City State Zip Code Philadelphia PA 19119-2809	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	7524028	
Name of Employer Occupation HOUSEWIFE	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 Sharon Chand Weisman		Date of Receipt M M / D D / Y Y Y Y 07 / 14 / 2005
Mailing Address 5001 CAROLYN WAY		Transaction ID: SA11A1.19755
City State Zip Code GLENDALE CA 91214-1061	Amount of Each Receipt this Period 240.00	
FEC ID number of contributing federal political committee. C	494674	
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) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	766.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
National Organization for Women PAC

A. Full Name (Last, First, Middle Initial)
Capt. J Maury Werth USN, (Ret)

Mailing Address 16505 Va Ave, C-223

City State Zip Code
Williamsport, MD MD

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
477.00

Date of Receipt
MM / DD / YYYY
07 / 18 / 2005

Transaction ID: SA11A1.20289

Amount of Each Receipt this Period
477.00

11285392

B. Full Name (Last, First, Middle Initial)
Ms. Marty Whitehead

Mailing Address PO Box 90929

City State Zip Code
San Antonio, TX 7 TX

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
MM / DD / YYYY
07 / 02 / 2005

Transaction ID: SA11A1.19127

Amount of Each Receipt this Period
600.00

1137140

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

Mailing Address 12707 Murphy Road #70

City State Zip Code
Stafford, TX 7747 TX

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

Name of Employer Occupation
BECHTEL, HOUSTON, TX GRAPHIC DESIGNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
MM / DD / YYYY
12 / 12 / 2005

Transaction ID: SA11A1.22100

Amount of Each Receipt this Period
20.00

11836459

SUBTOTAL of Receipts This Page (optional)	▶	1097.00
TOTAL This Period (last page this line 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 73 / 91
	(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)
National Organization for Women PAC

A. Full Name (Last, First, Middle Initial)
Ms. Margaret Zierdt

Mailing Address 701 Roxboro Rd.

City State Zip Code
Rockville MD 20850

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

Name of Employer Occupation
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

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

Transaction ID: SA11A1.22056

Amount of Each Receipt this Period

20.00

366310

SUBTOTAL of Receipts This Page (optional)	▶	20.00
TOTAL This Period (last page this line number only)	▶	32246.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B.17976 Date of Disbursement MM / DD / YYYY 08 / 31 / 2005
Mailing Address PO Box 7006		Amount of Each Disbursement this Period 28.07
City Midvale State UT Zip Code 84047	Purpose of Disbursement credit card processing 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) B. American Express		Transaction ID: SB21B.17982 Date of Disbursement MM / DD / YYYY 09 / 01 / 2005
Mailing Address PO Box 7006		Amount of Each Disbursement this Period 4.50
City Midvale State UT Zip Code 84047	Purpose of Disbursement collection fee 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.17984 Date of Disbursement MM / DD / YYYY 09 / 06 / 2005
Mailing Address PO Box 7006		Amount of Each Disbursement this Period 9.69
City Midvale State UT Zip Code 84047	Purpose of Disbursement credit card processing fee 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) ▶	42.26
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

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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B.17985 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 5
Mailing Address PO Box 7006		Amount of Each Disbursement this Period 4.50
City Midvale State UT Zip Code 84047	Purpose of Disbursement collection fee 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.17995 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address PO Box 7006		Amount of Each Disbursement this Period 4.50
City Midvale State UT Zip Code 84047	Purpose of Disbursement collection 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. American Express		Transaction ID: SB21B.17997 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address PO Box 7006		Amount of Each Disbursement this Period 9.69
City Midvale State UT Zip Code 84047	Purpose of Disbursement credit card processing 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) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	18.69
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B.18002 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 5
Mailing Address PO Box 7006		Amount of Each Disbursement this Period 4.50
City Midvale State UT Zip Code 84047	Purpose of Disbursement collection 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) B. American Express		Transaction ID: SB21B.18004 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 5
Mailing Address PO Box 7006		Amount of Each Disbursement this Period 10.41
City Midvale State UT Zip Code 84047	Purpose of Disbursement credit card processing 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. American Express		Transaction ID: SB21B.18014 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 5
Mailing Address PO Box 7006		Amount of Each Disbursement this Period 4.50
City Midvale State UT Zip Code 84047	Purpose of Disbursement collection 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) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	19.41
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)

