

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED

2012 OCT 16 AM 11:16
Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5 **FEM MAIL CENTER**

FEMINIST MAJORITY PAC

ADDRESS (number and street) **1600 WILSON BLVD.**
SUITE 801
ARLINGTON VA 22209

Check if different than previously reported. (ACC)

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

C00377168

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

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

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

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

Election on / / 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 / 2012 through 09 / 30 / 2012

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

Type or Print Name of Treasurer **ELEANOR SMEAL, ASSISTANT TREASURER**

Signature of Treasurer *Elean Smeal* Date 10 / 12 / 2012

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

12030911020

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

FEMINIST MAJORITY PAC

Report Covering the Period: From: 07 ' 01 ' 2012 To: 09 ' 30 ' 2012

12030911021

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>2012</u>		11,013.52
(b) Cash on Hand at Beginning of Reporting Period.....	13,173.74	
(c) Total Receipts (from Line 19).....	52,755.00	28,074.25
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	18,449.24	39,087.80
7. Total Disbursements (from Line 31).....	10,600.69	31,239.25
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	7,848.55	7,848.55
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

FEMINIST MAJORITY PAC

Report Covering the Period: From: **07** ' **07** ' **2012** To: **09** ' **30** ' **2012**

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

3,200.00

7,260.00

(ii) Unitemized.....

2,075.50

20,814.25

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

5,275.50

28,074.25

(b) Political Party Committees.....

0

0

(c) Other Political Committees (such as PACs).....

0

0

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

5,275.50

28,074.25

12. Transfers From Affiliated/Other Party Committees.....

0

0

13. All Loans Received.....

0

0

14. Loan Repayments Received.....

0

0

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

0

0

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

0

0

17. Other Federal Receipts (Dividends, Interest, etc.).....

0

0

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

0

0

(b) Levin Funds (from Schedule H5).....

0

0

(c) Total Transfers (add 18(a) and 18(b))..

0

0

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

5,275.50

28,074.25

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

5,275.50

28,074.25

12030911022

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures	3,100.69	10,239.25
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	3,100.69	10,239.25
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7,500.00	21,000.00
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	0
29. Other Disbursements	0	0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	10,600.69	31,239.25
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10,600.69	31,239.25

12030911023

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	52,755.50	28,074.25
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	52,755.50	28,074.25
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	31,006.69	10,239.25
37. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	31,006.69	10,239.25

12030911024

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

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

FOR LINE NUMBER:
(check only one)

PAGE **6** OF **16**

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

FEMINIST MAJORITY PAC

Full Name (Last, First, Middle Initial)

A. ARONIAN, SONA

Mailing Address

14 HELME ROAD

City

KINGSTON, RI

State

Zip Code

02881

FEC ID number of contributing federal political committee.

C

Name of Employer

NIA

Occupation

RETIRED

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 ' 24 ' 2012

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. JIMENEZ, CYNTHIA

Mailing Address

932 FRANKLIN STREET

City

WYOMISSING, PA

State

Zip Code

19610

FEC ID number of contributing federal political committee.

C

Name of Employer

NIA

Occupation

RETIRED

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

08 ' 08 ' 2012

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. MARTIN, ANNE

Mailing Address

409 N STREET, SW

City

WASHINGTON, DC

State

Zip Code

20024

FEC ID number of contributing federal political committee.

C

Name of Employer

NIA

Occupation

RETIRED

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 ' 24 ' 2012

Amount of Each Receipt this Period

250.00

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

700.00

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

700.00

12030911025

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

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

FOR LINE NUMBER:
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)

FEMINIST MAJORITY PAC

Full Name (Last, First, Middle Initial)

A. YORKIN, PEG

Mailing Address

21348 PACIFIC COAST HWY.

City

MALIBU, CA

State

Zip Code

90265

FEC ID number of contributing federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

2,500.00

Date of Receipt

08 / 23 / 2012

Amount of Each Receipt this Period

2,500.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

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

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

2,500.00
3,200.00

12030911026

**SCHEDULE 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 **8** OF **16**

21b 22 23 24 25 26
 27 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)

FEMINIST MAJORITY PAC

Full Name (Last, First, Middle Initial)

