

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

WOMENCOUNT PAC

ADDRESS (number and street) 393 7TH AVENUE, SUITE 301

Check if different than previously reported. (ACC)

SAN FRANCISCO CA 94118

2. **FEC IDENTIFICATION NUMBER ▼** C00450098 **CITY ▲** **STATE ▲** **ZIP CODE ▲**

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

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

<input type="checkbox"/> Feb 20 (M2)	<input checked="" type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

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

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12S)	

Election on M M / D D / Y Y Y Y Y Y in the State of

(d) 30-Day **POST-Election** Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
--	---------------------------------------	--

Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period 04 / 01 / 2017 through 04 / 30 / 2017

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

Mason, Stacy, , ,

Type or Print Name of Treasurer

Signature of Treasurer *Mason, Stacy, , ,* **[Electronically Filed]** Date 05 / 19 / 2017

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)

Write or Type Committee Name

WOMENCOUNT PAC

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="2017"/>		4706.06
(b) Cash on Hand at Beginning of Reporting Period.....	10076.54	
(c) Total Receipts (from Line 19)	51481.60	179121.24
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	61558.14	183827.30
7. Total Disbursements (from Line 31).....	51856.51	174125.67
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	9701.63	9701.63
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)	9986.99	

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
WOMENCOUNT PAC

Report Covering the Period: From: 04 / 01 / 2017 To: 04 / 30 / 2017

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).....	49565.00	172469.20
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	49565.00	172469.20
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	1916.60	6637.64
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	51481.60	179106.84
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	14.40
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)).....▶	51481.60	179121.24
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	51481.60	179121.24

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	3927.02	8174.38
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	3927.02	8174.38
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	47652.30	165663.50
24. Independent Expenditures (use Schedule E)	0.00	0.00
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	262.70	272.70
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	14.49	15.09
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	277.19	287.79
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
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)) ..	51856.51	174125.67
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	51856.51	174125.67

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	51481.60	179106.84
34. Total Contribution Refunds (from Line 28(d))	277.19	287.79
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	51204.41	178819.05
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	3927.02	8174.38
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3927.02	8174.38

**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 130
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<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)
WOMENCOUNT PAC

A. BENNETT, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1585 TERRACE WAY #325
 City SANTA ROSA State CA Zip Code 95404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **04 / 02 / 2017**
Transaction ID : INCA12470
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ERMK: GILLIBRAND FOR SENATE

B. KOHLBERG, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 63 LOS TRANCOS ROAD
 City PORTOLA VALLEY State CA Zip Code 94028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME Occupation (for Individual) ARCHITECT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **04 / 03 / 2017**
Transaction ID : INCA12473
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ERMK: TAMMY BALDWIN FOR SENATE

C. KOHLBERG, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 63 LOS TRANCOS ROAD
 City PORTOLA VALLEY State CA Zip Code 94028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME Occupation (for Individual) ARCHITECT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **04 / 03 / 2017**
Transaction ID : INCA12474
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ERMK: STABENOW FOR US SENATE

SUBTOTAL of Receipts This Page (optional).....	3000.00
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 7 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. MCLEAN, KERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2738 FOREST AVE
 City BERKELEY State CA Zip Code 94705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTUIT INC. Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2017
Transaction ID : INCA12471
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 ERMK: TAMMY BALDWIN FOR SENATE

B. WEISSBERG, WESLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2053 PRINCETON
 City PALO ALTO State CA Zip Code 94306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME Occupation (for Individual) AUDIO PRODUCER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2017
Transaction ID : INCA12472
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 ERMK: STABENOW FOR US SENATE

C. ACKER-LYONS, ALEXANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3349 WAVERLEY STREET
 City PALO ALTO State CA Zip Code 94306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AL ADVISING Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 40.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2017
Transaction ID : INCA12484
 Amount of Each Receipt this Period
 5.00
 Memo Item
 ERMK: STABENOW FOR US SENATE

SUBTOTAL of Receipts This Page (optional).....	2005.00
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 8 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. ACKER-LYONS, ALEXANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3349 WAVERLEY STREET
 City PALO ALTO State CA Zip Code 94306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AL ADVISING Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 40.00

Date of Receipt 04 / 04 / 2017
Transaction ID : INCA12482
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: TAMMY BALDWIN FOR SENATE

B. ACKER-LYONS, ALEXANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3349 WAVERLEY STREET
 City PALO ALTO State CA Zip Code 94306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AL ADVISING Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 40.00

Date of Receipt 04 / 04 / 2017
Transaction ID : INCA12483
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: MCCASKILL FOR MISSOURI

C. CLAYTON, MEGAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 DINSMORE AVE, APT 416
 City FRAMINGHAM State MA Zip Code 1702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME Occupation (for Individual) DIGITAL DESIGN CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25.00

Date of Receipt 04 / 04 / 2017
Transaction ID : INCA12487
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: FRIENDS OF MARIA

SUBTOTAL of Receipts This Page (optional).....▶ 15.00
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 9 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. CLAYTON, MEGAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 DINSMORE AVE, APT 416

City FRAMINGHAM	State MA	Zip Code 1702
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME	Occupation (for Individual) DIGITAL DESIGN CONSULTANT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 25.00

Date of Receipt
 04 / 04 / 2017
Transaction ID : INCA12486

Amount of Each Receipt this Period
 5.00

Memo Item
 ERMK: STABENOW FOR US SENATE

B. CLAYTON, MEGAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 DINSMORE AVE, APT 416

City FRAMINGHAM	State MA	Zip Code 1702
--------------------	-------------	------------------

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

Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME	Occupation (for Individual) DIGITAL DESIGN CONSULTANT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 25.00

Date of Receipt
 04 / 04 / 2017
Transaction ID : INCA12489

Amount of Each Receipt this Period
 5.00

Memo Item
 ERMK: FRIENDS OF MAZIE HIRONO

C. CLAYTON, MEGAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 DINSMORE AVE, APT 416

City FRAMINGHAM	State MA	Zip Code 1702
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME	Occupation (for Individual) DIGITAL DESIGN CONSULTANT
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 25.00

Date of Receipt
 04 / 04 / 2017
Transaction ID : INCA12488

Amount of Each Receipt this Period
 5.00

Memo Item
 ERMK: MCCASKILL FOR MISSOURI

SUBTOTAL of Receipts This Page (optional).....	15.00
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 10 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. CLAYTON, MEGAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 DINSMORE AVE, APT 416
 City FRAMINGHAM State MA Zip Code 1702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME Occupation (for Individual) DIGITAL DESIGN CONSULTANT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 25.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2017
Transaction ID : INCA12485
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: FEINSTEIN FOR SENATE 2018

B. FRANCIS, KERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5940 ESTATES DRIVE
 City OAKLAND State CA Zip Code 94611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DELOITTE Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2017
Transaction ID : INCA12475
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ERMK: TAMMY BALDWIN FOR SENATE

C. HENDREN, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2655 SW RAVENVIEW DRIVE
 City PORTLAND State OR Zip Code 97201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME Occupation (for Individual) WRITER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 70.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2017
Transaction ID : INCA12480
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: MCCASKILL FOR MISSOURI

SUBTOTAL of Receipts This Page (optional).....▶ 1010.00
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 11 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. HENDREN, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2655 SW RAVENVIEW DRIVE
 City PORTLAND State OR Zip Code 97201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME Occupation (for Individual) WRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 70.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2017
Transaction ID : INCA12481
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: STABENOW FOR US SENATE

B. HENDREN, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2655 SW RAVENVIEW DRIVE
 City PORTLAND State OR Zip Code 97201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME Occupation (for Individual) WRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 70.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2017
Transaction ID : INCA12479
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: TAMMY BALDWIN FOR SENATE

C. HOWARD, GLORIA J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12425 NORTH DERRINGER ROAD
 City MARANA State AZ Zip Code 85653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2017
Transaction ID : INCA12492
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: MCCASKILL FOR MISSOURI

SUBTOTAL of Receipts This Page (optional).....	15.00
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 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. HOWARD, GLORIA J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12425 NORTH DERRINGER ROAD
 City MARANA State AZ Zip Code 85653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 150.00

Date of Receipt 04 / 04 / 2017
Transaction ID : INCA12494
 Amount of Each Receipt this Period 5.00
 Memo Item

B. HOWARD, GLORIA J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12425 NORTH DERRINGER ROAD
 City MARANA State AZ Zip Code 85653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 150.00

Date of Receipt 04 / 04 / 2017
Transaction ID : INCA12493
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: STABENOW FOR US SENATE

C. HOWARD, GLORIA J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12425 NORTH DERRINGER ROAD
 City MARANA State AZ Zip Code 85653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 150.00

Date of Receipt 04 / 04 / 2017
Transaction ID : INCA12491
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: TAMMY BALDWIN FOR SENATE

SUBTOTAL of Receipts This Page (optional).....▶ 15.00
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 13 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. KAVANAUGH, LAURA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 119 TAN OAK DR.

City PORTOLA VALLEY	State CA	Zip Code 94028
------------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME	Occupation (for Individual) TRAVEL CONSULTANT, ATTORNEY
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		04		2017

Transaction ID : INCA12490

Amount of Each Receipt this Period
1000.00

Memo Item
ERMK: STABENOW FOR US SENATE

B. MASI, VALERIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45985 BUCKNELL CT

City INDIO	State CA	Zip Code 92201
---------------	-------------	-------------------

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

Name of Employer (for Individual) BEST PAW FORWARD	Occupation (for Individual) ANIMAL BEHAVIORIST
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
35.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		04		2017

Transaction ID : INCA12476

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: TAMMY BALDWIN FOR SENATE

C. MASI, VALERIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45985 BUCKNELL CT

City INDIO	State CA	Zip Code 92201
---------------	-------------	-------------------

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

Name of Employer (for Individual) BEST PAW FORWARD	Occupation (for Individual) ANIMAL BEHAVIORIST
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
35.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		04		2017

Transaction ID : INCA12478

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: STABENOW FOR US SENATE

SUBTOTAL of Receipts This Page (optional).....	1010.00
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 14 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. MASI, VALERIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45985 BUCKNELL CT
 City INDIO State CA Zip Code 92201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEST PAW FORWARD Occupation (for Individual) ANIMAL BEHAVIORIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 35.00

Date of Receipt 04 / 04 / 2017
Transaction ID : INCA12477
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: MCCASKILL FOR MISSOURI

B. THOMPSON, SHEILA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 553A, CLIPPER STREET
 City SAN FRANCISCO State CA Zip Code 94114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED, SAME NAME Occupation (for Individual) MARKETING CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 04 / 04 / 2017
Transaction ID : INCA12495
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ERMK: TAMMY BALDWIN FOR SENATE

C. ELLIS, MARIANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 703 PACHECO AVENUE
 City SANTA CRUZ State CA Zip Code 95065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COUNTY OF SANTA CRUZ Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 35.00

Date of Receipt 04 / 05 / 2017
Transaction ID : INCA12500
 Amount of Each Receipt this Period 10.00
 Memo Item
 ERMK: MCCASKILL FOR MISSOURI

SUBTOTAL of Receipts This Page (optional).....	1015.00
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 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. ELLIS, MARIANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 703 PACHECO AVENUE

City SANTA CRUZ	State CA	Zip Code 95065
--------------------	-------------	-------------------

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

Name of Employer (for Individual) COUNTY OF SANTA CRUZ	Occupation (for Individual) ACCOUNTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
35.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 05 / 2017

Transaction ID : INCA12499

Amount of Each Receipt this Period
10.00

Memo Item
ERMK: TAMMY BALDWIN FOR SENATE

B. ELLIS, MARIANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 703 PACHECO AVENUE

City SANTA CRUZ	State CA	Zip Code 95065
--------------------	-------------	-------------------

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

Name of Employer (for Individual) COUNTY OF SANTA CRUZ	Occupation (for Individual) ACCOUNTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
35.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 05 / 2017

Transaction ID : INCA12502

Amount of Each Receipt this Period
5.00

Memo Item

C. ELLIS, MARIANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 703 PACHECO AVENUE

City SANTA CRUZ	State CA	Zip Code 95065
--------------------	-------------	-------------------

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

Name of Employer (for Individual) COUNTY OF SANTA CRUZ	Occupation (for Individual) ACCOUNTANT
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
35.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 05 / 2017

Transaction ID : INCA12501

Amount of Each Receipt this Period
10.00

Memo Item
ERMK: STABENOW FOR US SENATE

SUBTOTAL of Receipts This Page (optional).....	25.00
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 16 OF 130
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. FIELDS, WENDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25227 HATTON ROAD
 City CARMEL State CA Zip Code 93923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2017
Transaction ID : INCA12497
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: MCCASKILL FOR MISSOURI

