

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 (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 09 01 2008 through 09 30 2008

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 Allendra Letsome

Signature of Treasurer Electronically Filed by Allendra Letsome Date 03 28 2011

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

Office Use Only									
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
National Organization for Women PAC

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		23018.60
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	3135.38									
(c) Total Receipts (from Line 19)	72688.53	211929.76								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	75823.91	234948.36								
7. Total Disbursements (from Line 31)	15902.69	175027.14								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	59921.22	59921.22								
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
National Organization for Women PAC

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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)	26007.00	100785.88
(ii) Unitemized	32681.53	70143.88
(iii) TOTAL (add Lines 11(a)(i) and (ii)	58688.53	170929.76
(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)	58688.53	170929.76
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.)	14000.00	41000.00
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))	72688.53	211929.76
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	72688.53	211929.76

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	415.69	25567.07
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	415.69	25567.07
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1579.25	20123.63
24. Independent Expenditure (use Schedule E)	0.00	63499.26
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.....	13907.75	65837.18
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))..	15902.69	175027.14
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15902.69	175027.14

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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	58688.53	170929.76
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	58688.53	170929.76
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	415.69	25567.07
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	415.69	25567.07

**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 / 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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. Lee Alter		Date of Receipt
	Mailing Address 210 W. Rittenhouse Square		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Philadelphia	PA	19103-5726
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.32721
Name of Employer Self-Employed		Occupation Artist	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="1000.00"/>
			Contribution

B.	Full Name (Last, First, Middle Initial) Ms. Joan H. Bacall		Date of Receipt
	Mailing Address 15 Eagle Dr		<input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Newmarket	NH	03857-1742
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.32534
Name of Employer		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="225.00"/>
			Contribution

C.	Full Name (Last, First, Middle Initial) Ms. Rebecca Bahr		Date of Receipt
	Mailing Address 101 W 90th St. Apt. # 22-E		<input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	New York	NY	10024-1274
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.32602
Name of Employer HORACE MANN HIGH SCHOOL, NY, NY		Occupation HIGH SCHOOL TEACHER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="225.00"/>
			Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1050.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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 / 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Ms. Joanne Baldwin		Date of Receipt
	Mailing Address 7600 Ali Drive		<input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Lincoln	NE	68507-3314
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer HERITAGE ADMINISTRATION SERVICES		Occupation HR DIRECTOR	Transaction ID: SA11AI.33113
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="225.00"/>	<input type="text" value="25.00"/>
Contribution			

B.	Full Name (Last, First, Middle Initial) M Coleen Barker		Date of Receipt
	Mailing Address 33542 Valle Road		<input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	San Juan	CA	92675-4800
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer American Financial Group		Occupation mortgage loan consultant	Transaction ID: SA11AI.33271
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="225.00"/>	<input type="text" value="25.00"/>
Contribution			

C.	Full Name (Last, First, Middle Initial) Ms. Sheila Bayne		Date of Receipt
	Mailing Address 10 Whitcomb Street		<input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Belmont	MA	02478-1253
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer TUFTS UNIVERSITY, MEDFORD, MA		Occupation ADMINISTRATOR	Transaction ID: SA11AI.32520
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="336.00"/>	<input type="text" value="42.00"/>
Contribution			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="92.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 39
(check only one)

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

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

A. Full Name (Last, First, Middle Initial)
Ms. Priscilla Bellairs

Mailing Address 63 Purchase Street

City State Zip Code
Newburyport MA 01950-3141

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

Name of Employer Occupation
N. ESSEX COMM COLLEGE, HA- VERHILL, MA TEACHER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 22 / 2008

Transaction ID: SA11AI.32496

Amount of Each Receipt this Period
40.00

Contribution

B. Full Name (Last, First, Middle Initial)
Dr. Georgette Bennett

Mailing Address 45 E 89 Street, Apt. # 18F

City State Zip Code
New York NY 10128-1229

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

Name of Employer Occupation
Tanenbaum Center for Interreligious Un President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 22 / 2008

Transaction ID: SA11AI.32610

Amount of Each Receipt this Period
1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Ms. Mary Boice

Mailing Address 8 Coronado Shrs

City State Zip Code
Lincoln City OR 97367-5201

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

Name of Employer Occupation
Retired RETIRED

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 16 / 2008

Transaction ID: SA11AI.33401

Amount of Each Receipt this Period
25.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **1065.00**

TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 39
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 8 Coronado Shrs

City State Zip Code
Lincoln City OR 97367-5201

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 ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 25 / 2008

