

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 WOMEN VOTE SMART

ADDRESS (number and street) PO BOX 72861 MARIETTA GA 30007 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00616912 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X]

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

5. Covering Period 04 / 01 / 2018 through 06 / 30 / 2018

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

Type or Print Name of Treasurer

Signature of Treasurer Krason, Patrick, , , [Electronically Filed] Date 07 / 15 / 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

WOMEN VOTE SMART

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>	<input type="text" value="2418.65"/>	<input type="text" value="2418.65"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="232.57"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="73738.36"/>	<input type="text" value="74069.36"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="73970.93"/>	<input type="text" value="76488.01"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="51181.13"/>	<input type="text" value="53698.21"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="22789.80"/>	<input type="text" value="22789.80"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="17836.13"/>	

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

WOMEN VOTE SMART

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized	0.00	331.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	331.00
(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)	0.00	331.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	73738.36	73738.36
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	73738.36	74069.36
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	73738.36	74069.36

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	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	2517.08
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	2517.08
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	50400.00	50400.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	781.13	781.13
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	51181.13	53698.21
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	51181.13	53698.21

DETAILED SUMMARY PAGE
of Disbursements

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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)	0.00	331.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	331.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	2517.08
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	2517.08

**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 13
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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)
WOMEN VOTE SMART

A. Fischer, Ray, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 128 Briarcliff Ln
 City Bel Air State MD Zip Code 21014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 382.50

Date of Receipt **05 / 01 / 2018**
Transaction ID : SA17.5002
 Amount of Each Receipt this Period 382.50
 Memo Item
 CONTRIBUTION - Carey Acct

B. Jacob, Kathleen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1801 Mill Ridge Ct
 City Annapolis State MD Zip Code 21409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Consultant
 Receipt For: 2018 Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **04 / 28 / 2018**
Transaction ID : SA17.4610
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION - Carey Acct

C. Lucas, Eileen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 42 Morning Song Ln
 City Hudson State OH Zip Code 44236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) retired Occupation (for Individual) retired
 Receipt For: 2018 Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **06 / 29 / 2018**
Transaction ID : SA17.4538
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION - Carey Acct

SUBTOTAL of Receipts This Page (optional).....	882.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 13
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMEN VOTE SMART

A. Marshall, Charles, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3457 Granger Rd.
 City Akron State OH Zip Code 44210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Beacon Marshall Companies Occupation (for Individual) Owner
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 06 / 2018
Transaction ID : SA17.4642
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION - Carey Acct

B. Marshall Construction Co Inc
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City Bath State OH Zip Code 44210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 50000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 20 / 2018
Transaction ID : SA17.5059
 Amount of Each Receipt this Period
 50000.00
 Memo Item
 Contribution - Carey Acct

C. Mathews, Gilbert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15357 founders Ln Apt 221
 City Apple Valley State MN Zip Code 55124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Info requested per Best efforts Occupation (for Individual) Info requested per Best efforts
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 382.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2018
Transaction ID : SA17.4801
 Amount of Each Receipt this Period
 382.50
 Memo Item
 CONTRIBUTION - Carey Acct

SUBTOTAL of Receipts This Page (optional).....	55382.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 13
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMEN VOTE SMART

A. Melio, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 207 Mcleod Court
 City Waxhaw State NC Zip Code 28173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Recycling
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2018
Transaction ID : SA17.4577
 Amount of Each Receipt this Period
 750.00
 Memo Item
 CONTRIBUTION - Carey Acct

B. Miller, Matthew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3763 7th Road
 City Bremen State IN Zip Code 46506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Newmar Corp Occupation (for Individual) manufacturer
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2018
Transaction ID : SA17.4573
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION - Carey Acct

C. Potter, Marguerite, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3581 Shore Lane BOX 2007
 City Boca Grande State FL Zip Code 33921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) retired Occupation (for Individual) retired
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 382.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2018
Transaction ID : SA17.4648
 Amount of Each Receipt this Period
 382.50
 Memo Item
 CONTRIBUTION - Carey Acct

SUBTOTAL of Receipts This Page (optional).....	6132.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 13
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMEN VOTE SMART

A. Uihlein, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1396 Waukegan Road
 City Lake Forest State IL Zip Code 60045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Uline Occupation (for Individual) CEO/Owner
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2018
Transaction ID : SA17.4586
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION - Carey Acct