B. FIELDS, WENDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25227 HATTON ROAD
 City CARMEL State CA Zip Code 93923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2017
Transaction ID : INCA12498
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: STABENOW FOR US SENATE

C. FIELDS, WENDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25227 HATTON ROAD
 City CARMEL State CA Zip Code 93923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2017
Transaction ID : INCA12496
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: TAMMY BALDWIN FOR SENATE

SUBTOTAL of Receipts This Page (optional).....	15.00
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 17 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. COXE, SIMONE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1401 EMERSON STREET
 City PALO ALTO State CA Zip Code 94301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 06 / 2017
Transaction ID : INCA12504
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 ERMK: STABENOW FOR US SENATE

B. COXE, SIMONE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1401 EMERSON STREET
 City PALO ALTO State CA Zip Code 94301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 06 / 2017
Transaction ID : INCA12505
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 ERMK: ELECTING WOMEN BAY AREA

C. DIBRIENZA, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 186 PARK AVE
 City PALO ALTO State CA Zip Code 94306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME Occupation (for Individual) EDUCATOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 06 / 2017
Transaction ID : INCA12503
 Amount of Each Receipt this Period
 250.00
 Memo Item
 ERMK: STABENOW FOR US SENATE

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: (check only one)	PAGE 18 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. MARCH, PAULA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 550 MONTGOMERY STREET, SUITE 650
 City SAN FRANCISCO State CA Zip Code 94111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEAVER SCHLENGER LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 06 / 2017
Transaction ID : INCA12507
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 ERMK: STABENOW FOR US SENATE

B. PEARL, AMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 555 SOUTH EL MONTE AVENUE
 City LOS ALTOS State CA Zip Code 94022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACORN FINANCIAL PLANNING Occupation (for Individual) INVESTMENT ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 06 / 2017
Transaction ID : INCA12508
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 ERMK: STABENOW FOR US SENATE

C. ROGERS, ESTELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 MARIGOLD LN
 City FORESTVILLE State CA Zip Code 95436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 06 / 2017
Transaction ID : INCA12506
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 ERMK: GILLIBRAND FOR SENATE

SUBTOTAL of Receipts This Page (optional).....	3000.00
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 19 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. KANG, JAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 FAY AVENUE
 City SAN CARLOS State CA Zip Code 94070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BROMIUM, INC. Occupation (for Individual) LAWYER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 04 / 07 / 2017
Transaction ID : INCA12509
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ERMK: STABENOW FOR US SENATE

B. KORNFELD, DANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1245 HAMILTON AVE
 City PALO ALTO State CA Zip Code 94301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 08 / 2017
Transaction ID : INCA12510
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ERMK: ELECTING WOMEN BAY AREA

C. KELSEY, KEENAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 HAWTHORNE AVE
 City LARKSPUR State CA Zip Code 94939
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 09 / 2017
Transaction ID : INCA12511
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ERMK: STABENOW FOR US SENATE

SUBTOTAL of Receipts This Page (optional).....	3000.00
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 20 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. CRYSTAL FOSTER, CATHERINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1636 CHANNING AVENUE
 City PALO ALTO State CA Zip Code 94303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WESTLY FOUNDATION Occupation (for Individual) EXECUTIVE DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2750.00

Date of Receipt 04 / 10 / 2017
Transaction ID : INCA12516
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ERMK: STABENOW FOR US SENATE

B. FRAHN, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1125 UNIVERSITY AVENUE
 City PALO ALTO State CA Zip Code 94301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) NOT EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4100.00

Date of Receipt 04 / 10 / 2017
Transaction ID : INCA12513
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ERMK: ELECTING WOMEN BAY AREA

C. FRAHN, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1125 UNIVERSITY AVENUE
 City PALO ALTO State CA Zip Code 94301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) NOT EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4100.00

Date of Receipt 04 / 10 / 2017
Transaction ID : INCA12512
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ERMK: STABENOW FOR US SENATE

SUBTOTAL of Receipts This Page (optional).....▶ 3000.00
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 21 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. FRAHN, ANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1125 UNIVERSITY AVENUE

City PALO ALTO	State CA	Zip Code 94301
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) NOT EMPLOYED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4100.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		10		2017

Transaction ID : INCA12514

Amount of Each Receipt this Period
100.00

Memo Item

B. LIDDLE, LISA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 15930 WEST RD

City LOS GATOS	State CA	Zip Code 95030
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) VOLUNTEER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1005.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		10		2017

Transaction ID : INCA12518

Amount of Each Receipt this Period
1000.00

Memo Item
ERMK: STABENOW FOR US SENATE

C. LIDDLE, LISA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 15930 WEST RD

City LOS GATOS	State CA	Zip Code 95030
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) VOLUNTEER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1005.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		10		2017

Transaction ID : INCA12519

Amount of Each Receipt this Period
5.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1105.00
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 22 OF 130
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. MOORE, COURTNEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1444 VALLEJO STREET APT. 2
 City SAN FRANCISCO State CA Zip Code 94109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RODAN + FIELDS Occupation (for Individual) MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 04 / 10 / 2017
Transaction ID : INCA12515
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ERMK: STABENOW FOR US SENATE

B. STEELE, ANDREA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 513 A SIMONDS LOOP
 City SAN FRANCISCO State CA Zip Code 94129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EMERGE AMERICA Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 10 / 2017
Transaction ID : INCA12517
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ERMK: STABENOW FOR US SENATE

C. BASS, ROBIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3722 AVE J
 City BROOKLYN State NY Zip Code 11210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 150.00

Date of Receipt 04 / 11 / 2017
Transaction ID : INCA12526
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: KLOBUCHAR FOR MINNESOTA

SUBTOTAL of Receipts This Page (optional)..... ▶ 2005.00
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 23 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. BASS, ROBIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3722 AVE J
 City BROOKLYN State NY Zip Code 11210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 150.00

Date of Receipt 04 / 11 / 2017
Transaction ID : INCA12527
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: STABENOW FOR US SENATE

B. BASS, ROBIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3722 AVE J
 City BROOKLYN State NY Zip Code 11210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 150.00

Date of Receipt 04 / 11 / 2017
Transaction ID : INCA12524
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: FEINSTEIN FOR SENATE 2018

C. BASS, ROBIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3722 AVE J
 City BROOKLYN State NY Zip Code 11210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 150.00

Date of Receipt 04 / 11 / 2017
Transaction ID : INCA12528
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: FRIENDS OF MARIA

SUBTOTAL of Receipts This Page (optional).....▶ 15.00
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 24 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. BASS, ROBIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3722 AVE J
 City BROOKLYN State NY Zip Code 11210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2017
Transaction ID : INCA12525
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: GILLIBRAND FOR SENATE

B. BASS, ROBIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3722 AVE J
 City BROOKLYN State NY Zip Code 11210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2017
Transaction ID : INCA12531
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: HEIDI FOR SENATE

C. BASS, ROBIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3722 AVE J
 City BROOKLYN State NY Zip Code 11210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2017
Transaction ID : INCA12530
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: FRIENDS OF MAZIE HIRONO

SUBTOTAL of Receipts This Page (optional).....	15.00
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 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<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)
WOMENCOUNT PAC

A. BASS, ROBIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3722 AVE J
 City BROOKLYN State NY Zip Code 11210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2017
Transaction ID : INCA12529
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: MCCASKILL FOR MISSOURI

B. BASS, ROBIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3722 AVE J
 City BROOKLYN State NY Zip Code 11210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2017
Transaction ID : INCA12532
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: TAMMY BALDWIN FOR SENATE

C. BASS, ROBIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3722 AVE J
 City BROOKLYN State NY Zip Code 11210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2017
Transaction ID : INCA12523
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: ELIZABETH FOR MA

SUBTOTAL of Receipts This Page (optional).....	15.00
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 26 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. HELMLINGER, ROBYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 307 SCOTT ST.
 City SAN FRANCISCO State CA Zip Code 94117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SQUIRE PATTON BOGGS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2017
Transaction ID : INCA12520
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 ERMK: TAMMY BALDWIN FOR SENATE

B. KRAUS, MICHELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 116
 City PALO ALTO State CA Zip Code 94302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TECH & POLITICS Occupation (for Individual) MANAGING PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2017
Transaction ID : INCA12533
 Amount of Each Receipt this Period
 50.00
 Memo Item
 ERMK: STABENOW FOR US SENATE

C. O'SULLIVAN, KATE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 880 CASTRO STREET
 City SAN FRANCISCO State CA Zip Code 94114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MICROSOFT Occupation (for Individual) CORPORATE, EXTERNAL AND LEGAL
 Receipt For: 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 / 11 / 2017
Transaction ID : INCA12521
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 ERMK: STABENOW FOR US SENATE

SUBTOTAL of Receipts This Page (optional).....	2050.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<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)
WOMENCOUNT PAC

A. STIMMLER, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 758 CENTER DRIVE
 City PALO ALTO State CA Zip Code 94301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GOOGLE Occupation (for Individual) RESEARCH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 04 / 11 / 2017
Transaction ID : INCA12522
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ERMK: STABENOW FOR US SENATE

B. HONIG, LISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 320 RUTLEDGE STREET
 City SAN FRANCISCO State CA Zip Code 94110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 04 / 12 / 2017
Transaction ID : INCA12535
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ERMK: STABENOW FOR US SENATE

C. LOULAN, JOANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 151 LOS TRANCOS CIRCLE
 City PORTOLA VALLEY State CA Zip Code 94028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME Occupation (for Individual) COUNSELOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 04 / 12 / 2017
Transaction ID : INCA12534
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ERMK: STABENOW FOR US SENATE

SUBTOTAL of Receipts This Page (optional).....	3000.00
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 28 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. SCHROEDEL, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 320 RUTLEDGE STREET
 City SAN FRANCISCO State CA Zip Code 94110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME Occupation (for Individual) POLITICAL ORGANIZER; PRIVATE IN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 12 / 2017
Transaction ID : INCA12536
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 ERMK: STABENOW FOR US SENATE

B. COHEN, TOD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 839 MELVILLE AVENUE
 City PALO ALTO State CA Zip Code 94301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STUBHUB Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 13 / 2017
Transaction ID : INCA12539
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 ERMK: STABENOW FOR US SENATE

C. HUNT-SCOTT, SHANNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16348 AZTEC RIDGE DR
 City LOS GATOS State CA Zip Code 95030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE SCOTT FOUNDATION Occupation (for Individual) PRESIDENT AND CO-FOUNDER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 4529.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 13 / 2017
Transaction ID : INCA12537
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 ERMK: STABENOW FOR US SENATE

SUBTOTAL of Receipts This Page (optional).....	3000.00
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 29 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. HUNT-SCOTT, SHANNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16348 AZTEC RIDGE DR
 City LOS GATOS State CA Zip Code 95030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE SCOTT FOUNDATION Occupation (for Individual) PRESIDENT AND CO-FOUNDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4529.80

Date of Receipt **04 / 13 / 2017**
Transaction ID : INCA12538
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MASON, STACY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 839 MELVILLE AVENUE
 City PALO ALTO State CA Zip Code 94301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WOMENCOUNT Occupation (for Individual) EXECUTIVE DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2995.00

Date of Receipt **04 / 13 / 2017**
Transaction ID : INCA12540
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ERMK: STABENOW FOR US SENATE

C. SILVERMAN, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 505 MONTGOMERY STREET SUITE 2000
 City SAN FRANCISCO State CA Zip Code 94111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LATHAM & WATKINS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5705.00

Date of Receipt **04 / 14 / 2017**
Transaction ID : INCA12542
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1105.00
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 30 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. SILVERMAN, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 505 MONTGOMERY STREET SUITE 2000
 City SAN FRANCISCO State CA Zip Code 94111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LATHAM & WATKINS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5705.00

Date of Receipt **04 / 14 / 2017**
Transaction ID : INCA12541
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ERMK: STABENOW FOR US SENATE

B. JASPER, TARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 410 MATHESON ST
 City HEALDSBURG State CA Zip Code 95448
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FORAGED Occupation (for Individual) FOUNDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **04 / 15 / 2017**
Transaction ID : INCA12543
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ERMK: GILLIBRAND FOR SENATE

C. SCHILLACE, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 PORTOLA GREEN CIRCLE
 City PORTOLA VALLEY State CA Zip Code 94028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GOOGLE Occupation (for Individual) VP ENGINEERING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **04 / 17 / 2017**
Transaction ID : INCA12544
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ERMK: STABENOW FOR US SENATE

SUBTOTAL of Receipts This Page (optional).....	3000.00
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 31 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. KAMRAN, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 410 CERVANTES ROAD
 City PORTOLA VALLEY State CA Zip Code 94028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 9810.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 18 / 2017
Transaction ID : INCA12547
 Amount of Each Receipt this Period 5.00
 Memo Item