<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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B.18016 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 5
Mailing Address PO Box 7006		Amount of Each Disbursement this Period 10.41
City Midvale State UT Zip Code 84047	Purpose of Disbursement credit card processing fees Candidate Name <input type="text"/> 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. BB&T		Transaction ID: SB21B.17954 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 1 / 2 0 0 5
Mailing Address 1909 K Street, NW		Amount of Each Disbursement this Period 17.26
City Washington State DC Zip Code 20006	Purpose of Disbursement service fee Candidate Name <input type="text"/> 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. BB&T		Transaction ID: SB21B.17961 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 1 / 2 0 0 5
Mailing Address 1909 K Street, NW		Amount of Each Disbursement this Period 65.31
City Washington State DC Zip Code 20006	Purpose of Disbursement service charge Candidate Name <input type="text"/> 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) ▶	92.98
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)

<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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. BB&T		Transaction ID: SB21B.17964 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 2 / 2 0 0 5
Mailing Address 1909 K Street, NW		Amount of Each Disbursement this Period 226.19
City Washington State DC Zip Code 20006	Purpose of Disbursement service charge 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. BB&T		Transaction ID: SB21B.17974 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 2 / 2 0 0 5
Mailing Address 1909 K Street, NW		Amount of Each Disbursement this Period 76.95
City Washington State DC Zip Code 20006	Purpose of Disbursement service charge 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. BB&T		Transaction ID: SB21B.17981 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 5
Mailing Address 1909 K Street, NW		Amount of Each Disbursement this Period 97.54
City Washington State DC Zip Code 20006	Purpose of Disbursement service charge 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) ▶	400.68
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. BB&T		Transaction ID: SB21B.17986 Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2005
Mailing Address 1909 K Street, NW		Amount of Each Disbursement this Period 94.02
City Washington State DC Zip Code 20006	Purpose of Disbursement service charge 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. BB&T		Transaction ID: SB21B.17989 Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2005
Mailing Address 1909 K Street, NW		Amount of Each Disbursement this Period 6.69
City Washington State DC Zip Code 20006	Purpose of Disbursement service charge 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. BB&T		Transaction ID: SB21B.17998 Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2005
Mailing Address 1909 K Street, NW		Amount of Each Disbursement this Period 96.44
City Washington State DC Zip Code 20006	Purpose of Disbursement service charge 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) ▶	197.15
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
National Organization for Women PAC

<p>A. BB&T</p> <p>Full Name (Last, First, Middle Initial)</p>		<p>Transaction ID: SB21B.18001</p> <p>Date of Disbursement</p> <p><input type="text" value="11"/> <input type="text" value="21"/> / <input type="text" value="20"/> <input type="text" value="05"/></p>
<p>Mailing Address 1909 K Street, NW</p>		<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="67.27"/></p>
<p>City Washington State DC Zip Code 20006</p>	<p>Purpose of Disbursement service charge</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>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	

<p>B. BB&T</p> <p>Full Name (Last, First, Middle Initial)</p>		<p>Transaction ID: SB21B.18005</p> <p>Date of Disbursement</p> <p><input type="text" value="11"/> <input type="text" value="21"/> / <input type="text" value="20"/> <input type="text" value="05"/></p>
<p>Mailing Address 1909 K Street, NW</p>		<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="171.66"/></p>
<p>City Washington State DC Zip Code 20006</p>	<p>Purpose of Disbursement service charge</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>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	

<p>C. BB&T</p> <p>Full Name (Last, First, Middle Initial)</p>		<p>Transaction ID: SB21B.18017</p> <p>Date of Disbursement</p> <p><input type="text" value="12"/> <input type="text" value="21"/> / <input type="text" value="20"/> <input type="text" value="05"/></p>
<p>Mailing Address 1909 K Street, NW</p>		<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="135.75"/></p>
<p>City Washington State DC Zip Code 20006</p>	<p>Purpose of Disbursement service charge</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>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="374.68"/></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