Transaction ID: SA11AI.33402

Amount of Each Receipt this Period
75.00

Contribution

B. Full Name (Last, First, Middle Initial)
Ms. Laura Brownstein

Mailing Address 8154 Stirling Falls Circle

City State Zip Code
Sarasota FL 34243-0000

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 ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2008

Transaction ID: SA11AI.32331

Amount of Each Receipt this Period
300.00

Contribution

C. Full Name (Last, First, Middle Initial)
Ms. Patricia Carter

Mailing Address 825 Intervale Road

City State Zip Code
Bethel ME 04217-4823

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

Name of Employer Occupation
SAD, Bethel, ME bus driver

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 16 / 2008

Transaction ID: SA11AI.32537

Amount of Each Receipt this Period
25.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **400.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 39
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Ms. Fay Clayton

Mailing Address 1044 Lake Shore Blvd

City State Zip Code
Evanston IL 60202-1433

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

Name of Employer: Robinson Curley & Clayton, P.C. Occupation: Lawyer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 22 / 2008
Transaction ID: SA11AI.33061
Amount of Each Receipt this Period: 1000.00
Contribution

B.

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

Mailing Address 1568 Greens Drive

City State Zip Code
Chino CA 91709-2273

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

Name of Employer: Letter Sent Occupation: Letter Sent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 25 / 2008
Transaction ID: SA11AI.33253
Amount of Each Receipt this Period: 500.00
Contribution

C.

Full Name (Last, First, Middle Initial)
Ms. Roxanne Conlin, Esq.

Mailing Address 319 7th St Ste 600

City State Zip Code
Des Moines IA 50309-3826

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

Name of Employer: Roxanne Conlin & Associates P.C. Occupation: Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 25 / 2008
Transaction ID: SA11AI.32991
Amount of Each Receipt this Period: 1000.00
Contribution

SUBTOTAL of Receipts This Page (optional) ► 2500.00

TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 39
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Ms. Linda Cook

Mailing Address 28 Cedarwood Drive

City State Zip Code
Morgantown WV 26505-3629

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

Name of Employer Occupation
Letter Sent Letter Sent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
09 / 19 / 2008

Transaction ID: SA11AI.32802

Amount of Each Receipt this Period
250.00

Contribution

B. Full Name (Last, First, Middle Initial)
Ms. Anita Covert

Mailing Address 3589 Tuttle Rd

City State Zip Code
Leslie MI 49251-9714

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

Name of Employer Occupation
Country Stitches Retail Sales Business Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
09 / 17 / 2008

Transaction ID: SA11AI.32984

Amount of Each Receipt this Period
220.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. William Crotty

Mailing Address 2349 Magazine Street

City State Zip Code
New Orleans LA 70130-5601

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

Name of Employer Occupation
retired RN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 16 / 2008

Transaction ID: SA11AI.33116

Amount of Each Receipt this Period
25.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **495.00**

TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Ms. Mary DuPuis		Date of Receipt	
	Mailing Address 3717 N 34th St		M M / D D / Y Y Y Y 09 / 19 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.33427
	Tacoma	WA	98407-6023	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		500.00	
Name of Employer None		Occupation Retired		Contribution
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. Sue Errington		Date of Receipt	
	Mailing Address 3200 Brook Drive		M M / D D / Y Y Y Y 09 / 22 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.32960
	Muncie	IN	47304-2915	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		25.00	
Name of Employer PLANNED PARENTHOOD OF GREATER INDIANA		Occupation DIRECTOR OF PUBLIC POLICY		Contribution
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. Dawn Evans		Date of Receipt	
	Mailing Address 22221 Creekview Drive		M M / D D / Y Y Y Y 09 / 16 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.32290
	Gaithersburg	MD	20882-0000	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer		Occupation Homemaker		Contribution
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)	775.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 39
(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. Gertrude Ffolliott

Mailing Address 442 Summit Ave. Apt. # 6

City State Zip Code
St Paul MN 55102-2628

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

Name of Employer Letter Sent Occupation Letter Sent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt: 09 / 16 / 2008
Transaction ID: SA11AI.33018
Amount of Each Receipt this Period: 680.00
Contribution

B.

Full Name (Last, First, Middle Initial)
Edna Fillinger

Mailing Address 315 Ray Street

City State Zip Code
Newcomerstown OH 43832-1247

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 09 / 16 / 2008
Transaction ID: SA11AI.32923
Amount of Each Receipt this Period: 25.00
Contribution

C.