B. KAMRAN, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 410 CERVANTES ROAD
 City PORTOLA VALLEY State CA Zip Code 94028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 9810.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 18 / 2017
Transaction ID : INCA12548
 Amount of Each Receipt this Period 1700.00
 Memo Item
 ERMK: MCCASKILL FOR MISSOURI

C. KAMRAN, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 410 CERVANTES ROAD
 City PORTOLA VALLEY State CA Zip Code 94028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 9810.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 18 / 2017
Transaction ID : INCA12546
 Amount of Each Receipt this Period 2700.00
 Memo Item
 ERMK: STABENOW FOR US SENATE

SUBTOTAL of Receipts This Page (optional).....	4405.00
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 32 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. KAMRAN, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 410 CERVANTES ROAD
 City PORTOLA VALLEY State CA Zip Code 94028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 9810.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 18 / 2017
Transaction ID : INCA12550
 Amount of Each Receipt this Period
 1700.00
 Memo Item
 ERMK: GILLIBRAND FOR SENATE

B. KAMRAN, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 410 CERVANTES ROAD
 City PORTOLA VALLEY State CA Zip Code 94028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 9810.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 18 / 2017
Transaction ID : INCA12549
 Amount of Each Receipt this Period
 5.00
 Memo Item

C. SCHROEDER, SHEILA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 114 28TH AVENUE
 City SAN FRANCISCO State CA Zip Code 94121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOSAIC FINANCIAL PARTNERS Occupation (for Individual) DIRECTOR OF CLIENT DEVELOPMEN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 18 / 2017
Transaction ID : INCA12545
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 ERMK: STABENOW FOR US SENATE

SUBTOTAL of Receipts This Page (optional).....	2705.00
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 33 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. HOPKINS, DEBBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 OLD BENNETT TRAIL
 City GLEN ELLEN State CA Zip Code 95442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME Occupation (for Individual) INDEPENDENT BOARD MEMBER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 19 / 2017
Transaction ID : INCA12568
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ERMK: GILLIBRAND FOR SENATE

B. HUGHES, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 383 PEARL DRIVE
 City LIVERMORE State CA Zip Code 94550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME Occupation (for Individual) LICENSED MARRIAGE AND FAMILY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 160.00

Date of Receipt 04 / 19 / 2017
Transaction ID : INCA12561
 Amount of Each Receipt this Period 10.00
 Memo Item
 ERMK: BONAMICI FOR CONGRESS

C. HUGHES, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 383 PEARL DRIVE
 City LIVERMORE State CA Zip Code 94550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME Occupation (for Individual) LICENSED MARRIAGE AND FAMILY T
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 160.00

Date of Receipt 04 / 19 / 2017
Transaction ID : INCA12562
 Amount of Each Receipt this Period 10.00
 Memo Item
 ERMK: TULSI FOR HAWAII

SUBTOTAL of Receipts This Page (optional).....	1020.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. HUGHES, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 383 PEARL DRIVE
 City LIVERMORE State CA Zip Code 94550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME Occupation (for Individual) LICENSED MARRIAGE AND FAMILY T
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 160.00

Date of Receipt 04 / 19 / 2017
Transaction ID : INCA12563
 Amount of Each Receipt this Period 10.00
 Memo Item
 ERMK: TAMMY FOR ILLINOIS

B. HUGHES, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 383 PEARL DRIVE
 City LIVERMORE State CA Zip Code 94550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME Occupation (for Individual) LICENSED MARRIAGE AND FAMILY T
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 160.00

Date of Receipt 04 / 19 / 2017
Transaction ID : INCA12560
 Amount of Each Receipt this Period 10.00
 Memo Item
 ERMK: CATHERINE CORTEZ MASTO FOR SENATE

C. HUGHES, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 383 PEARL DRIVE
 City LIVERMORE State CA Zip Code 94550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME Occupation (for Individual) LICENSED MARRIAGE AND FAMILY T
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 160.00

Date of Receipt 04 / 19 / 2017
Transaction ID : INCA12559
 Amount of Each Receipt this Period 10.00
 Memo Item
 ERMK: JULIA BROWNLEY FOR CONGRESS

SUBTOTAL of Receipts This Page (optional).....▶ 30.00
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 35 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<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)
WOMENCOUNT PAC

A. HUGHES, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 383 PEARL DRIVE
 City LIVERMORE State CA Zip Code 94550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME Occupation (for Individual) LICENSED MARRIAGE AND FAMILY T
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 160.00

Date of Receipt 04 / 19 / 2017
Transaction ID : INCA12558
 Amount of Each Receipt this Period 10.00
 Memo Item
 ERMK: THE NIKI TSONGAS COMMITTEE

B. MARDER, SHELLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 DORANRES AVE
 City SAN FRANCISCO State CA Zip Code 94116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KAISER PERMANENTE Occupation (for Individual) MD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 75.00

Date of Receipt 04 / 19 / 2017
Transaction ID : INCA12564
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: THE NIKI TSONGAS COMMITTEE

C. MARDER, SHELLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 DORANRES AVE
 City SAN FRANCISCO State CA Zip Code 94116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KAISER PERMANENTE Occupation (for Individual) MD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 75.00

Date of Receipt 04 / 19 / 2017
Transaction ID : INCA12566
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: CATHERINE CORTEZ MASTO FOR SENATE

SUBTOTAL of Receipts This Page (optional).....▶ 20.00
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 36 OF 130
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. MARDER, SHELLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 DORANRES AVE
 City SAN FRANCISCO State CA Zip Code 94116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KAISER PERMANENTE Occupation (for Individual) MD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 75.00

Date of Receipt 04 / 19 / 2017
Transaction ID : INCA12565
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: JULIA BROWNLEY FOR CONGRESS

B. MARDER, SHELLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 DORANRES AVE
 City SAN FRANCISCO State CA Zip Code 94116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KAISER PERMANENTE Occupation (for Individual) MD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 75.00

Date of Receipt 04 / 19 / 2017
Transaction ID : INCA12567
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: TAMMY FOR ILLINOIS

C. MATTES, MELINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 CEDAR PLACE
 City EAST PALO ALTO State CA Zip Code 94303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAUSD Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt 04 / 19 / 2017
Transaction ID : INCA12569
 Amount of Each Receipt this Period 50.00
 Memo Item
 ERMK: TAMMY BALDWIN FOR SENATE

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: (check only one)	PAGE 37 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. WEIL, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2260 NORTH POINT ST, #3

City SAN FRANCISCO	State CA	Zip Code 94123
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
35.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		19		2017

Transaction ID : INCA12555

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: TULSI FOR HAWAII'

B. WEIL, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2260 NORTH POINT ST, #3

City SAN FRANCISCO	State CA	Zip Code 94123
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
35.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		19		2017

Transaction ID : INCA12551

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: THE NIKI TSONGAS COMMITTEE

C. WEIL, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2260 NORTH POINT ST, #3

City SAN FRANCISCO	State CA	Zip Code 94123
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
35.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		19		2017

Transaction ID : INCA12556

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: TAMMY FOR ILLINOIS

SUBTOTAL of Receipts This Page (optional).....	15.00
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 38 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. WEIL, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2260 NORTH POINT ST, #3
 City SAN FRANCISCO State CA Zip Code 94123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 35.00

Date of Receipt 04 / 19 / 2017
Transaction ID : INCA12552
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: JULIA BROWNLEY FOR CONGRESS

B. WEIL, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2260 NORTH POINT ST, #3
 City SAN FRANCISCO State CA Zip Code 94123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 35.00

Date of Receipt 04 / 19 / 2017
Transaction ID : INCA12553
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: CATHERINE CORTEZ MASTO FOR SENATE

C. WEIL, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2260 NORTH POINT ST, #3
 City SAN FRANCISCO State CA Zip Code 94123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 35.00

Date of Receipt 04 / 19 / 2017
Transaction ID : INCA12554
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: BONAMICI FOR CONGRESS

SUBTOTAL of Receipts This Page (optional).....	15.00
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 39 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. WEIL, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2260 NORTH POINT ST, #3
 City SAN FRANCISCO State CA Zip Code 94123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 35.00

Date of Receipt 04 / 19 / 2017
Transaction ID : INCA12557
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CAIN, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 226 WOODLAND ROAD
 City KENTFIELD State CA Zip Code 94904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IAVI Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt 04 / 20 / 2017
Transaction ID : INCA12570
 Amount of Each Receipt this Period 50.00
 Memo Item
 ERMK: TAMMY BALDWIN FOR SENATE

C. GARRISON, EMILY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3604 JARVIS AVE.
 City SAN JOSE State CA Zip Code 95118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PALO ALTO UNIFIED SCHOOL DISTRICT Occupation (for Individual) EDUCATOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt 04 / 20 / 2017
Transaction ID : INCA12571
 Amount of Each Receipt this Period 50.00
 Memo Item
 ERMK: TAMMY BALDWIN FOR SENATE

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. HENDREN, ANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2655 SW RAVENVIEW DRIVE

City PORTLAND	State OR	Zip Code 97201
------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME	Occupation (for Individual) WRITER
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
70.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		20		2017

Transaction ID : INCA12586

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: NITA LOWEY FOR CONGRESS

B. HENDREN, ANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2655 SW RAVENVIEW DRIVE

City PORTLAND	State OR	Zip Code 97201
------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME	Occupation (for Individual) WRITER
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
70.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		20		2017

Transaction ID : INCA12588

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: LOUISE SLAUGHTER RE-ELECTION COMMITTEE

C. HENDREN, ANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2655 SW RAVENVIEW DRIVE

City PORTLAND	State OR	Zip Code 97201
------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME	Occupation (for Individual) WRITER
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
70.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		20		2017

Transaction ID : INCA12587

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: ANNA ESHOO FOR CONGRESS

SUBTOTAL of Receipts This Page (optional).....	15.00
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 41 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. HENDREN, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2655 SW RAVENVIEW DRIVE
 City PORTLAND State OR Zip Code 97201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME Occupation (for Individual) WRITER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 70.00

Date of Receipt 04 / 20 / 2017
Transaction ID : INCA12584
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: JUDY CHU FOR CONGRESS

B. HENDREN, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2655 SW RAVENVIEW DRIVE
 City PORTLAND State OR Zip Code 97201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME Occupation (for Individual) WRITER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 70.00

Date of Receipt 04 / 20 / 2017
Transaction ID : INCA12585
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: BONAMICI FOR CONGRESS

C. MADISON, IVORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 725 WEBSTER ST
 City SAN FRANCISCO State CA Zip Code 94117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASTOR & LENOX Occupation (for Individual) PUBLISHER, EDITOR, WRITER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 30.00

Date of Receipt 04 / 20 / 2017
Transaction ID : INCA12583
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 15.00
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 42 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. MADISON, IVORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 725 WEBSTER ST
 City SAN FRANCISCO State CA Zip Code 94117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASTOR & LENOX Occupation (for Individual) PUBLISHER, EDITOR, WRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 30.00

Date of Receipt 04 / 20 / 2017
Transaction ID : INCA12581
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: ANNA ESHOO FOR CONGRESS

B. MADISON, IVORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 725 WEBSTER ST
 City SAN FRANCISCO State CA Zip Code 94117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASTOR & LENOX Occupation (for Individual) PUBLISHER, EDITOR, WRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 30.00

Date of Receipt 04 / 20 / 2017
Transaction ID : INCA12580
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: NITA LOWEY FOR CONGRESS

C. MADISON, IVORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 725 WEBSTER ST
 City SAN FRANCISCO State CA Zip Code 94117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASTOR & LENOX Occupation (for Individual) PUBLISHER, EDITOR, WRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 30.00

Date of Receipt 04 / 20 / 2017
Transaction ID : INCA12582
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: LOUISE SLAUGHTER RE-ELECTION COMMITTEE

SUBTOTAL of Receipts This Page (optional).....▶ 15.00
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 43 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. MADISON, IVORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 725 WEBSTER ST
 City SAN FRANCISCO State CA Zip Code 94117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASTOR & LENOX Occupation (for Individual) PUBLISHER, EDITOR, WRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 30.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 20 / 2017
Transaction ID : INCA12579
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: BONAMICI FOR CONGRESS

B. MADISON, IVORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 725 WEBSTER ST
 City SAN FRANCISCO State CA Zip Code 94117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASTOR & LENOX Occupation (for Individual) PUBLISHER, EDITOR, WRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 30.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 20 / 2017
Transaction ID : INCA12578
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: JUDY CHU FOR CONGRESS