A. **U.S. POSTAL SERVICE**

Mailing Address: **900 BRENTWOOD R.D. NE**

City: **WASHINGTON, DC** State: **DC** Zip Code: **20066**

Purpose of Disbursement: **POSTAGE COSTS**

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: **07 / 20 / 2012**

Amount of Each Disbursement this Period: **795.00**

Category/Type: **003**

B. **U.S. POSTAL SERVICE**

Mailing Address: **900 BRENTWOOD RD. NE**

City: **WASHINGTON DC** State: **DC** Zip Code: **20018**

Purpose of Disbursement: **POSTAGE COSTS**

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: **08 / 21 / 2012**

Amount of Each Disbursement this Period: **1,100.00**

Category/Type: **003**

C. **TRISTATE ENVELOPE CORP.**

Mailing Address: **P.O. BOX 433**

City: **BELTSVILLE, MD** State: **MD** Zip Code: **20704**

Purpose of Disbursement: **PRINTING FILMOR. ENVELOPES**

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: **08 / 07 / 2012**

Amount of Each Disbursement this Period: **711.27**

Category/Type: **003**

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

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

2,606.27

12030911027

**SCHEDULE 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

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NAME OF COMMITTEE (In Full)
FEMINIST MAJORITY PAC

A.

Full Name (Last, First, Middle Initial)
BANK OF AMERICA MERCHANT SVCS

Date of Disbursement
07 ' 01 ' 2012

Mailing Address
4100 SOLUTIONS CENTER

City
CHICAGO, IL State Zip Code
60677

Purpose of Disbursement
MONTHLY FEE

Candidate Name
003 Category/Type

Amount of Each Disbursement this Period
62.21

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

B.

Full Name (Last, First, Middle Initial)
PAYPAL, INC

Date of Disbursement
07 ' 01 ' 2012

Mailing Address
P.O. BOX 2485

City
SPOKANE, WA State Zip Code
99210

Purpose of Disbursement
CREDIT CARD FEES

Candidate Name
003 Category/Type

Amount of Each Disbursement this Period
54.10

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

C.

Full Name (Last, First, Middle Initial)
BANK OF AMERICA

Date of Disbursement
07 ' 16 ' 2012

Mailing Address
P.O. BOX 830175

City
DALLAS, TX State Zip Code
75283

Purpose of Disbursement
SERVICE CHARGE, BANK

Candidate Name
003 Category/Type

Amount of Each Disbursement this Period
78.10

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....▶ **195.01**

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

12030911028

**SCHEDULE 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 10 OF 16
	<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	
	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full)
FEMINIST MAJORITY PAC

A.

Full Name (Last, First, Middle Initial)
BANK OF AMERICA MERCHANT SERVICES

Date of Disbursement
08 ' 01 ' 2012

Mailing Address
4100 SOLUTIONS CENTER

City **CHICAGO, IL** State **IL** Zip Code **60677**

Purpose of Disbursement
MONTHLY FEE

Candidate Name

Amount of Each Disbursement this Period
26.65

Category/Type
003

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

B.

Full Name (Last, First, Middle Initial)
PAYPAL, INC

Date of Disbursement
08 ' 14 ' 2012

Mailing Address
P.O. BOX 2485

City **SPOKANE, WA** State **WA** Zip Code **99210**

Purpose of Disbursement
CREDIT CARD FEES

Candidate Name

Amount of Each Disbursement this Period
54.10

Category/Type
003

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

C.

Full Name (Last, First, Middle Initial)
BANK OF AMERICA

Date of Disbursement
08 ' 15 ' 2012

Mailing Address
P.O. BOX 830175

City **DALLAS, TX** State **TX** Zip Code **75283**

Purpose of Disbursement
SERVICE CHARGE, BANK

Candidate Name

Amount of Each Disbursement this Period
54.07

Category/Type
003

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....▶ **134.82**

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

12030911029

**SCHEDULE 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 11 OF 16

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

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NAME OF COMMITTEE (In Full)

FEMINIST MAJORITY PAC

Full Name (Last, First, Middle Initial)

A. BANK OF AMERICA MERCHANT SERVS		Date of Disbursement
Mailing Address 4100 SOLUTIONS CENTER		09 ' 09 ' 2012
City CHICAGO, IL	State IL	Zip Code 60677
Purpose of Disbursement MONTHLY FEE	Category/ Type 003	Amount of Each Disbursement this Period 5234
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:		

B. PAYPAL, INC		Date of Disbursement
Mailing Address P.O. BOX 2485		09 ' 11 ' 2012
City SPOKANE, WA	State WA	Zip Code 99210
Purpose of Disbursement CREDIT CARD FEES	Category/ Type 003	Amount of Each Disbursement this Period 5410
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:		