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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. BB&T		Transaction ID: SB21B.18026 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 1 / 2 0 0 5	
Mailing Address 1909 K Street, NW		Amount of Each Disbursement this Period 14.57	
City Washington State DC Zip Code 20006	Purpose of Disbursement service charge	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. Ms Linda Berg		Transaction ID: SB21B.17968 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 5	
Mailing Address 733 15th Street, NW		Amount of Each Disbursement this Period 436.80	
City Washington State DC Zip Code 20005	Purpose of Disbursement travel	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. General Systems		Transaction ID: SB21B.17966 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 0 5	
Mailing Address 8306 D Old Courthouse Rd		Amount of Each Disbursement this Period 1758.68	
City Vienna State VA Zip Code 22182	Purpose of Disbursement data processing	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) ▶	2210.05
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. General Systems		Transaction ID: SB21B.17969 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 5
Mailing Address 8306 D Old Courthouse Rd		Amount of Each Disbursement this Period 2887.77
City Vienna State VA Zip Code 22182	Purpose of Disbursement data processing Candidate Name	
Office Sought: <input type="checkbox"/> House <input 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. General Systems		Transaction ID: SB21B.17990 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 8306 D Old Courthouse Rd		Amount of Each Disbursement this Period 2143.47
City Vienna State VA Zip Code 22182	Purpose of Disbursement data processing Candidate Name	
Office Sought: <input type="checkbox"/> House <input 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. General Systems		Transaction ID: SB21B.17993 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5
Mailing Address 8306 D Old Courthouse Rd		Amount of Each Disbursement this Period 3790.76
City Vienna State VA Zip Code 22182	Purpose of Disbursement data processing Candidate Name	
Office Sought: <input type="checkbox"/> House <input 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) ▶	8822.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE 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 83 / 91

<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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. General Systems		Transaction ID: SB21B.18007 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
Mailing Address 8306 D Old Courthouse Rd		Amount of Each Disbursement this Period 1915.80
City Vienna State VA Zip Code 22182		
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. Global STL NDPS		Transaction ID: SB21B.17959 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 5 / 2 0 0 5
Mailing Address		Amount of Each Disbursement this Period 34.67
City State Zip Code		
Purpose of Disbursement collection fee 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. Global STL NDPS		Transaction ID: SB21B.17971 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 0 5
Mailing Address		Amount of Each Disbursement this Period 33.80
City State Zip Code		
Purpose of Disbursement credit card processing 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) ▶	1984.27
TOTAL This Period (last page this line number only) ▶

SCHEDULE 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 84 / 91

<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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Global STL NDPS		Transaction ID: SB21B.17983 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 2 / 2 0 0 5
Mailing Address		Amount of Each Disbursement this Period 49.20
City	State Zip Code	
Purpose of Disbursement credit card processing fees		<input type="text"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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. Global STL NDPS		Transaction ID: SB21B.17996 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address		Amount of Each Disbursement this Period 54.14
City	State Zip Code	
Purpose of Disbursement credit card processing fees		<input type="text"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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. Global STL NDPS		Transaction ID: SB21B.18003 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 5
Mailing Address		Amount of Each Disbursement this Period 54.28
City	State Zip Code	
Purpose of Disbursement credit card processing fees		<input type="text"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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) ▶	157.62
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Global STL NDPS		Transaction ID: SB21B.18015 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 0 5
Mailing Address		Amount of Each Disbursement this Period 52.52
City	State Zip Code	
Purpose of Disbursement credit card processing fees		Category/ Type
Candidate Name		
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. Harris Lithographics, Inc		Transaction ID: SB21B.18020 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 5
Mailing Address 8516 Rainwood Drive		Amount of Each Disbursement this Period 565.00
City	State Zip Code	
Purpose of Disbursement printing		Category/ Type
Candidate Name		
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. Omniprint		Transaction ID: SB21B.17979 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 2 / 2 0 0 5
Mailing Address 9700 Philadelphia Court		Amount of Each Disbursement this Period 3037.05
City	State Zip Code	
Purpose of Disbursement printing		Category/ Type
Candidate Name		
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

SUBTOTAL of Disbursements This Page (optional) ▶	3654.57
TOTAL This Period (last page this line number only) ▶	