C. STEWART, SUSANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 421, POPPY PLACE
 City MTN. VIEW State CA Zip Code 94043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 90.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 20 / 2017
Transaction ID : INCA12572
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: KLOBUCHAR FOR MINNESOTA

SUBTOTAL of Receipts This Page (optional).....	15.00
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 44 OF 130
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<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)
WOMENCOUNT PAC

A. STEWART, SUSANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 421, POPPY PLACE
 City MTN. VIEW State CA Zip Code 94043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 90.00

Date of Receipt 04 / 20 / 2017
Transaction ID : INCA12574
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: ELIZABETH FOR MA

B. STEWART, SUSANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 421, POPPY PLACE
 City MTN. VIEW State CA Zip Code 94043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 90.00

Date of Receipt 04 / 20 / 2017
Transaction ID : INCA12573
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: KAMALA HARRIS FOR SENATE

C. STEWART, SUSANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 421, POPPY PLACE
 City MTN. VIEW State CA Zip Code 94043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 90.00

Date of Receipt 04 / 20 / 2017
Transaction ID : INCA12575
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: TAMMY BALDWIN FOR SENATE

SUBTOTAL of Receipts This Page (optional).....	15.00
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 45 OF 130
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. STEWART, SUSANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 421, POPPY PLACE
 City MTN. VIEW State CA Zip Code 94043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 90.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 20 / 2017
Transaction ID : INCA12577
 Amount of Each Receipt this Period 5.00
 Memo Item

B. STEWART, SUSANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 421, POPPY PLACE
 City MTN. VIEW State CA Zip Code 94043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 90.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 20 / 2017
Transaction ID : INCA12576
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: GILLIBRAND FOR SENATE

C. RAO, AMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 288 SEALE AVE
 City PALO ALTO State CA Zip Code 94301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IAS Occupation (for Individual) CEO
 Receipt For: 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 / 2017
Transaction ID : INCA12589
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ERMK: STABENOW FOR US SENATE

SUBTOTAL of Receipts This Page (optional).....	1010.00
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 46 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. GARLINGHOUSE, MEG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 651 MENLO OAKS DRIVE
 City MENLO PARK State CA Zip Code 94025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LINKEDIN Occupation (for Individual) HEAD OF SOCIAL IMPACT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2017
Transaction ID : INCA12590
 Amount of Each Receipt this Period
 100.00
 Memo Item
 ERMK: TAMMY BALDWIN FOR SENATE

B. MIRANDA, MELISSA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 WILLOW RD
 City MENLO PARK State CA Zip Code 94025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FOUNDATION CAPITAL Occupation (for Individual) ENTREPRENEUR IN RESIDENCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2017
Transaction ID : INCA12591
 Amount of Each Receipt this Period
 50.00
 Memo Item
 ERMK: TAMMY BALDWIN FOR SENATE

C. BRESLER, GIDEON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1988 MLK JR WAY, 409A
 City BERKELEY State CA Zip Code 94704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WCS Occupation (for Individual) PHILANTHROPY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 105.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2017
Transaction ID : INCA12596
 Amount of Each Receipt this Period
 100.00
 Memo Item
 ERMK: TAMMY BALDWIN FOR SENATE

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. BRESLER, GIDEON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1988 MLK JR WAY, 409A
 City BERKELEY State CA Zip Code 94704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WCS Occupation (for Individual) PHILANTHROPY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 105.00

Date of Receipt 04 / 27 / 2017
Transaction ID : INCA12597
 Amount of Each Receipt this Period 5.00
 Memo Item

B. CRYSTAL FOSTER, CATHERINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1636 CHANNING AVENUE
 City PALO ALTO State CA Zip Code 94303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WESTLY FOUNDATION Occupation (for Individual) EXECUTIVE DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2750.00

Date of Receipt 04 / 27 / 2017
Transaction ID : INCA12594
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ERMK: TAMMY BALDWIN FOR SENATE

C. LESLIE, SARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 571 COTTON STREET
 City MENLO PARK State CA Zip Code 94025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IN OTHER WORDS Occupation (for Individual) MARKETING STRATEGIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt 04 / 27 / 2017
Transaction ID : INCA12593
 Amount of Each Receipt this Period 50.00
 Memo Item
 ERMK: TAMMY BALDWIN FOR SENATE

SUBTOTAL of Receipts This Page (optional).....	1055.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. WALLACE, MARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 433 MELVILLE AVE
 City PALO ALTO State CA Zip Code 94301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) NOT EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3040.00

Date of Receipt 04 / 27 / 2017
Transaction ID : INCA12592
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ERMK: STABENOW FOR US SENATE

B. WELLER, SARAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 UPPER TERRACE #1
 City SAN FRANCISCO State CA Zip Code 94117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) STUDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt 04 / 27 / 2017
Transaction ID : INCA12595
 Amount of Each Receipt this Period 50.00
 Memo Item
 ERMK: TAMMY BALDWIN FOR SENATE

C. WOODS, LAURE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1240 WESTRIDGE DRIVE
 City PORTOLA VALLEY State CA Zip Code 94028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 04 / 27 / 2017
Transaction ID : INCA12598
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ERMK: TAMMY BALDWIN FOR SENATE

SUBTOTAL of Receipts This Page (optional).....	2050.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 49 OF 130
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. LA FONTAINE FIORE, KRISTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1724 20TH STREET
 City SAN FRANCISCO State CA Zip Code 94107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME Occupation (for Individual) PERSONAL TRAINER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **04 / 28 / 2017**
Transaction ID : INCA12604
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: FRIENDS OF MARIA

B. LA FONTAINE FIORE, KRISTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1724 20TH STREET
 City SAN FRANCISCO State CA Zip Code 94107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME Occupation (for Individual) PERSONAL TRAINER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **04 / 28 / 2017**
Transaction ID : INCA12608
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: TAMMY BALDWIN FOR SENATE

C. LA FONTAINE FIORE, KRISTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1724 20TH STREET
 City SAN FRANCISCO State CA Zip Code 94107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME Occupation (for Individual) PERSONAL TRAINER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **04 / 28 / 2017**
Transaction ID : INCA12605
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: MCCASKILL FOR MISSOURI

SUBTOTAL of Receipts This Page (optional).....	15.00
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 50 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. LA FONTAINE FIORE, KRISTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1724 20TH STREET
 City SAN FRANCISCO State CA Zip Code 94107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME Occupation (for Individual) PERSONAL TRAINER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **04 / 28 / 2017**
Transaction ID : INCA12607
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: HEIDI FOR SENATE

B. LA FONTAINE FIORE, KRISTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1724 20TH STREET
 City SAN FRANCISCO State CA Zip Code 94107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME Occupation (for Individual) PERSONAL TRAINER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **04 / 28 / 2017**
Transaction ID : INCA12606
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: FRIENDS OF MAZIE HIRONO

C. LA FONTAINE FIORE, KRISTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1724 20TH STREET
 City SAN FRANCISCO State CA Zip Code 94107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME Occupation (for Individual) PERSONAL TRAINER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 250.00

Date of Receipt **04 / 28 / 2017**
Transaction ID : INCA12602
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: KLOBUCHAR FOR MINNESOTA

SUBTOTAL of Receipts This Page (optional).....	15.00
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 51 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. LA FONTAINE FIORE, KRISTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1724 20TH STREET
 City SAN FRANCISCO State CA Zip Code 94107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME Occupation (for Individual) PERSONAL TRAINER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 28 / 2017
Transaction ID : INCA12603
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: STABENOW FOR US SENATE

B. LA FONTAINE FIORE, KRISTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1724 20TH STREET
 City SAN FRANCISCO State CA Zip Code 94107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME Occupation (for Individual) PERSONAL TRAINER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 28 / 2017
Transaction ID : INCA12600
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: FEINSTEIN FOR SENATE 2018

C. LA FONTAINE FIORE, KRISTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1724 20TH STREET
 City SAN FRANCISCO State CA Zip Code 94107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME Occupation (for Individual) PERSONAL TRAINER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 28 / 2017
Transaction ID : INCA12599
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: ELIZABETH FOR MA

SUBTOTAL of Receipts This Page (optional).....	15.00
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 52 OF 130 (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)
WOMENCOUNT PAC

A. LA FONTAINE FIORE, KRISTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1724 20TH STREET

City SAN FRANCISCO	State CA	Zip Code 94107
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME	Occupation (for Individual) PERSONAL TRAINER
---	---

Receipt For:
 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
 04 / 28 / 2017

Transaction ID : INCA12601

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: GILLIBRAND FOR SENATE

B. WALLACE, MARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 433 MELVILLE AVE

City PALO ALTO	State CA	Zip Code 94301
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) NOT EMPLOYED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3040.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 29 / 2017

Transaction ID : INCA12609

Amount of Each Receipt this Period
1000.00

Memo Item
ERMK: TAMMY BALDWIN FOR SENATE

C. ZACK, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 ROCK ROAD

City KENTFIELD	State CA	Zip Code 94904
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) COMMUNITY VOLUNTEER ACTIVIST
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017

Transaction ID : INCA12610

Amount of Each Receipt this Period
1000.00

Memo Item
ERMK: TAMMY BALDWIN FOR SENATE

SUBTOTAL of Receipts This Page (optional).....	2005.00
TOTAL This Period (last page this line number only).....	49565.00

**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 53 OF 130
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. FEINSTEIN FOR SENATE 2018

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 918 PENNSYLVANIA AVE SE

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00539890

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
41.93

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2017

Transaction ID : INCA12741

Amount of Each Receipt this Period
0.20

Memo Item

B. FRIENDS OF MARIA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 12740

City SEATTLE	State WA	Zip Code 98111
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00349506

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
56.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2017

Transaction ID : INCA12743

Amount of Each Receipt this Period
0.20

Memo Item

C. FRIENDS OF MAZIE HIRONO

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 677

City HONOLULU	State HI	Zip Code 96809
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00420760

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
41.93

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2017

Transaction ID : INCA12745

Amount of Each Receipt this Period
0.20

Memo Item

SUBTOTAL of Receipts This Page (optional).....	0.60
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 54 OF 130
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. GILLIBRAND FOR SENATE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 313 C STREET, NE

City WASHINGTON	State DC	Zip Code 20002
FEC ID number of contributing federal political committee. C C00413914		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2597.40

Date of Receipt
MM / DD / YYYY
04 / 05 / 2017
Transaction ID : INCA12747

Amount of Each Receipt this Period
40.00

Memo Item

B. MCCASKILL SENATE FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 300077

City ST LOUIS	State MO	Zip Code 63130
FEC ID number of contributing federal political committee. C C00577148		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1845.00

Date of Receipt
MM / DD / YYYY
04 / 05 / 2017
Transaction ID : INCA12400

Amount of Each Receipt this Period
40.00

Memo Item

C. MCCASKILL SENATE FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 300077

City ST LOUIS	State MO	Zip Code 63130
FEC ID number of contributing federal political committee. C C00577148		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1845.00

Date of Receipt
MM / DD / YYYY
04 / 05 / 2017
Transaction ID : INCA12744

Amount of Each Receipt this Period
1.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	81.00
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 55 OF 130
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. STABENOW FOR US SENATE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 4945

City EAST LANSING	State MI	Zip Code 48826
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00344473

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1445.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2017

Transaction ID : INCA12399

Amount of Each Receipt this Period
120.00

Memo Item

B. STABENOW FOR US SENATE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 4945

City EAST LANSING	State MI	Zip Code 48826
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00344473

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1445.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2017

Transaction ID : INCA12742

Amount of Each Receipt this Period
121.00

Memo Item

C. TAMMY BALDWIN FOR SENATE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 696

City MADISON	State WI	Zip Code 53701
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00326801

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
231.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2017

Transaction ID : INCA12746

Amount of Each Receipt this Period
160.80

Memo Item

SUBTOTAL of Receipts This Page (optional).....	401.80
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 56 OF 130
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. ELECTING WOMEN SAN FRANCISCO PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 393 7TH AVENUE, SUITE 301

City SAN FRANCISCO	State CA	Zip Code 94118
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00585687

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		12		2017

Transaction ID : INCA12758

Amount of Each Receipt this Period
80.00

Memo Item

B. ELECTING WOMEN SAN FRANCISCO PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 393 7TH AVENUE, SUITE 301

City SAN FRANCISCO	State CA	Zip Code 94118
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00585687

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		12		2017

Transaction ID : INCA12759

Amount of Each Receipt this Period
40.00

Memo Item

C. ELIZABETH FOR MA INC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 290568

City BOSTON	State MA	Zip Code 02129
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00500843

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
21.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		12		2017