Full Name (Last, First, Middle Initial)
Edna Fillinger

Mailing Address 315 Ray Street

City State Zip Code
Newcomerstown OH 43832-1247

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 24 / 2008
Transaction ID: SA11AI.32924
Amount of Each Receipt this Period: 200.00
Contribution

SUBTOTAL of Receipts This Page (optional) ► **905.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 39
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
M.D. Constance Ganapes

Mailing Address 9077 N Green Brook Ct

City State Zip Code
River Hills WI 53217-0000

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

Name of Employer Metro Physicians Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 17 / 2008

Transaction ID: SA11AI.32349

Amount of Each Receipt this Period
250.00

Contribution

B.

Full Name (Last, First, Middle Initial)
Ms Zabelle Krasow Greenblatt

Mailing Address 14 CYPRESS RD

City State Zip Code
WEST HARTFORD CT 06117-1808

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

Name of Employer Simsbury Board of Education Occupation Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2008

Transaction ID: SA11AI.32550

Amount of Each Receipt this Period
360.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Ms. Ursula Gusse

Mailing Address 316 Curl Creek Road

City State Zip Code
Greenwood SC 29649-8519

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 16 / 2008

Transaction ID: SA11AI.32830

Amount of Each Receipt this Period
35.00

Contribution

SUBTOTAL of Receipts This Page (optional) ▶ **645.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Ms. Ursula Gusse		Date of Receipt
	Mailing Address 316 Curl Creek Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 22 / 2008
	City	State	Zip Code
	Greenwood	SC	29649-8519
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.32831
Name of Employer NONE		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	<input type="text"/> 25.00
Contribution			

B.	Full Name (Last, First, Middle Initial) M.D. Thomas Gutheil		Date of Receipt
	Mailing Address 6 Wellman Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 16 / 2008
	City	State	Zip Code
	Brookline	MA	02446-2831
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.32513
Name of Employer self		Occupation M.D.	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	<input type="text"/> 25.00
Contribution			

C.	Full Name (Last, First, Middle Initial) Ph.D. Coleen Hanna		Date of Receipt
	Mailing Address 259 Braxton Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 22 / 2008
	City	State	Zip Code
	Edgewater	MD	21037-1843
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.32760
Name of Employer		Occupation NONE GIVEN	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	<input type="text"/> 25.00
Contribution			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 75.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 16 / 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Mrs. Lois Harrison		Date of Receipt
	Mailing Address 2311 Nevada Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 16 / 2008
	City	State	Zip Code
	Lakeland	FL	33803-2339
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.32885
Name of Employer Retired		Occupation Retired / Cival Volunteer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	<input type="text"/> 500.00
			Contribution

B.	Full Name (Last, First, Middle Initial) Ms. Edith Herron		Date of Receipt
	Mailing Address 36 Park Avenue		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 16 / 2008
	City	State	Zip Code
	Rehoboth Beach	DE	19971-2842
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.32738
Name of Employer SELF EMPLOYED		Occupation COMPUTER CONSULTANT	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 360.00	<input type="text"/> 40.00
			Contribution

C.	Full Name (Last, First, Middle Initial) Ms. Martha Hoegberg		Date of Receipt
	Mailing Address 400 Domer Ave		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 26 / 2008
	City	State	Zip Code
	Takoma Park	MD	20912-7128
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.32755
Name of Employer Dewberry & Davis		Occupation Project Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	<input type="text"/> 500.00
			Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1040.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 17 / 39
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Jerry Hogenmiller

Mailing Address 1853 Taper Drive

City State Zip Code
Pittsburgh PA 15241-2659

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

Name of Employer Thomson Rhodes Cowle Occupation Lawyer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	9	/	2	0	0	8

Transaction ID: SA11AI.32690

Amount of Each Receipt this Period
250.00

Contribution

B. Full Name (Last, First, Middle Initial)
Ms. Lucy Holland

Mailing Address Po Box 83

City State Zip Code
Lenox MA 01240-0083

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

Name of Employer Self Occupation Consultant

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	3	/	2	0	0	8

Transaction ID: SA11AI.32484

Amount of Each Receipt this Period
250.00

Contribution

C. Full Name (Last, First, Middle Initial)
Ms. Betty Holling

Mailing Address 15 Sylvan Avenue

City State Zip Code
Chelmsford MA 01824-2327

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 315.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	6	/	2	0	0	8

Transaction ID: SA11AI.32493

Amount of Each Receipt this Period
35.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **535.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 39
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Ms Cynthia Jimenez

Mailing Address 932 FRANKLIN ST

City State Zip Code
WYOMISSING PA 19610-3003

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

Name of Employer Occupation
RETIREED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt
MM / DD / YYYY
09 / 18 / 2008

Transaction ID: SA11AI.32734

Amount of Each Receipt this Period
540.00

Contribution

B.