SCHEDULE 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 86 / 91

<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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Paymentech		Transaction ID: SB21B.17962 Date of Disbursement MM / DD / YYYY 07 / 29 / 2005	
Mailing Address 4 Northeastern		Amount of Each Disbursement this Period 287.56	
City Salem State NH Zip Code 03079	Purpose of Disbursement credit card processing fees	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. Paymentech		Transaction ID: SB21B.17975 Date of Disbursement MM / DD / YYYY 08 / 31 / 2005	
Mailing Address 4 Northeastern		Amount of Each Disbursement this Period 99.85	
City Salem State NH Zip Code 03079	Purpose of Disbursement credit card processing fees	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. Paymentech		Transaction ID: SB21B.17987 Date of Disbursement MM / DD / YYYY 09 / 30 / 2005	
Mailing Address 4 Northeastern		Amount of Each Disbursement this Period 44.38	
City Salem State NH Zip Code 03079	Purpose of Disbursement credit card processing fees	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) ▶	431.79
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)

<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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Paymentech		Transaction ID: SB21B.17999 Date of Disbursement 10 / 28 / 2005	
Mailing Address 4 Northeastern		Amount of Each Disbursement this Period 38.23	
City Salem State NH Zip Code 03079	Purpose of Disbursement credit card processing fees	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. Paymentech		Transaction ID: SB21B.18013 Date of Disbursement 11 / 30 / 2005	
Mailing Address 4 Northeastern		Amount of Each Disbursement this Period 27.56	
City Salem State NH Zip Code 03079	Purpose of Disbursement credit card processing fees	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. Paymentech		Transaction ID: SB21B.18022 Date of Disbursement 12 / 30 / 2005	
Mailing Address 4 Northeastern		Amount of Each Disbursement this Period 33.78	
City Salem State NH Zip Code 03079	Purpose of Disbursement credit card processing fees	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) ▶	99.57
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. Payment Solutions		Transaction ID: SB21B.17967 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 5
Mailing Address P O Box 30217		Amount of Each Disbursement this Period 313.40
City Bethesda State MD Zip Code 20924	Purpose of Disbursement credit card processing	
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. Payment Solutions		Transaction ID: SB21B.17994 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 364.40
City Bethesda State MD Zip Code 20924	Purpose of Disbursement credit card processing 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. Payment Solutions		Transaction ID: SB21B.18021 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 5
Mailing Address P O Box 30217		Amount of Each Disbursement this Period 179.00
City Bethesda State MD Zip Code 20924	Purpose of Disbursement credit card processing 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) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	856.80
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE 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 89 / 91

<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)
National Organization for Women PAC

A. Full Name (Last, First, Middle Initial) Stockton, Inc		Transaction ID: SB21B.17980 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 2 / 2 0 0 5
Mailing Address 7940 Cesna Avenue		Amount of Each Disbursement this Period 5371.12
City Gaithersburg State MD Zip Code 20879	Purpose of Disbursement mail shop Candidate Name	
Office Sought: <input type="checkbox"/> House <input 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) Ms Linda Tosti-Lane		Transaction ID: SB21B.17992 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 3794 232Nd PI Sw WASHINGTON STATE NOW PRES		Amount of Each Disbursement this Period 659.40
City Brier State WA Zip Code 98036-8268	Purpose of Disbursement travel Candidate Name	
Office Sought: <input type="checkbox"/> House <input 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) Tri-State Envelope Corporation		Transaction ID: SB21B.17970 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 3 / 2 0 0 5
Mailing Address P.O. Box 433		Amount of Each Disbursement this Period 3033.23
City Beltsville State MD Zip Code 20704	Purpose of Disbursement envelopes Candidate Name	
Office Sought: <input type="checkbox"/> House <input 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) ▶	9063.75
TOTAL This Period (last page this line number only) ▶	28426.27

**SCHEDULE 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 90 / 91

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial) A. PAC FOR A CHANGE		Transaction ID: SB23.18025
Mailing Address 725 SOUTH FIGUEROA ST. SUITE 3200		Date of Disbursement 11 / 17 / 2005
City Los Angeles	State CA	Zip Code 90017
Purpose of Disbursement		Amount of Each Disbursement this Period 1000.00
Candidate Name PAC FOR A CHANGE		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)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	1000.00

**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)

PAGE 91 / 91

<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

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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial)

A. Campaign to Elect Jackie Hillyer

Mailing Address 4215 Caylor Court

City Ashtabula State OH Zip Code 44004

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB29.18012

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

500.00