C. BANK OF AMERICA		Date of Disbursement
Mailing Address P.O. BOX 830175		09 ' 17 ' 2012
City DALLAS, TX	State TX	Zip Code 75283
Purpose of Disbursement SERVICE CHARGE, BANK	Category/ Type 003	Amount of Each Disbursement this Period 5815
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).....▶

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

16459
3100.69

12030911030

**SCHEDULE 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 12 OF 16
	<input type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input checked="" type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b			

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NAME OF COMMITTEE (In Full)
FEMINIST MAJORITY PAC

A. MAXEY FOR DELEGATE

Full Name (Last, First, Middle Initial)

Mailing Address: **P.O. BOX 847**

City: **CHARLES TOWN, WV** State: **WV** Zip Code: **25414**

Purpose of Disbursement: **CONTRIBUTION** Category/Type: **011**

Candidate Name: **JOHN MAXEY**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **▼**

State: **WV** District: **HOUSE OF DELEGATES, DISTRICT 66**

Date of Disbursement: **08 / 03 / 2012**

Amount of Each Disbursement this Period: **1,000.00**

B. DUCKWORTH FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address: **P.O. BOX 59568**

City: **SCHAUMBURG, IL** State: **IL** Zip Code: **60159**

Purpose of Disbursement: **CONTRIBUTION** Category/Type: **011**

Candidate Name: **TAMMY DUCKWORTH**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **▼**

State: **IL** District: **8**

Date of Disbursement: **09 / 20 / 2012**

Amount of Each Disbursement this Period: **1,000.00**

C. JUDY CHU FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address: **1531 PURDUE AVENUE**

City: **LOS ANGELES, CA** State: **CA** Zip Code: **90025**

Purpose of Disbursement: **CONTRIBUTION** Category/Type: **011**

Candidate Name: **JUDY CHU**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **▼**

State: **CA** District: **32**

Date of Disbursement: **09 / 24 / 2012**

Amount of Each Disbursement this Period: **500.00**

SUBTOTAL of Disbursements This Page (optional)..... **2,500.00**

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

12030911031

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)										
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
FEMINIST MAJORITY PAC

Full Name (Last, First, Middle Initial)

A.
NOTE * **ANN KIRKPATRICK FOR CONGRESS**
* Mailing Address **EARMARKED FOR DCCC**
P.O. BOX 12011
City **CASA GRANDE, AZ** State **AZ** Zip Code **85130**
Purpose of Disbursement **CONTRIBUTION**
Candidate Name **ANN KIRKPATRICK**
Office Sought: House Senate President
Disbursement For: Primary General Other (specify) **▼**
State: **AZ** District: **01**

Date of Disbursement

09 ' 20 ' 2012

Amount of Each Disbursement this Period

500.00

B.
NOTE * **KYRSTEN SINEMA FOR CONGRESS**
* Mailing Address **EARMARKED FOR DCCC**
123 E. BASELINE RD., D-202
City **TEMPE, AZ** State **AZ** Zip Code **85283**
Purpose of Disbursement **CONTRIBUTION**
Candidate Name **KYRSTEN SINEMA**
Office Sought: House Senate President
Disbursement For: Primary General Other (specify) **▼**
State: **AZ** District: **09**

Date of Disbursement

09 ' 20 ' 2012

Amount of Each Disbursement this Period

500.00

C.
NOTE * **JULIA BROWNLEY FOR CONGRESS**
* Mailing Address **EARMARKED FOR DCCC**
P.O. BOX 2018
City **THOUSAND OAKS, CA** State **CA** Zip Code **91358**
Purpose of Disbursement **CONTRIBUTION**
Candidate Name **JULIA BROWNLEY**
Office Sought: House Senate President
Disbursement For: Primary General Other (specify) **▼**
State: **CA** District: **26**

Date of Disbursement

09 ' 20 ' 2012

Amount of Each Disbursement this Period

500.00

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

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

1500.00

12030911032

**SCHEDULE 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 14 OF 16

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

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NAME OF COMMITTEE (In Full)

FEMINIST MAJORITY PAC

Full Name (Last, First, Middle Initial)