Full Name (Last, First, Middle Initial)
Mr. Allan Johannesen

Mailing Address 4 Carleton Rd

City State Zip Code
Rochdale MA 01542-1144

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

Name of Employer Occupation
WPI Computer Programmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
09 / 07 / 2008

Transaction ID: SA11AI.32486

Amount of Each Receipt this Period
250.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Ms. Sarah Kaplan

Mailing Address 144-146 N 3rd St # A

City State Zip Code
Philadelphia PA 19106-1814

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

Name of Employer Occupation
University of Pennsylvania Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
09 / 21 / 2008

Transaction ID: SA11AI.32723

Amount of Each Receipt this Period
250.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **1040.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 39

(check only one)

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

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

A.

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

Mailing Address 345 East 52nd Street

City State Zip Code
New York NY 10022-0000

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

Name of Employer Occupation
Proskauer Rose LLP Attorney

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 25 / 2008

Transaction ID: SA11AI.32246

Amount of Each Receipt this Period

1000.00

Contribution

B.

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

Mailing Address 772 Brush Hill Rd

City State Zip Code
Stowe VT 05672-4309

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

Name of Employer Occupation
SELF HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 25 / 2008

Transaction ID: SA11AI.32540

Amount of Each Receipt this Period

1000.00

Contribution

C.

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
Self-Employed Theater Educator

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2008

Transaction ID: SA11AI.32808

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 39
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 8 Riveredge Court

City Plainville State CT Zip Code 06062-3228

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

Name of Employer Self Occupation ATTORNEY / Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 25 / 2008
Transaction ID: SA11AI.32547
Amount of Each Receipt this Period 250.00
Contribution

B. Full Name (Last, First, Middle Initial)
Ms. Nancy Kosobud

Mailing Address 1137 W Oakdale Ave

City Chicago State IL Zip Code 60657-4319

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

Name of Employer Letter Sent Occupation Letter Sent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 15 / 2008
Transaction ID: SA11AI.33076
Amount of Each Receipt this Period 250.00
Contribution

C. Full Name (Last, First, Middle Initial)
Ms. Ester LaBay

Mailing Address 17 Church St. Apt. # 41

City St Johnsbury State VT Zip Code 05819-2129

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

Name of Employer Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 09 / 22 / 2008
Transaction ID: SA11AI.32543
Amount of Each Receipt this Period 30.00
Contribution

SUBTOTAL of Receipts This Page (optional) ▶ 530.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 39

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Mr. Timothy Lee

Mailing Address 2511 Bennington Drive

City State Zip Code
San Bruno CA 94066-0000

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

Name of Employer Occupation
City & County of San Francisco Attorney

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 21 / 2008

Transaction ID: SA11AI.32433

Amount of Each Receipt this Period

240.00

Contribution

B.

Full Name (Last, First, Middle Initial)
Ms. Andrea Lemmon

Mailing Address PO Box 447

City State Zip Code
Villanova PA 19085-0000

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

Name of Employer Occupation
Self-Employed Investor

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 25 / 2008

Transaction ID: SA11AI.32277

Amount of Each Receipt this Period

500.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Paula Leonard-Schwartz

Mailing Address 121 Madeline Road

City State Zip Code
Manchester NH 03104

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

Name of Employer Occupation
CMC Physician

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

Date of Receipt

M M / D D / Y Y Y Y
09 / 14 / 2008

Transaction ID: SA11AI.33442

Amount of Each Receipt this Period

100.00

Earmarked for Hillary Clinton for president

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

740.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 39
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Henry Lester

Mailing Address 1610 Bushnell Avenue

City State Zip Code
South Pasadena CA 91030

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

Name of Employer Caltech Occupation Professor of Biology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY
09 / 28 / 2008

Transaction ID: SA11AI.33444

Amount of Each Receipt this Period
250.00

Earmarked for Hillary Clinton for president

[MEMO ITEM]

B.