Transaction ID : INCA12748

Amount of Each Receipt this Period
0.20

Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.20
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 57 OF 130
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. FEINSTEIN FOR SENATE 2018
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 918 PENNSYLVANIA AVE SE

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00539890

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
41.93

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2017

Transaction ID : INCA12749

Amount of Each Receipt this Period
0.20

Memo Item

B. FRIENDS OF MARIA
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 12740

City SEATTLE	State WA	Zip Code 98111
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00349506

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
56.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2017

Transaction ID : INCA12752

Amount of Each Receipt this Period
0.20

Memo Item

C. FRIENDS OF MAZIE HIRONO
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 677

City HONOLULU	State HI	Zip Code 96809
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FEC ID number of contributing federal political committee. **C** C00420760

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
41.93

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2017

Transaction ID : INCA12754

Amount of Each Receipt this Period
0.20

Memo Item

SUBTOTAL of Receipts This Page (optional).....	0.60
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 58 OF 130
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. GILLIBRAND FOR SENATE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 313 C STREET, NE

City WASHINGTON	State DC	Zip Code 20002
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00413914

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2597.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		12		2017

Transaction ID : INCA12757

Amount of Each Receipt this Period
40.20

Memo Item

B. HEIDI FOR SENATE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1577

City BISMARCK	State ND	Zip Code 58502
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00505552

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		12		2017

Transaction ID : INCA12755

Amount of Each Receipt this Period
0.20

Memo Item

C. KLOBUCHAR FOR MINNESOTA
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 4146

City ST PAUL	State MN	Zip Code 55104
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00431353

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
50.93

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		12		2017

Transaction ID : INCA12750

Amount of Each Receipt this Period
0.20

Memo Item

SUBTOTAL of Receipts This Page (optional).....	40.60
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 59 OF 130
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. MCCASKILL SENATE FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 300077

City ST LOUIS	State MO	Zip Code 63130
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00577148

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1845.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2017

Transaction ID : INCA12753

Amount of Each Receipt this Period

0.80

 Memo Item

B. STABENOW FOR US SENATE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 4945

City EAST LANSING	State MI	Zip Code 48826
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FEC ID number of contributing federal political committee. **C** C00344473

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1445.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2017

Transaction ID : INCA12751

Amount of Each Receipt this Period

492.80

 Memo Item

C. TAMMY BALDWIN FOR SENATE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 696

City MADISON	State WI	Zip Code 53701
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00326801

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
231.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2017

Transaction ID : INCA12756

Amount of Each Receipt this Period

40.80

 Memo Item

SUBTOTAL of Receipts This Page (optional).....	534.40
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 60 OF 130
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. GILLIBRAND FOR SENATE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 313 C STREET, NE

City WASHINGTON	State DC	Zip Code 20002
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00413914

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2597.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		19		2017

Transaction ID : INCA12762

Amount of Each Receipt this Period
108.00

Memo Item

B. MCCASKILL SENATE FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 300077

City ST LOUIS	State MO	Zip Code 63130
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00577148

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1845.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		19		2017

Transaction ID : INCA12761

Amount of Each Receipt this Period
68.00

Memo Item

C. STABENOW FOR US SENATE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 4945

City EAST LANSING	State MI	Zip Code 48826
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00344473

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1445.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		19		2017

Transaction ID : INCA12760

Amount of Each Receipt this Period
468.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	644.00
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 61 OF 130
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. ANNA ESHOO FOR CONGRESS
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 555 CAPITOL MALL, SUITE 1425

City SACRAMENTO	State CA	Zip Code 95814
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00258475

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
-0.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		26		2017

Transaction ID : INCA12777

Amount of Each Receipt this Period
0.40

Memo Item

B. BONAMICI FOR CONGRESS
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1632

City BEAVERTON	State OR	Zip Code 97075
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00500421

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		26		2017

Transaction ID : INCA12773

Amount of Each Receipt this Period
1.00

Memo Item

C. CATHERINE CORTEZ MASTO FOR SENATE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8020 SOUTH RAINBOW BLVD. SUITE 100

City LAS VEGAS	State NV	Zip Code 89139
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00575548

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
0.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		26		2017

Transaction ID : INCA12771

Amount of Each Receipt this Period
0.80

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2.20
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 62 OF 130
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. ELIZABETH FOR MA INC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 290568

City BOSTON	State MA	Zip Code 02129
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00500843

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
21.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2017

Transaction ID : INCA12763

Amount of Each Receipt this Period

0.20

 Memo Item

B. GILLIBRAND FOR SENATE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 313 C STREET, NE

City WASHINGTON	State DC	Zip Code 20002
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00413914

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2597.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2017

Transaction ID : INCA12768

Amount of Each Receipt this Period

40.20

 Memo Item

C. JUDY CHU FOR CONGRESS
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16633 VENTURA BLVD # 1008

City ENCINO	State CA	Zip Code 91436
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00458125

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2017

Transaction ID : INCA12775

Amount of Each Receipt this Period

0.40

 Memo Item

SUBTOTAL of Receipts This Page (optional).....	40.80
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 63 OF 130
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. JULIA BROWNLEY FOR CONGRESS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 2018

City THOUSAND OAKS	State CA	Zip Code 91358
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00513077

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2017

Transaction ID : INCA12770

Amount of Each Receipt this Period
0.80

Memo Item

B. KAMALA HARRIS FOR SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 777 S FIGUEROA ST STE 4050

City LOS ANGELES	State CA	Zip Code 90017
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00571919

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2017

Transaction ID : INCA12767

Amount of Each Receipt this Period
0.20

Memo Item

C. KLOBUCHAR FOR MINNESOTA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 4146

City ST PAUL	State MN	Zip Code 55104
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00431353

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
50.93

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2017

Transaction ID : INCA12764

Amount of Each Receipt this Period
0.20

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1.20
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 64 OF 130
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. LOUISE SLAUGHTER RE-ELECTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 30632

City ROCHESTER	State NY	Zip Code 14603
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00213611

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2017

Transaction ID : INCA12778

Amount of Each Receipt this Period
0.40

Memo Item

B. NITA LOWEY FOR CONGRESS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 271

City WHITE PLAINS	State NY	Zip Code 10605
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00219881

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2017

Transaction ID : INCA12776

Amount of Each Receipt this Period
0.40

Memo Item

C. STABENOW FOR US SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 4945

City EAST LANSING	State MI	Zip Code 48826
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00344473

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1445.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2017

Transaction ID : INCA12765

Amount of Each Receipt this Period
40.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	40.80
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 65 OF 130
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. TAMMY BALDWIN FOR SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 696

City MADISON	State WI	Zip Code 53701
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00326801

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
231.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		26		2017

Transaction ID : INCA12766

Amount of Each Receipt this Period
6.20

Memo Item

B. TAMMY FOR ILLINOIS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 59568

City SCHAUMBURG	State IL	Zip Code 60159
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00574889

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		26		2017

Transaction ID : INCA12772

Amount of Each Receipt this Period
0.80

Memo Item

C. THE NIKI TSONGAS COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 1454

City LOWELL	State MA	Zip Code 01853
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00433136

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
0.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		26		2017

Transaction ID : INCA12769

Amount of Each Receipt this Period
0.80

Memo Item

SUBTOTAL of Receipts This Page (optional).....	7.80
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 66 OF 130
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. TULSI FOR HAWAII
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 75561

City KAPOLEI	State HI	Zip Code 96707
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00497396

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.60

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		26		2017

Transaction ID : INCA12774

Amount of Each Receipt this Period
0.60

Memo Item

B.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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 ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

C.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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 ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	0.60
TOTAL This Period (last page this line number only).....	1916.60

**SCHEDULE 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. FIRST DATA

Full Name (Last, First, Middle Initial)

Mailing Address 5565 GLENRIDGE CONNECTOR NE
SUITE 2000

City ATLANTA State GA Zip Code 30342

Purpose of Disbursement CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 03 / 2017

FEC Identification Number: C

Transaction ID : EXPB12408

Amount of Each Disbursement this Period: 43.62

Memo Item

B. FIRST DATA

Full Name (Last, First, Middle Initial)

Mailing Address 5565 GLENRIDGE CONNECTOR NE
SUITE 2000

City ATLANTA State GA Zip Code 30342

Purpose of Disbursement CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 03 / 2017

FEC Identification Number: C

Transaction ID : EXPB12406

Amount of Each Disbursement this Period: 1073.85

Memo Item

C. FIRST DATA

Full Name (Last, First, Middle Initial)

Mailing Address 5565 GLENRIDGE CONNECTOR NE
SUITE 2000

City ATLANTA State GA Zip Code 30342

Purpose of Disbursement CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 03 / 2017

FEC Identification Number: C

Transaction ID : EXPB12407

Amount of Each Disbursement this Period: 237.30

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1354.77

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. AUTHORIZE.NET

Mailing Address P.O. BOX 8999

City SAN FRANCISCO State CA Zip Code 94128

Purpose of Disbursement
ACCOUNT FEE

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : EXPB12401
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. WELLS FARGO BANK

Mailing Address 464 CALIFORNIA STREET

City SAN FRANCISCO State CA Zip Code 94163

Purpose of Disbursement
BANK FEE

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : EXPB12789
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. VIEW AVENUE GROUP

Mailing Address 393 7TH AVENUE, SUITE 301

City SAN FRANCISCO State CA Zip Code 94118

Purpose of Disbursement
COMPLIANCE/REPORTING

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : EXPB12461
Amount of Each Disbursement this Period

Memo Item

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

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

SCHEDULE 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. Full Name (Last, First, Middle Initial)
HARVEY, MEGHAN, , ,

Mailing Address 5425 CHARLOTTE WAY

City LIVERMORE State CA Zip Code 94550

Purpose of Disbursement SOCIAL MEDIA COMMUNICATIONS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 18 / 2017

FEC Identification Number: C

Transaction ID : EXPB12468

Amount of Each Disbursement this Period: 500.00

Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	3927.02

**SCHEDULE 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. FEINSTEIN FOR SENATE 2018

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		05		2017

Mailing Address 918 PENNSYLVANIA AVE SE

FEC Identification Number

C	C00539890
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Transaction ID : EXPB12634

Amount of Each Disbursement this Period

5.00

Memo Item

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
ERMK: MEGAN CLAYTON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
FEINSTEIN, DIANE, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: CA District:

Full Name (Last, First, Middle Initial)

B. FRIENDS OF MARIA

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		05		2017

Mailing Address PO BOX 12740

FEC Identification Number

C	C00349506
---	-----------

Transaction ID : EXPB12635

Amount of Each Disbursement this Period

5.00

Memo Item

City SEATTLE State WA Zip Code 98111

Purpose of Disbursement
ERMK: MEGAN CLAYTON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
CANTWELL, MARIA, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: WA District:

Full Name (Last, First, Middle Initial)

C. FRIENDS OF MAZIE HIRONO

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		05		2017

Mailing Address PO BOX 677

FEC Identification Number

C	C00420760
---	-----------

Transaction ID : EXPB12636

Amount of Each Disbursement this Period

5.00

Memo Item

City HONOLULU State HI Zip Code 96809

Purpose of Disbursement
ERMK: MEGAN CLAYTON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
HIRONO, MAZIE, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: HI District:

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

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

15.00

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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)

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

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)
A. GILLIBRAND FOR SENATE

Mailing Address 313 C STREET, NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
ERMK: SHIRLEY BENNETT-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
GILLIBRAND, KIRSTEN ELIZABETH, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: NY District:

Date of Disbursement: 04 / 05 / 2017

FEC Identification Number: **C00413914**
Transaction ID : **EXPB12625**
Amount of Each Disbursement this Period: 1000.00

Memo Item

Full Name (Last, First, Middle Initial)
B. MCCASKILL SENATE FUND

Mailing Address PO BOX 300077

City ST LOUIS State MO Zip Code 63130

Purpose of Disbursement
ERMK: AMY RITTER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
MCCASKILL, CLAIRE, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: MO District:

Date of Disbursement: 04 / 05 / 2017

FEC Identification Number: **C00577148**
Transaction ID : **EXPB12204**
Amount of Each Disbursement this Period: 1000.00

Memo Item

Full Name (Last, First, Middle Initial)
C. MCCASKILL SENATE FUND

Mailing Address PO BOX 300077

City ST LOUIS State MO Zip Code 63130

Purpose of Disbursement
ERMK: VALERIE MASI-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
MCCASKILL, CLAIRE, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: MO District:

Date of Disbursement: 04 / 05 / 2017

FEC Identification Number: **C00577148**
Transaction ID : **EXPB12620**
Amount of Each Disbursement this Period: 5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2005.00

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

**SCHEDULE 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. MCCASKILL SENATE FUND

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 300077

City ST LOUIS State MO Zip Code 63130

Purpose of Disbursement
ERMK: ANNE HENDREN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
MCCASKILL, CLAIRE, , ,