B. Walcott, Roger, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2820 Greenbriar Blvd
 City Wellington State FL Zip Code 33414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) retired Occupation (for Individual) retired
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2018
Transaction ID : SA17.4626
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION - Carey Acct

C. Wolf, Jody, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 439 Jones Street
 City Cambridge State WI Zip Code 53523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Owner
 Receipt For: 2018
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2018
Transaction ID : SA17.4536
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION - Carey Acct

SUBTOTAL of Receipts This Page (optional).....	6250.00
TOTAL This Period (last page this line number only).....	68647.50

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
WOMEN VOTE SMART

Full Name (Last, First, Middle Initial)

A. Anedot

Mailing Address PO Box 84314

City
Baton Rouge

State
LA

Zip Code
70884

Purpose of Disbursement
Credit Card Processing Fees - Carey Acct

Candidate Name

WOMEN VOTE SMART

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 30 / 2018

FEC Identification Number

C C00616912

Transaction ID : SB29.5058

Amount of Each Disbursement this Period

781.13

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

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

781.13

781.13

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 11 OF 13
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
WOMEN VOTE SMART

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor WOMEN VOTE SMART			Nature of Debt (Purpose): Debts Owed Per Schedule D
Mailing Address PO BOX 72861			
City MARIETTA	State GA	Zip Code 30007	

Outstanding Balance Beginning This Period 17836.13		Transaction ID : SD10.4104	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 17836.13	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

1) SUBTOTALS This Period This Page (optional)..... ▶	17836.13
2) TOTALS This Period (last page this line number only)..... ▶	17836.13
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	17836.13

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
WOMEN VOTE SMART
FEC IDENTIFICATION NUMBER
C C00616912

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Jamestown Associates
Mailing Address: 421 Chestnut St
City: Philadelphia, State: PA, Zip Code: 19106
Purpose of Expenditure: TV Ad Placement Services
Category/Type: 004
Name of Federal Candidate: HAGAN, CHRISTINA, , , Support
Office Sought: House, District: 16, State: OH
Amount: 6000.00
Transaction ID: SE.4521
Date of Disbursement or Obligation: 04/27/2018
Disbursement For: Primary

Full Name of Payee: Jamestown Associates
Mailing Address: 421 Chestnut St
City: Philadelphia, State: PA, Zip Code: 19106
Purpose of Expenditure: TV Ad Purchase Services
Category/Type: 004
Name of Federal Candidate: HAGAN, CHRISTINA, , , Support
Office Sought: House, District: 16, State: OH
Amount: 39000.00
Transaction ID: SE.4524
Date of Disbursement or Obligation: 05/01/2018
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 45000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Krason, Patrick, , ,

[Electronically Filed]

Date 07/15/2018

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) WOMEN VOTE SMART	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00616912 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on MM / DD / YYYY

Full Name of Payee <input type="checkbox"/> Memo Item Jamestown Associates	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY 05 / 04 / 2018 </div>
Mailing Address 421 Chestnut St	Amount <div style="border: 1px solid black; padding: 2px;"> 5000.00 </div>
City Philadelphia State PA Zip Code 19106	Transaction ID : SE.4529 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY 05 / 03 / 2018 </div>
Purpose of Expenditure Radio Ad Placement Services Category/Type 004	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose HAGAN, CHRISTINA, , , Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 16 State: OH
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 150px; float: right;">50400.00</div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item Novel Idea	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY 05 / 04 / 2018 </div>
Mailing Address 3508 Meridian Dr	Amount <div style="border: 1px solid black; padding: 2px;"> 400.00 </div>
City McKinney State TX Zip Code 75070	Transaction ID : SE.4527 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY 05 / 03 / 2018 </div>
Purpose of Expenditure Audio Editing & Production Category/Type 004	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose HAGAN, CHRISTINA, , , Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 16 State: OH
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 150px; float: right;">45400.00</div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; width: 150px; float: right;">5400.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; width: 150px; float: right;"> </div>
(c) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; width: 150px; float: right;">50400.00</div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Krason, Patrick, , ,

[Electronically Filed]

Date MM / DD / YYYY
07 / 15 / 2018

Signature