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

Mailing Address 394 Golden Hills Dr

City State Zip Code
Portola Valley CA 94028-7615

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

Name of Employer unemployed Occupation unemployed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
09 / 25 / 2008

Transaction ID: SA11AI.33296

Amount of Each Receipt this Period
5000.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Mr. Austin Lin

Mailing Address 8 Saint Paul Street

City State Zip Code
Cambridge MA 02139-2506

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

Name of Employer Brookline High School Occupation Social Worker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 16 / 2008

Transaction ID: SA11AI.32504

Amount of Each Receipt this Period
25.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **5025.00**

TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 23 / 39
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Ms. Morgan McBride

Mailing Address 17340 Kennedy Road

City State Zip Code
Sonora CA 95370-8700

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

Name of Employer Occupation
COLUMBIA COLLEGE, SONORA, CA college professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 16 / 2008

Transaction ID: SA11AI.33350

Amount of Each Receipt this Period
25.00

Contribution

B. Full Name (Last, First, Middle Initial)
Ms Margaret Mccartney

Mailing Address 19381 Via Real Dr

City State Zip Code
Saratoga CA 95070-4527

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 ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 16 / 2008

Transaction ID: SA11AI.33343

Amount of Each Receipt this Period
25.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. William McFarlane, Jr.

Mailing Address 234 1/2 9th Street

City State Zip Code
West Palm Beach FL 33401-3704

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 ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 16 / 2008

Transaction ID: SA11AI.32864

Amount of Each Receipt this Period
25.00

Contribution

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 39
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Ms. Christine McLaughlin

Mailing Address 900 N St.afford St. Apt 1415

City State Zip Code
Arlington VA 22203-1846

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

Name of Employer Occupation
Venable LLP Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt: 09 / 23 / 2008
Transaction ID: SA11AI.32774
Amount of Each Receipt this Period: 1250.00
Contribution

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

Mailing Address 545 Main Street

City State Zip Code
Middlefield CT 06455-1258

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

Name of Employer Occupation
Self-Employed PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 23 / 2008
Transaction ID: SA11AI.32555
Amount of Each Receipt this Period: 1000.00
Contribution

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

Mailing Address 3490 Oak Knoll Drive

City State Zip Code
Brighton MI 48114-4906

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

Name of Employer Occupation
Huntsman SALES MGR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 09 / 15 / 2008
Transaction ID: SA11AI.32965
Amount of Each Receipt this Period: 250.00
Contribution

SUBTOTAL of Receipts This Page (optional) ► 2500.00

TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Jordan Pfunter	Date of Receipt MM / DD / YYYY 09 / 10 / 2008
	Mailing Address 5605 North 35th Road	Transaction ID: SA11AI.33438
	City State Zip Code Arlington VA 22207	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	Earmarked for Hillary Clinton for president
	Name of Employer Occupation Retired	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

B.	Full Name (Last, First, Middle Initial) Ms. Shirley Plapp	Date of Receipt MM / DD / YYYY 09 / 17 / 2008
	Mailing Address 8914 Rockmont Terrace	Transaction ID: SA11AI.33163
	City State Zip Code Colorado Springs CO 80920-6802	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Retired RETIRED RN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

C.	Full Name (Last, First, Middle Initial) Ms. Shirley Plapp	Date of Receipt MM / DD / YYYY 09 / 22 / 2008
	Mailing Address 8914 Rockmont Terrace	Transaction ID: SA11AI.33164
	City State Zip Code Colorado Springs CO 80920-6802	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Retired RETIRED RN	
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)	60.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 39

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Ms. Doreen Quinn

Mailing Address 569 Evanswood Place

City State Zip Code
Cincinnati OH 45220

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

Name of Employer Occupation
Retired Teacher

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 16 / 2008

Transaction ID: SA11AI.32942

Amount of Each Receipt this Period

500.00

Contribution

B.

Full Name (Last, First, Middle Initial)
Ms. L. Dianne Rubins

Mailing Address 514 Neptune Court

City State Zip Code
Napa CA 94558-9670

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

Name of Employer Occupation
St. Helena Hospital Center, Vallejo, CA Marriage and Family Therapist, License

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

Date of Receipt

M M / D D / Y Y Y Y
09 / 16 / 2008

Transaction ID: SA11AI.33317

Amount of Each Receipt this Period

25.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Ms. Sally Rynne

Mailing Address 566 Lincoln Avenue

City State Zip Code
Winnetka IL 60093-0000

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

Name of Employer Occupation
None None

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 20 / 2008

Transaction ID: SA11AI.32363

Amount of Each Receipt this Period

250.00

Contribution

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 39
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Stanley Schroeder

Mailing Address 572 Wapiti Loop

City State Zip Code
Hamilton MT 59840-9605

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

Name of Employer NONE Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 09 / 22 / 2008
Transaction ID: SA11AI.33044
Amount of Each Receipt this Period: 25.00
Contribution