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

Date of Disbursement

MM / DD / YYYY
04 / 05 / 2017

FEC Identification Number

C C00577148

Transaction ID : EXPB12621

Amount of Each Disbursement this Period

5.00

Memo Item

B. MCCASKILL SENATE FUND

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 300077

City ST LOUIS State MO Zip Code 63130

Purpose of Disbursement
ERMK: ALEXANDRA ACKER-LYONS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
MCCASKILL, CLAIRE, , ,

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

Date of Disbursement

MM / DD / YYYY
04 / 05 / 2017

FEC Identification Number

C C00577148

Transaction ID : EXPB12622

Amount of Each Disbursement this Period

5.00

Memo Item

C. MCCASKILL SENATE FUND

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 300077

City ST LOUIS State MO Zip Code 63130

Purpose of Disbursement
ERMK: MEGAN CLAYTON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
MCCASKILL, CLAIRE, , ,

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

Date of Disbursement

MM / DD / YYYY
04 / 05 / 2017

FEC Identification Number

C C00577148

Transaction ID : EXPB12623

Amount of Each Disbursement this Period

5.00

Memo Item

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

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

15.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial) A. MCCASKILL SENATE FUND		Date of Disbursement MM / DD / YYYY 04 / 05 / 2017
Mailing Address PO BOX 300077		FEC Identification Number C 000577148 Transaction ID : EXPB12624 Amount of Each Disbursement this Period 5.00
City ST LOUIS	State MO	Zip Code 63130
Purpose of Disbursement ERMK: GLORIA J HOWARD-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED		Category/ Type
Candidate Name MCCASKILL, CLAIRE, , ,		
Office Sought: <input checked="" type="checkbox"/> Senate	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MO	District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. STABENOW FOR US SENATE		Date of Disbursement MM / DD / YYYY 04 / 05 / 2017
Mailing Address P.O. BOX 4945		FEC Identification Number C 000344473 Transaction ID : EXPB12201 Amount of Each Disbursement this Period 1000.00
City EAST LANSING	State MI	Zip Code 48826
Purpose of Disbursement ERMK: AMY RITTER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED		Category/ Type
Candidate Name STABENOW, DEBBIE, , ,		
Office Sought: <input checked="" type="checkbox"/> Senate	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MI	District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. STABENOW FOR US SENATE		Date of Disbursement MM / DD / YYYY 04 / 05 / 2017
Mailing Address P.O. BOX 4945		FEC Identification Number C 000344473 Transaction ID : EXPB12202 Amount of Each Disbursement this Period 1000.00
City EAST LANSING	State MI	Zip Code 48826
Purpose of Disbursement ERMK: ELIZABETH COLTON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED		Category/ Type
Candidate Name STABENOW, DEBBIE, , ,		
Office Sought: <input checked="" type="checkbox"/> Senate	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MI	District:	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	2005.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial) A. STABENOW FOR US SENATE		Date of Disbursement MM / DD / YYYY 04 / 05 / 2017
Mailing Address P.O. BOX 4945		FEC Identification Number C00344473 Transaction ID : EXPB12203 Amount of Each Disbursement this Period 1000.00
City EAST LANSING	State MI	Zip Code 48826
Purpose of Disbursement ERMK: JENNIFER DIBRIENZA-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED		Category/ Type
Candidate Name STABENOW, DEBBIE, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MI	District:	

Full Name (Last, First, Middle Initial) B. STABENOW FOR US SENATE		Date of Disbursement MM / DD / YYYY 04 / 05 / 2017
Mailing Address P.O. BOX 4945		FEC Identification Number C00344473 Transaction ID : EXPB12612 Amount of Each Disbursement this Period 1000.00
City EAST LANSING	State MI	Zip Code 48826
Purpose of Disbursement ERMK: WESLEY WEISSBERG-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED		Category/ Type
Candidate Name STABENOW, DEBBIE, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MI	District:	

Full Name (Last, First, Middle Initial) C. STABENOW FOR US SENATE		Date of Disbursement MM / DD / YYYY 04 / 05 / 2017
Mailing Address P.O. BOX 4945		FEC Identification Number C00344473 Transaction ID : EXPB12613 Amount of Each Disbursement this Period 1000.00
City EAST LANSING	State MI	Zip Code 48826
Purpose of Disbursement ERMK: SUZANNE KOHLBERG-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED		Category/ Type
Candidate Name STABENOW, DEBBIE, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MI	District:	

SUBTOTAL of Disbursements This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City
EAST LANSING

State
MI

Zip Code
48826

Purpose of Disbursement
ERMK: VALERIE MASI-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
STABENOW, DEBBIE, , ,

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: MI District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	7

FEC Identification Number

C C00344473

Transaction ID : EXPB12614

Amount of Each Disbursement this Period

5	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

B. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City
EAST LANSING

State
MI

Zip Code
48826

Purpose of Disbursement
ERMK: ANNE HENDREN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
STABENOW, DEBBIE, , ,

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: MI District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	7

FEC Identification Number

C C00344473

Transaction ID : EXPB12615

Amount of Each Disbursement this Period

5	0	0
---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

C. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City
EAST LANSING

State
MI

Zip Code
48826

Purpose of Disbursement
ERMK: ALEXANDRA ACKER-LYONS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
STABENOW, DEBBIE, , ,

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: MI District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	7

FEC Identification Number

C C00344473

Transaction ID : EXPB12616

Amount of Each Disbursement this Period

5	0	0
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Memo Item

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

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

1	5	0	0
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1	5	0	0
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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)

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

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)
A. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City EAST LANSING State MI Zip Code 48826

Purpose of Disbursement
ERMK: MEGAN CLAYTON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
STABENOW, DEBBIE, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: MI District:

Date of Disbursement: 04 / 05 / 2017

FEC Identification Number: C00344473
Transaction ID : EXPB12617

Amount of Each Disbursement this Period: 5.00

Memo Item

Full Name (Last, First, Middle Initial)
B. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City EAST LANSING State MI Zip Code 48826

Purpose of Disbursement
ERMK: LAURA KAVANAUGH-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
STABENOW, DEBBIE, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: MI District:

Date of Disbursement: 04 / 05 / 2017

FEC Identification Number: C00344473
Transaction ID : EXPB12618

Amount of Each Disbursement this Period: 1000.00

Memo Item

Full Name (Last, First, Middle Initial)
C. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City EAST LANSING State MI Zip Code 48826

Purpose of Disbursement
ERMK: GLORIA J HOWARD-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
STABENOW, DEBBIE, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: MI District:

Date of Disbursement: 04 / 05 / 2017

FEC Identification Number: C00344473
Transaction ID : EXPB12619

Amount of Each Disbursement this Period: 5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1010.00

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

**SCHEDULE 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)
A. TAMMY BALDWIN FOR SENATE

Mailing Address P.O. BOX 696

City MADISON State WI Zip Code 53701

Purpose of Disbursement
ERMK: KERRY MCLEAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
BALDWIN, TAMMY, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: WI District:

Date of Disbursement: MM / DD / YYYY
04 / 05 / 2017

FEC Identification Number
C C00326801
Transaction ID : EXPB12626

Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)
B. TAMMY BALDWIN FOR SENATE

Mailing Address P.O. BOX 696

City MADISON State WI Zip Code 53701

Purpose of Disbursement
ERMK: SUZANNE KOHLBERG-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
BALDWIN, TAMMY, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: WI District:

Date of Disbursement: MM / DD / YYYY
04 / 05 / 2017

FEC Identification Number
C C00326801
Transaction ID : EXPB12627

Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)
C. TAMMY BALDWIN FOR SENATE

Mailing Address P.O. BOX 696

City MADISON State WI Zip Code 53701

Purpose of Disbursement
ERMK: KERRY FRANCIS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
BALDWIN, TAMMY, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: WI District:

Date of Disbursement: MM / DD / YYYY
04 / 05 / 2017

FEC Identification Number
C C00326801
Transaction ID : EXPB12628

Amount of Each Disbursement this Period
1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3000.00

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

**SCHEDULE 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)
A. TAMMY BALDWIN FOR SENATE

Mailing Address P.O. BOX 696

City MADISON State WI Zip Code 53701

Purpose of Disbursement
ERMK: VALERIE MASI-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
BALDWIN, TAMMY, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: WI District:

Date of Disbursement: MM / DD / YYYY
04 / 05 / 2017

FEC Identification Number
C00326801
Transaction ID : **EXPB12629**
Amount of Each Disbursement this Period
5.00

Memo Item

Full Name (Last, First, Middle Initial)
B. TAMMY BALDWIN FOR SENATE

Mailing Address P.O. BOX 696

City MADISON State WI Zip Code 53701

Purpose of Disbursement
ERMK: ANNE HENDREN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
BALDWIN, TAMMY, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: WI District:

Date of Disbursement: MM / DD / YYYY
04 / 05 / 2017

FEC Identification Number
C00326801
Transaction ID : **EXPB12630**
Amount of Each Disbursement this Period
5.00

Memo Item

Full Name (Last, First, Middle Initial)
C. TAMMY BALDWIN FOR SENATE

Mailing Address P.O. BOX 696

City MADISON State WI Zip Code 53701

Purpose of Disbursement
ERMK: ALEXANDRA ACKER-LYONS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
BALDWIN, TAMMY, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: WI District:

Date of Disbursement: MM / DD / YYYY
04 / 05 / 2017

FEC Identification Number
C00326801
Transaction ID : **EXPB12631**
Amount of Each Disbursement this Period
5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 15.00

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

**SCHEDULE 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. TAMMY BALDWIN FOR SENATE

Mailing Address P.O. BOX 696

City
MADISON

State
WI

Zip Code
53701

Purpose of Disbursement
ERMK: GLORIA J HOWARD-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
BALDWIN, TAMMY, , ,

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: WI District:

Date of Disbursement

MM / DD / YYYY
04 / 05 / 2017

FEC Identification Number

C C00326801

Transaction ID : EXPB12632

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

B. TAMMY BALDWIN FOR SENATE

Mailing Address P.O. BOX 696

City
MADISON

State
WI

Zip Code
53701

Purpose of Disbursement
ERMK: SHEILA THOMPSON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
BALDWIN, TAMMY, , ,

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: WI District:

Date of Disbursement

MM / DD / YYYY
04 / 05 / 2017

FEC Identification Number

C C00326801

Transaction ID : EXPB12633

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ANNA ESHOO FOR CONGRESS

Mailing Address 555 CAPITOL MALL, SUITE 1425

City
SACRAMENTO

State
CA

Zip Code
95814

Purpose of Disbursement
CHECK LOST IN MAIL. NOT DEPOSITED

Candidate Name
ESHOO, ANNA, , ,

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: CA District: 18

Date of Disbursement

MM / DD / YYYY
04 / 10 / 2017

FEC Identification Number

C C00258475

Transaction ID : EXPB12452

Amount of Each Disbursement this Period

-5.00

Memo Item

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

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

1000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)
A. ANNA ESHOO FOR CONGRESS

Mailing Address 555 CAPITOL MALL, SUITE 1425

City SACRAMENTO State CA Zip Code 95814

Purpose of Disbursement
CHECK LOST IN MAIL. NOT DEPOSITED

011

Candidate Name
ESHOO, ANNA, , ,

Office Sought: House
 Senate
 President
State: CA District: 18

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 10 / 2017

FEC Identification Number

C C00258475

Transaction ID : EXPB12453

Amount of Each Disbursement this Period

-5.00

Memo Item

Full Name (Last, First, Middle Initial)
B. ANNA ESHOO FOR CONGRESS

Mailing Address 555 CAPITOL MALL, SUITE 1425

City SACRAMENTO State CA Zip Code 95814

Purpose of Disbursement
CHECK LOST IN MAIL. NOT DEPOSITED

011

Candidate Name
ESHOO, ANNA, , ,

Office Sought: House
 Senate
 President
State: CA District: 18

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 10 / 2017

FEC Identification Number

C C00258475

Transaction ID : EXPB12454

Amount of Each Disbursement this Period

-10.00

Memo Item

Full Name (Last, First, Middle Initial)
C. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City BOSTON State MA Zip Code 02129

Purpose of Disbursement
CHECK LOST IN MAIL. NOT DEPOSITED

011

Candidate Name
WARREN, ELIZABETH, , ,

Office Sought: House
 Senate
 President
State: MA District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 10 / 2017