Date of Disbursement

FRIENDS OF ELIZABETH ETSY

09 ' 20 ' 2012

Mailing Address **EARMARKED FOR DCCC**
P.O. BOX 61

City **CHESHIRE, CT** State **CT** Zip Code **06410**

Purpose of Disbursement

CONTRIBUTION

011

Candidate Name

ELIZABETH ETSY

Category/
Type

Amount of Each Disbursement this Period

500.00

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: **CT** District: **05**

Full Name (Last, First, Middle Initial)

Date of Disbursement

CHRISTIE VILSACK FOR IOWA

09 ' 20 ' 2012

Mailing Address **EARMARKED FOR DCCC**
P.O. BOX 641

City **AMES, IA** State **IA** Zip Code **50010**

Purpose of Disbursement

CONTRIBUTION

011

Candidate Name

CHRISTIE VILSACK

Category/
Type

Amount of Each Disbursement this Period

500.00

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: **IA** District: **04**

Full Name (Last, First, Middle Initial)

Date of Disbursement

FRIENDS OF CHERI BUSTOS

09 ' 20 ' 2012

Mailing Address **EARMARKED FOR DCCC**
P.O. BOX 77

City **EAST MOLINE, IL** State **IL** Zip Code **61244**

Purpose of Disbursement

CONTRIBUTION

011

Candidate Name

CHERI BUSTOS

Category/
Type

Amount of Each Disbursement this Period

500.00

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: **IL** District: **17**

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

1500.00

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

12030911033

A. NOTE

B. NOTE

C. NOTE

**SCHEDULE 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 15 OF 16					
	<input type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input checked="" type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b		

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NAME OF COMMITTEE (In Full)
FEMINIST MAJORITY PAC

Full Name (Last, First, Middle Initial) A. ADLER FOR CONGRESS		Date of Disbursement 09 ' 20 ' 2012
Mailing Address EARMARKED FOR DCCC P.O. BOX 1242		
City MT. LAUREL, NJ	State NJ	Zip Code 08054
Purpose of Disbursement CONTRIBUTION	Category/Type 011	Amount of Each Disbursement this Period 500.00
Candidate Name SHELLY ADLER	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: NJ	District: 03	

Full Name (Last, First, Middle Initial) B. GULLESON FOR CONGRESS		Date of Disbursement 09 ' 20 ' 2012
Mailing Address EARMARKED FOR DCCC P.O. BOX 6517		
City FARGO, ND	State ND	Zip Code 58109
Purpose of Disbursement CONTRIBUTION	Category/Type 011	Amount of Each Disbursement this Period 500.00
Candidate Name PAM GULLESON	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: ND	District: AL	

Full Name (Last, First, Middle Initial) C. BOOCKVAR FOR CONGRESS		Date of Disbursement 09 ' 20 ' 2012
Mailing Address EARMARKED FOR DCCC P.O. BOX 27		
City DOYLESTOWN, PA	State PA	Zip Code 18901
Purpose of Disbursement CONTRIBUTION	Category/Type 011	Amount of Each Disbursement this Period 500.00
Candidate Name KATHY BOOCKVAR	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: PA	District: 08	

SUBTOTAL of Disbursements This Page (optional).....▶	1,500.00
TOTAL This Period (last page this line number only).....▶	

NOTE * A. B. C.

12030911034

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)										
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
FEMINIST MAJORITY PAC

Full Name (Last, First, Middle Initial)

A. *NOTE* **DEL BENE FOR CONGRESS**
 *Mailing Address **EARMARKED FOR DCC**
P.O. BOX 487

Date of Disbursement
09 / 20 / 2012

City **BOTHELL, WA** State **WA** Zip Code **98041**

Purpose of Disbursement
CONTRIBUTION

Candidate Name
SUZAN DELBENE

Amount of Each Disbursement this Period
500.00

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: **WA** District: **01**

Full Name (Last, First, Middle Initial)

B. Mailing Address

Date of Disbursement

City State Zip Code

Purpose of Disbursement

Candidate Name

Amount of Each Disbursement this Period

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Full Name (Last, First, Middle Initial)

C. Mailing Address

Date of Disbursement

City State Zip Code

Purpose of Disbursement

Candidate Name

Amount of Each Disbursement this Period

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶ **500.00**

TOTAL This Period (last page if this line number only)..... ▶ **7,500.00**

12030911035

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

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Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *Fed. Exp.* Shipping Date
10/13/12
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

JMP
 PREPARER

10/16/12
 DATE PREPARED

12030911036