B. Full Name (Last, First, Middle Initial)
Ms. Barbara Selsor

Mailing Address P.O. Box 270257

City State Zip Code
Susanville CA 96127-0005

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

Name of Employer LASSEN UNION; SUSANVILLE, CA Occupation HIGH SCHOOL TEACHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 09 / 22 / 2008
Transaction ID: SA11AI.33373
Amount of Each Receipt this Period: 25.00
Contribution

C. Full Name (Last, First, Middle Initial)
Ms. Mary Slattery

Mailing Address 45 Cottonwood Ct

City State Zip Code
Palm Coast FL 32137-4311

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

Name of Employer Self Occupation Freelance Writer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 09 / 20 / 2008
Transaction ID: SA11AI.32846
Amount of Each Receipt this Period: 250.00
Contribution

SUBTOTAL of Receipts This Page (optional) ▶ 300.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 39
(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
							17

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

A. Full Name (Last, First, Middle Initial)
Ms. Evelyn Swenson

Mailing Address 204 Walnut Avenue N

City State Zip Code
Canby MN 56220-1268

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 16 / 2008

Transaction ID: SA11AI.33041

Amount of Each Receipt this Period
450.00

Contribution

B. Full Name (Last, First, Middle Initial)
Ms. Mona Taylor

Mailing Address 138 N Garfield Rd

City State Zip Code
Hinsdale IL 60521-3720

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

Name of Employer Occupation
RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 22 / 2008

Transaction ID: SA11AI.33064

Amount of Each Receipt this Period
35.00

Contribution

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

Mailing Address 261 S. Reeves Drive PH1

City State Zip Code
Beverly Hills CA 90212-0000

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

Name of Employer Occupation
Self Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1900.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 16 / 2008

Transaction ID: SA11AI.32412

Amount of Each Receipt this Period
100.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **585.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 39
(check only one)

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

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

A. Full Name (Last, First, Middle Initial)
Mrs Anna Timmons

Mailing Address P.O. Box 428

City Mackinac Island State MI Zip Code 49757

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 23 / 2008

Transaction ID: SA11AI.32987

Amount of Each Receipt this Period 2000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Ms. Sandra Tullius

Mailing Address 77 Sand Hill Rd

City Durham State CT Zip Code 06422-0000

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

Name of Employer State of Connecticut Occupation Prosecutor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 24 / 2008

Transaction ID: SA11AI.32228

Amount of Each Receipt this Period 250.00

Contribution

C. Full Name (Last, First, Middle Initial)
Ms. Olga Vives

Mailing Address 4220 Campbell Avenue, #620

City Arlington State VA Zip Code 22206-3426

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

Name of Employer National Organization For Women Occupation Exective VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 16 / 2008

Transaction ID: SA11AI.32777

Amount of Each Receipt this Period 50.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► 2300.00

TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 30 / 39
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Bertrand Walls

Mailing Address 29 N Church St
Apt A

City Cortland State NY Zip Code 13045

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

Name of Employer Pall Occupation Field Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt: 09 / 13 / 2008
Transaction ID: SA11AI.33440
Amount of Each Receipt this Period: 100.00
Earmarked for Hillary Clinton for president
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Mr. Bill Weiss

Mailing Address 33 Fairmor Dr

City Morgantown State WV Zip Code 26501-3845

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 09 / 15 / 2008
Transaction ID: SA11AI.32800
Amount of Each Receipt this Period: 250.00
Contribution

SUBTOTAL of Receipts This Page (optional) ► 250.00

TOTAL This Period (last page this line number only) ► 26007.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 39
	<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)
National Organization for Women PAC

A.	Full Name (Last, First, Middle Initial) National Organization for Women, Inc		Date of Receipt
	Mailing Address 1100 H Street, NW		<input type="text" value="09"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Washington	DC	20005
	FEC ID number of contributing federal political committee. C		Transaction ID: SA17.37256
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="2000.00"/>
		<input type="text" value="29000.00"/>	Transfer

B.	Full Name (Last, First, Middle Initial) National Organization for Women, Inc		Date of Receipt
	Mailing Address 1100 H Street, NW		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Washington	DC	20005
	FEC ID number of contributing federal political committee. C		Transaction ID: SA17.37257
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="2000.00"/>
		<input type="text" value="31000.00"/>	Transfer

C.	Full Name (Last, First, Middle Initial) National Organization for Women, Inc		Date of Receipt
	Mailing Address 1100 H Street, NW		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Washington	DC	20005
	FEC ID number of contributing federal political committee. C		Transaction ID: SA17.37258
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="10000.00"/>
		<input type="text" value="41000.00"/>	Transfer

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="14000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="14000.00"/>

**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 32 / 39

<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)
National Organization for Women PAC

A.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.33485 Date of Disbursement
	Mailing Address PO Box 7006	<input type="text" value="09"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City Midvale State UT Zip Code 84047	Amount of Each Disbursement this Period
	Purpose of Disbursement credit card processing	<input type="text" value="4.50"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.33486 Date of Disbursement
	Mailing Address PO Box 7006	<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2008"/>
	City Midvale State UT Zip Code 84047	Amount of Each Disbursement this Period
	Purpose of Disbursement credit card processing	<input type="text" value="0.82"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.33488 Date of Disbursement
	Mailing Address PO Box 7006	<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2008"/>
	City Midvale State UT Zip Code 84047	Amount of Each Disbursement this Period
	Purpose of Disbursement credit card processing	<input type="text" value="5.70"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="11.02"/>
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

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

A.	Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 7006 City Midvale State UT Zip Code 84047 Purpose of Disbursement credit card 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) ▼	Transaction ID: SB21B.33487 Date of Disbursement 09 / 22 / 2008	Amount of Each Disbursement this Period 4.50
B.	Full Name (Last, First, Middle Initial) Authorize.net Mailing Address 915 S. 500 E. Suite 200 City American Fork State UT Zip Code 84003 Purpose of Disbursement credit card 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) ▼	Transaction ID: SB21B.33492 Date of Disbursement 09 / 03 / 2008	Amount of Each Disbursement this Period 25.70
C.	Full Name (Last, First, Middle Initial) Global STL NDPS Mailing Address 10 Glenlake Parkway NE North Tower City Atlanta State GA Zip Code 30328 Purpose of Disbursement credit card 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) ▼	Transaction ID: SB21B.33490 Date of Disbursement 09 / 03 / 2008	Amount of Each Disbursement this Period 25.10

SUBTOTAL of Disbursements This Page (optional) ▶	55.30
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
National Organization for Women PAC

A.	Full Name (Last, First, Middle Initial) Global STL NDPS Mailing Address 10 Glenlake Parkway NE North Tower City Atlanta State GA Zip Code 30328 Purpose of Disbursement credit card 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) ▼	Transaction ID: SB21B.33491 Date of Disbursement 09 / 03 / 2008 Amount of Each Disbursement this Period 48.85 001 Category/Type
B.	Full Name (Last, First, Middle Initial) Halt, Buzas & Powell, Ltd Mailing Address 99 Canal Center Plaza Suite 230 City Alexandria State VA Zip Code 22314 Purpose of Disbursement Accounting Firm Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.33451 Date of Disbursement 09 / 02 / 2008 Amount of Each Disbursement this Period 38.50 001 Category/Type
C.	Full Name (Last, First, Middle Initial) Payment Solutions Mailing Address P O Box 30217 City Bethesda State MD Zip Code 20924 Purpose of Disbursement Credit card 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) ▼	Transaction ID: SB21B.33450 Date of Disbursement 09 / 02 / 2008 Amount of Each Disbursement this Period 161.60 001 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

248.95

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

315.27

**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 35 / 39

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

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

<p>A. Full Name (Last, First, Middle Initial) George Fearing for Congress</p> <p>Mailing Address 1815 George Washington Way</p> <p>City Richland State WA Zip Code 99352</p> <p>Purpose of Disbursement in-kind address labels</p> <p>Candidate Name SHAREN SWARTZ NEUHARDT</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 07</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.33479</p> <p>Date of Disbursement 09 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 14.00</p> <p>Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) KRUPP FOR CONGRESS</p> <p>Mailing Address 11427 79TH PLACE</p> <p>City PLEASANT PRAIRIE State WI Zip Code 53158</p> <p>Purpose of Disbursement in-kind address labels</p> <p>Candidate Name SHAREN SWARTZ NEUHARDT</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 07</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.33480</p> <p>Date of Disbursement 09 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 15.00</p> <p>Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) KRYZAN FOR CONGRESS</p> <p>Mailing Address P.O. Box 317</p> <p>City Amherst State NY Zip Code 14226</p> <p>Purpose of Disbursement contribution</p> <p>Candidate Name ALICE J KRYZAN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 26</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.33462</p> <p>Date of Disbursement 09 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Category/Type 011</p>

SUBTOTAL of Disbursements This Page (optional) ▶

529.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Paula Leonard-Schwartz

Mailing Address 121 Madeline Road

City State Zip Code
Manchester NH 03104

Purpose of Disbursement
earmarked for Hillary Clinto for Preside

Candidate Name
HILLARY RODHAM CLINTON

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District: 00

Transaction ID: SB23.33448
Date of Disbursement

09 / 14 / 2008

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Henry Lester

Mailing Address 1610 Bushnell Avenue

City State Zip Code
South Pasadena CA 91030

Purpose of Disbursement
earmarked for Hillary Clinto for Preside

Candidate Name
HILLARY RODHAM CLINTON

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District: 00

Transaction ID: SB23.33449
Date of Disbursement

09 / 28 / 2008

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
MITAKIDES FOR CONGRESS

Mailing Address 5323 Split Rail Road

City State Zip Code
Dayton OH 45429

Purpose of Disbursement
in-kind address labels

Candidate Name
SHAREN SWARTZ NEUHARDT

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: OH District: 07

Transaction ID: SB23.33481
Date of Disbursement

09 / 08 / 2008

Amount of Each Disbursement this Period

7.25

SUBTOTAL of Disbursements This Page (optional) ▶

7.25

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

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

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

FOR LINE NUMBER: (check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
NEUHARDT FOR CONGRESS

Transaction ID: SB23.33471
Date of Disbursement

Mailing Address PO BOX 2430

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	0	8

City SPRINGFIELD State OH Zip Code 45501

Amount of Each Disbursement this Period

Purpose of Disbursement in-kind address labels

10.00

Candidate Name SHAREN SWARTZ NEUHARDT

Category/Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: OH District: 07

B.

Full Name (Last, First, Middle Initial)
NEUHARDT FOR CONGRESS

Transaction ID: SB23.33465
Date of Disbursement

Mailing Address PO BOX 2430

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	3		2	0	0	8

City SPRINGFIELD State OH Zip Code 45501

Amount of Each Disbursement this Period

Purpose of Disbursement contribution

500.00

Candidate Name ALICE J KRYZAN

011
Category/Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NY District: 26

C.

Full Name (Last, First, Middle Initial)
Jordan Pfunter

Transaction ID: SB23.33446
Date of Disbursement

Mailing Address 5605 North 35th Road

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	0	8

City Arlington State VA Zip Code 22207

Amount of Each Disbursement this Period

Purpose of Disbursement earmarked for Hillary Clinto for Preside

25.00

Candidate Name HILLARY RODHAM CLINTON

011
Category/Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District: 00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

510.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 38 / 39

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

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

A.	Full Name (Last, First, Middle Initial) PINGREE FOR CONGRESS	Transaction ID: SB23.33461
	Mailing Address PO Box 17613	Date of Disbursement MM / DD / YYYY 09 / 23 / 2008
	City Portland State ME Zip Code 04112	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement contribution Candidate Name CHELLIE M PINGREE	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 01	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) TADDEO FOR CONGRESS	Transaction ID: SB23.33482
	Mailing Address PO BOX 565388	Date of Disbursement MM / DD / YYYY 09 / 30 / 2008
	City MIAMI State FL Zip Code 33256	Amount of Each Disbursement this Period 33.00
	Purpose of Disbursement in-kind address labels Candidate Name ANNETTE TADDEO	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Bertrand Walls	Transaction ID: SB23.33447
	Mailing Address 29 N Church St Apt A	Date of Disbursement MM / DD / YYYY 09 / 13 / 2008
	City Cortland State NY Zip Code 13045	Amount of Each Disbursement this Period 100.00
	Purpose of Disbursement earmarked for Hillary Clinto for Preside Candidate Name HILLARY RODHAM CLINTON	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	533.00
TOTAL This Period (last page this line number only)	1579.25

**SCHEDULE 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 39 / 39

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

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

A.	Full Name (Last, First, Middle Initial) National Organization for Women, Inc	Transaction ID: SB29.37262
	Mailing Address 1100 H Street, NW	Date of Disbursement MM / DD / YYYY 09 / 03 / 2008
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period 1907.75
	Purpose of Disbursement Transfer	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:	

B.	Full Name (Last, First, Middle Initial) National Organization for Women, Inc	Transaction ID: SB29.37263
	Mailing Address 1100 H Street, NW	Date of Disbursement MM / DD / YYYY 09 / 29 / 2008
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement Transfer	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:	

C.	Full Name (Last, First, Middle Initial) National Organization for Women, Inc	Transaction ID: SB29.37264
	Mailing Address 1100 H Street, NW	Date of Disbursement MM / DD / YYYY 09 / 29 / 2008
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period 10000.00
	Purpose of Disbursement Transfer	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)	▶	13907.75
TOTAL This Period (last page this line number only)	▶	13907.75