FEC Identification Number

C C00500843

Transaction ID : EXPB12457

Amount of Each Disbursement this Period

-50.00

Memo Item

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

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

-65.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial) A. ELIZABETH FOR MA INC		Date of Disbursement MM / DD / YYYY 04 / 10 / 2017
Mailing Address PO BOX 290568		FEC Identification Number C00500843 Transaction ID : EXPB12458
City BOSTON	State MA	Zip Code 02129
Purpose of Disbursement CHECK LOST IN MAIL. NOT DEPOSITED		011 Category/ Type
Candidate Name WARREN, ELIZABETH, , ,		Amount of Each Disbursement this Period -5.00
Office Sought: <input checked="" 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) ▼	<input type="checkbox"/> Memo Item
State: MA	District:	

Full Name (Last, First, Middle Initial) B. ELIZABETH FOR MA INC		Date of Disbursement MM / DD / YYYY 04 / 10 / 2017
Mailing Address PO BOX 290568		FEC Identification Number C00500843 Transaction ID : EXPB12459
City BOSTON	State MA	Zip Code 02129
Purpose of Disbursement CHECK LOST IN MAIL. NOT DEPOSITED		011 Category/ Type
Candidate Name WARREN, ELIZABETH, , ,		Amount of Each Disbursement this Period -10.00
Office Sought: <input checked="" 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) ▼	<input type="checkbox"/> Memo Item
State: MA	District:	

Full Name (Last, First, Middle Initial) C. ELIZABETH FOR MA INC		Date of Disbursement MM / DD / YYYY 04 / 10 / 2017
Mailing Address PO BOX 290568		FEC Identification Number C00500843 Transaction ID : EXPB12460
City BOSTON	State MA	Zip Code 02129
Purpose of Disbursement CHECK LOST IN MAIL. NOT DEPOSITED		011 Category/ Type
Candidate Name WARREN, ELIZABETH, , ,		Amount of Each Disbursement this Period -5.00
Office Sought: <input checked="" 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) ▼	<input type="checkbox"/> Memo Item
State: MA	District:	

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

-20.00

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

**SCHEDULE 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial) A. ELIZABETH FOR MA INC		Date of Disbursement MM / DD / YYYY 04 / 10 / 2017
Mailing Address PO BOX 290568		FEC Identification Number C00500843 Transaction ID : EXPB12794
City BOSTON	State MA	Zip Code 02129
Purpose of Disbursement CHECK LOST IN MAIL. NOT DEPOSITED		011 Category/ Type
Candidate Name WARREN, ELIZABETH, , ,		Amount of Each Disbursement this Period -20.20
Office Sought: <input checked="" 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) ▼	<input type="checkbox"/> Memo Item
State: MA	District:	

Full Name (Last, First, Middle Initial) B. GRACE FOR NEW YORK		Date of Disbursement MM / DD / YYYY 04 / 10 / 2017
Mailing Address PO BOX 656555		FEC Identification Number C00516666 Transaction ID : EXPB12449
City FRESH MEADOWS	State NY	Zip Code 11365
Purpose of Disbursement CHECK LOST IN MAIL. NOT DEPOSITED		011 Category/ Type
Candidate Name MENG, GRACE, , ,		Amount of Each Disbursement this Period -5.00
Office Sought: <input checked="" 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) ▼	<input type="checkbox"/> Memo Item
State: NY	District: 06	

Full Name (Last, First, Middle Initial) C. KAREN BASS FOR CONGRESS		Date of Disbursement MM / DD / YYYY 04 / 10 / 2017
Mailing Address 777 S. FIGUEROA STREET SUITE 4050		FEC Identification Number C00476523 Transaction ID : EXPB12450
City LOS ANGELES	State CA	Zip Code 90017
Purpose of Disbursement CHECK LOST IN MAIL. NOT DEPOSITED		011 Category/ Type
Candidate Name BASS, KAREN, , ,		Amount of Each Disbursement this Period -5.00
Office Sought: <input checked="" 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) ▼	<input type="checkbox"/> Memo Item
State: CA	District: 37	

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

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

-30.20

**SCHEDULE 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. MONICA VERNON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 1635

M M M	/	D D D	/	Y Y Y Y Y
04		10		2017

City CEDAR RAPIDS State IA Zip Code 52406

FEC Identification Number

Purpose of Disbursement
CHECK LOST IN MAIL. NOT DEPOSITED

C	C00571562
---	-----------

Candidate Name
VERNON, MONICA, , ,

011
Category/ Type

Transaction ID : EXPB12451

Amount of Each Disbursement this Period

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

-5.00

Memo Item

B. MONICA VERNON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 1635

M M M	/	D D D	/	Y Y Y Y Y
04		10		2017

City CEDAR RAPIDS State IA Zip Code 52406

FEC Identification Number

Purpose of Disbursement
CHECK LOST IN MAIL. NOT DEPOSITED

C	C00571562
---	-----------

Candidate Name
VERNON, MONICA, , ,

011
Category/ Type

Transaction ID : EXPB12455

Amount of Each Disbursement this Period

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

-5.00

Memo Item

C. MONICA VERNON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 1635

M M M	/	D D D	/	Y Y Y Y Y
04		10		2017

City CEDAR RAPIDS State IA Zip Code 52406

FEC Identification Number

Purpose of Disbursement
CHECK LOST IN MAIL. NOT DEPOSITED

C	C00571562
---	-----------

Candidate Name
VERNON, MONICA, , ,

011
Category/ Type

Transaction ID : EXPB12456

Amount of Each Disbursement this Period

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

-5.00

Memo Item

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

-15.00

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)

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

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial) A. PAMELA KEITH FOR SENATE 2016		Date of Disbursement MM / DD / YYYY 04 / 10 / 2017
Mailing Address 120 N RIVER DRIVE W		FEC Identification Number C00570564 Transaction ID : EXPB12446 Amount of Each Disbursement this Period -7.50
City JUPITER	State FL	Zip Code 33458
Purpose of Disbursement CHECK LOST IN MAIL. NOT DEPOSITED		011 Category/ Type
Candidate Name KEITH, PAM, , ,		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL	District:	

Full Name (Last, First, Middle Initial) B. PAMELA KEITH FOR SENATE 2016		Date of Disbursement MM / DD / YYYY 04 / 10 / 2017
Mailing Address 120 N RIVER DRIVE W		FEC Identification Number C00570564 Transaction ID : EXPB12447 Amount of Each Disbursement this Period -15.00
City JUPITER	State FL	Zip Code 33458
Purpose of Disbursement CHECK LOST IN MAIL. NOT DEPOSITED		011 Category/ Type
Candidate Name KEITH, PAM, , ,		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL	District:	

Full Name (Last, First, Middle Initial) C. PAMELA KEITH FOR SENATE 2016		Date of Disbursement MM / DD / YYYY 04 / 10 / 2017
Mailing Address 120 N RIVER DRIVE W		FEC Identification Number C00570564 Transaction ID : EXPB12448 Amount of Each Disbursement this Period -5.00
City JUPITER	State FL	Zip Code 33458
Purpose of Disbursement CHECK LOST IN MAIL. NOT DEPOSITED		011 Category/ Type
Candidate Name KEITH, PAM, , ,		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL	District:	

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

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

-27.50

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

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. PODER PAC

Mailing Address 520 MAPLE COURT

City FALLS CHURCH State VA Zip Code 22041

Purpose of Disbursement
CHECK LOST IN MAIL. NOT DEPOSITED

Category/
Type

Candidate Name
PODER PAC

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

Date of Disbursement
MM / DD / YYYY
04 / 10 / 2017

FEC Identification Number
C C00452276
Transaction ID : EXPB12445
Amount of Each Disbursement this Period
-100.00

Memo Item

Full Name (Last, First, Middle Initial)

B. BARBARA LEE FOR CONGRESS

Mailing Address 409 13TH STREET, 17TH FLOOR

City OAKLAND State CA Zip Code 94612

Purpose of Disbursement
ERMK: SARAH HABIB-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Category/
Type

Candidate Name
LEE, BARBARA, , ,

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: CA District: 13

Date of Disbursement
MM / DD / YYYY
04 / 12 / 2017

FEC Identification Number
C C00331769
Transaction ID : EXPB12790
Amount of Each Disbursement this Period
-5.00

Memo Item

Full Name (Last, First, Middle Initial)

C. BARBARA LEE FOR CONGRESS

Mailing Address 409 13TH STREET, 17TH FLOOR

City OAKLAND State CA Zip Code 94612

Purpose of Disbursement
ERMK: BIRGIT KELLEY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Category/
Type

Candidate Name
LEE, BARBARA, , ,

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: CA District: 13

Date of Disbursement
MM / DD / YYYY
04 / 12 / 2017

FEC Identification Number
C C00331769
Transaction ID : EXPB12791
Amount of Each Disbursement this Period
-5.00

Memo Item

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

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

-110.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB12790

ORIGINAL CHECK NOT DEPOSITED.

Form/Schedule: SB23

Transaction ID: EXPB12791

ORIGINAL CHECK NOT DEPOSITED.

**SCHEDULE 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. BARBARA LEE FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 409 13TH STREET, 17TH FLOOR

City OAKLAND State CA Zip Code 94612

Purpose of Disbursement
ERMK: BIRGIT KELLEY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED
Candidate Name
LEE, BARBARA, , ,

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: CA District: 13

Date of Disbursement

MM / DD / YYYY
04 / 12 / 2017

FEC Identification Number

C C00331769

Transaction ID : EXPB12792

Amount of Each Disbursement this Period

5.00

Memo Item

B. BARBARA LEE FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 409 13TH STREET, 17TH FLOOR

City OAKLAND State CA Zip Code 94612

Purpose of Disbursement
ERMK: SARAH HABIB-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED
Candidate Name
LEE, BARBARA, , ,

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: CA District: 13

Date of Disbursement

MM / DD / YYYY
04 / 12 / 2017

FEC Identification Number

C C00331769

Transaction ID : EXPB12793

Amount of Each Disbursement this Period

5.00

Memo Item

C. ELECTING WOMEN SAN FRANCISCO PAC

Full Name (Last, First, Middle Initial)

Mailing Address 393 7TH AVENUE, SUITE 301

City SAN FRANCISCO State CA Zip Code 94118

Purpose of Disbursement
ERMK: SIMONE COXE-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED
Candidate Name
ELECTING WOMEN SAN FRANCISCO PAC

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

Date of Disbursement

MM / DD / YYYY
04 / 12 / 2017

FEC Identification Number

C C00585687

Transaction ID : EXPB12663

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

1010.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB12792

RE-ISSUE OF CHECK NOT DEPOSITED.

Form/Schedule: SB23

Transaction ID: EXPB12793

RE-ISSUE OF CHECK NOT DEPOSITED.

**SCHEDULE 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. ELECTING WOMEN SAN FRANCISCO PAC

Full Name (Last, First, Middle Initial)
Date of Disbursement: 04 / 12 / 2017

Mailing Address 393 7TH AVENUE, SUITE 301

City SAN FRANCISCO State CA Zip Code 94118

Purpose of Disbursement: ERMK: DANA KORNFELD-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name: ELECTING WOMEN SAN FRANCISCO PAC

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C00585687
Transaction ID: EXPB12664
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. ELECTING WOMEN SAN FRANCISCO PAC

Full Name (Last, First, Middle Initial)
Date of Disbursement: 04 / 12 / 2017

Mailing Address 393 7TH AVENUE, SUITE 301

City SAN FRANCISCO State CA Zip Code 94118

Purpose of Disbursement: ERMK: ANNE FRAHN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name: ELECTING WOMEN SAN FRANCISCO PAC

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C00585687
Transaction ID: EXPB12665
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. ELIZABETH FOR MA INC

Full Name (Last, First, Middle Initial)
Date of Disbursement: 04 / 12 / 2017

Mailing Address PO BOX 290568

City BOSTON State MA Zip Code 02129

Purpose of Disbursement: ERMK: ROBIN BASS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name: WARREN, ELIZABETH, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: MA District:

FEC Identification Number: C00500843
Transaction ID: EXPB12666
Amount of Each Disbursement this Period: 5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2005.00

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

**SCHEDULE 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)
A. FEINSTEIN FOR SENATE 2018

Mailing Address 918 PENNSYLVANIA AVE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
ERMK: ROBIN BASS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
FEINSTEIN, DIANE, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: CA District:

Date of Disbursement: 04 / 12 / 2017

FEC Identification Number: **C00539890**
Transaction ID : **EXPB12667**
Amount of Each Disbursement this Period: 5.00

Memo Item

Full Name (Last, First, Middle Initial)
B. FRIENDS OF MARIA

Mailing Address PO BOX 12740

City SEATTLE State WA Zip Code 98111

Purpose of Disbursement
ERMK: ROBIN BASS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
CANTWELL, MARIA, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: WA District:

Date of Disbursement: 04 / 12 / 2017

FEC Identification Number: **C00349506**
Transaction ID : **EXPB12669**
Amount of Each Disbursement this Period: 5.00

Memo Item

Full Name (Last, First, Middle Initial)
C. FRIENDS OF MAZIE HIRONO

Mailing Address PO BOX 677

City HONOLULU State HI Zip Code 96809

Purpose of Disbursement
ERMK: ROBIN BASS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
HIRONO, MAZIE, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: HI District:

Date of Disbursement: 04 / 12 / 2017

FEC Identification Number: **C00420760**
Transaction ID : **EXPB12670**
Amount of Each Disbursement this Period: 5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 15.00

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

**SCHEDULE 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)
A. GILLIBRAND FOR SENATE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		12		2017

Mailing Address 313 C STREET, NE

FEC Identification Number

C C00413914

Transaction ID : EXPB12661

Amount of Each Disbursement this Period

1000.00

Memo Item

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
ERMK: ESTELLE ROGERS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
GILLIBRAND, KIRSTEN ELIZABETH, , ,

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

State: NY District:

Full Name (Last, First, Middle Initial)
B. GILLIBRAND FOR SENATE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		12		2017

Mailing Address 313 C STREET, NE

FEC Identification Number

C C00413914

Transaction ID : EXPB12662

Amount of Each Disbursement this Period

5.00

Memo Item

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
ERMK: ROBIN BASS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
GILLIBRAND, KIRSTEN ELIZABETH, , ,

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

State: NY District:

Full Name (Last, First, Middle Initial)
C. HEIDI FOR SENATE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		12		2017

Mailing Address PO BOX 1577

FEC Identification Number

C C00505552

Transaction ID : EXPB12671

Amount of Each Disbursement this Period

5.00

Memo Item

City BISMARCK State ND Zip Code 58502

Purpose of Disbursement
ERMK: ROBIN BASS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
HEITKAMP, HEIDI, , ,

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

State: ND District:

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

1010.00

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

**SCHEDULE 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)
A. KLOBUCHAR FOR MINNESOTA

Mailing Address PO BOX 4146

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
ERMK: ROBIN BASS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
KLOBUCHAR, AMY, , ,

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

State: MN District:

Date of Disbursement: 04 / 12 / 2017

FEC Identification Number: **C00431353**
Transaction ID : **EXPB12668**
Amount of Each Disbursement this Period: 5.00

Memo Item

Full Name (Last, First, Middle Initial)
B. MCCASKILL SENATE FUND

Mailing Address PO BOX 300077

City ST LOUIS State MO Zip Code 63130

Purpose of Disbursement
ERMK: WENDY FIELDS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
MCCASKILL, CLAIRE, , ,

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

State: MO District:

Date of Disbursement: 04 / 12 / 2017

FEC Identification Number: **C00577148**
Transaction ID : **EXPB12641**
Amount of Each Disbursement this Period: 5.00

Memo Item

Full Name (Last, First, Middle Initial)
C. MCCASKILL SENATE FUND

Mailing Address PO BOX 300077

City ST LOUIS State MO Zip Code 63130

Purpose of Disbursement
ERMK: MARIANNE ELLIS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
MCCASKILL, CLAIRE, , ,

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

State: MO District:

Date of Disbursement: 04 / 12 / 2017

FEC Identification Number: **C00577148**
Transaction ID : **EXPB12642**
Amount of Each Disbursement this Period: 10.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 20.00

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

**SCHEDULE 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. MCCASKILL SENATE FUND

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 300077

City ST LOUIS State MO Zip Code 63130

Purpose of Disbursement
ERMK: ROBIN BASS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
MCCASKILL, CLAIRE, , ,

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

Date of Disbursement
MM / DD / YYYY
04 / 12 / 2017

FEC Identification Number
C C00577148
Transaction ID : EXPB12643
Amount of Each Disbursement this Period
5.00

Memo Item

B. STABENOW FOR US SENATE

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 4945

City EAST LANSING State MI Zip Code 48826

Purpose of Disbursement
ERMK: WENDY FIELDS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
STABENOW, DEBBIE, , ,

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

Date of Disbursement
MM / DD / YYYY
04 / 12 / 2017

FEC Identification Number
C C00344473
Transaction ID : EXPB12644
Amount of Each Disbursement this Period
5.00

Memo Item

C. STABENOW FOR US SENATE

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 4945

City EAST LANSING State MI Zip Code 48826

Purpose of Disbursement
ERMK: MARIANNE ELLIS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
STABENOW, DEBBIE, , ,

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

Date of Disbursement
MM / DD / YYYY
04 / 12 / 2017

FEC Identification Number
C C00344473
Transaction ID : EXPB12645
Amount of Each Disbursement this Period
10.00

Memo Item

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

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

20.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial) A. STABENOW FOR US SENATE		Date of Disbursement MM / DD / YYYY 04 / 12 / 2017
Mailing Address P.O. BOX 4945		FEC Identification Number C00344473 Transaction ID : EXPB12646 Amount of Each Disbursement this Period 250.00
City EAST LANSING	State MI	Zip Code 48826
Purpose of Disbursement ERMK: JENNIFER DIBRIENZA-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED		Category/ Type
Candidate Name STABENOW, DEBBIE, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MI	District:	

Full Name (Last, First, Middle Initial) B. STABENOW FOR US SENATE		Date of Disbursement MM / DD / YYYY 04 / 12 / 2017
Mailing Address P.O. BOX 4945		FEC Identification Number C00344473 Transaction ID : EXPB12647 Amount of Each Disbursement this Period 1000.00
City EAST LANSING	State MI	Zip Code 48826
Purpose of Disbursement ERMK: SIMONE COXE-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED		Category/ Type
Candidate Name STABENOW, DEBBIE, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MI	District:	

Full Name (Last, First, Middle Initial) C. STABENOW FOR US SENATE		Date of Disbursement MM / DD / YYYY 04 / 12 / 2017
Mailing Address P.O. BOX 4945		FEC Identification Number C00344473 Transaction ID : EXPB12648 Amount of Each Disbursement this Period 1000.00
City EAST LANSING	State MI	Zip Code 48826
Purpose of Disbursement ERMK: PAULA MARCH-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED		Category/ Type
Candidate Name STABENOW, DEBBIE, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MI	District:	

SUBTOTAL of Disbursements This Page (optional).....▶	2250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial) A. STABENOW FOR US SENATE		Date of Disbursement MM / DD / YYYY 04 / 12 / 2017
Mailing Address P.O. BOX 4945		FEC Identification Number C00344473 Transaction ID : EXPB12649
City EAST LANSING	State MI	Zip Code 48826
Purpose of Disbursement ERMK: AMY PEARL-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED		Amount of Each Disbursement this Period 1000.00
Candidate Name STABENOW, DEBBIE, , ,		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> Senate	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General	
State: MI District:	<input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. STABENOW FOR US SENATE		Date of Disbursement MM / DD / YYYY 04 / 12 / 2017
Mailing Address P.O. BOX 4945		FEC Identification Number C00344473 Transaction ID : EXPB12650
City EAST LANSING	State MI	Zip Code 48826
Purpose of Disbursement ERMK: JAN KANG-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED		Amount of Each Disbursement this Period 1000.00
Candidate Name STABENOW, DEBBIE, , ,		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> Senate	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General	
State: MI District:	<input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. STABENOW FOR US SENATE		Date of Disbursement MM / DD / YYYY 04 / 12 / 2017
Mailing Address P.O. BOX 4945		FEC Identification Number C00344473 Transaction ID : EXPB12651
City EAST LANSING	State MI	Zip Code 48826
Purpose of Disbursement ERMK: KEENAN KELSEY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED		Amount of Each Disbursement this Period 1000.00
Candidate Name STABENOW, DEBBIE, , ,		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> Senate	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General	
State: MI District:	<input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)
A. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City EAST LANSING State MI Zip Code 48826

Purpose of Disbursement
ERMK: ANNE FRAHN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
STABENOW, DEBBIE, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: MI District:

Date of Disbursement: 04 / 12 / 2017

FEC Identification Number: C00344473
Transaction ID : EXPB12652

Amount of Each Disbursement this Period: 1000.00

Memo Item

Full Name (Last, First, Middle Initial)
B. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City EAST LANSING State MI Zip Code 48826

Purpose of Disbursement
ERMK: COURTNEY MOORE-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
STABENOW, DEBBIE, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: MI District:

Date of Disbursement: 04 / 12 / 2017

FEC Identification Number: C00344473
Transaction ID : EXPB12653

Amount of Each Disbursement this Period: 1000.00

Memo Item

Full Name (Last, First, Middle Initial)
C. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City EAST LANSING State MI Zip Code 48826

Purpose of Disbursement
ERMK: CATHERINE CRYSTAL FOSTER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
STABENOW, DEBBIE, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: MI District:

Date of Disbursement: 04 / 12 / 2017

FEC Identification Number: C00344473
Transaction ID : EXPB12654

Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3000.00

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

**SCHEDULE 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial) A. STABENOW FOR US SENATE		Date of Disbursement MM / DD / YYYY 04 / 12 / 2017
Mailing Address P.O. BOX 4945		FEC Identification Number C00344473 Transaction ID : EXPB12655 Amount of Each Disbursement this Period 1000.00
City EAST LANSING	State MI	Zip Code 48826
Purpose of Disbursement ERMK: ANDREA STEELE-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED		Category/ Type
Candidate Name STABENOW, DEBBIE, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MI	District:	

Full Name (Last, First, Middle Initial) B. STABENOW FOR US SENATE		Date of Disbursement MM / DD / YYYY 04 / 12 / 2017
Mailing Address P.O. BOX 4945		FEC Identification Number C00344473 Transaction ID : EXPB12656 Amount of Each Disbursement this Period 1000.00
City EAST LANSING	State MI	Zip Code 48826
Purpose of Disbursement ERMK: LISA LIDDLE-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED		Category/ Type
Candidate Name STABENOW, DEBBIE, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MI	District:	

Full Name (Last, First, Middle Initial) C. STABENOW FOR US SENATE		Date of Disbursement MM / DD / YYYY 04 / 12 / 2017
Mailing Address P.O. BOX 4945		FEC Identification Number C00344473 Transaction ID : EXPB12657 Amount of Each Disbursement this Period 1000.00
City EAST LANSING	State MI	Zip Code 48826
Purpose of Disbursement ERMK: KATE O'SULLIVAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED		Category/ Type
Candidate Name STABENOW, DEBBIE, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MI	District:	

SUBTOTAL of Disbursements This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City
EAST LANSING

State
MI

Zip Code
48826

Purpose of Disbursement
ERMK: MARY STIMMLER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name

STABENOW, DEBBIE, , ,

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: MI District:

Date of Disbursement

MM / DD / YYYY
04 / 12 / 2017

FEC Identification Number

C C00344473

Transaction ID : EXPB12658

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City
EAST LANSING

State
MI

Zip Code
48826

Purpose of Disbursement
ERMK: ROBIN BASS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name

STABENOW, DEBBIE, , ,

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: MI District:

Date of Disbursement

MM / DD / YYYY
04 / 12 / 2017

FEC Identification Number

C C00344473

Transaction ID : EXPB12659

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

C. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City
EAST LANSING

State
MI

Zip Code
48826

Purpose of Disbursement
ERMK: MICHELLE KRAUS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name

STABENOW, DEBBIE, , ,

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: MI District:

Date of Disbursement

MM / DD / YYYY
04 / 12 / 2017

FEC Identification Number

C C00344473

Transaction ID : EXPB12660

Amount of Each Disbursement this Period

50.00

Memo Item

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

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

1055.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)
A. TAMMY BALDWIN FOR SENATE

Mailing Address P.O. BOX 696

City MADISON State WI Zip Code 53701

Purpose of Disbursement
ERMK: WENDY FIELDS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
BALDWIN, TAMMY, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: WI District:

Date of Disbursement: 04 / 12 / 2017

FEC Identification Number: C00326801
Transaction ID : EXPB12637

Amount of Each Disbursement this Period: 5.00

Memo Item

Full Name (Last, First, Middle Initial)
B. TAMMY BALDWIN FOR SENATE

Mailing Address P.O. BOX 696

City MADISON State WI Zip Code 53701

Purpose of Disbursement
ERMK: MARIANNE ELLIS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
BALDWIN, TAMMY, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: WI District:

Date of Disbursement: 04 / 12 / 2017

FEC Identification Number: C00326801
Transaction ID : EXPB12638

Amount of Each Disbursement this Period: 10.00

Memo Item

Full Name (Last, First, Middle Initial)
C. TAMMY BALDWIN FOR SENATE

Mailing Address P.O. BOX 696

City MADISON State WI Zip Code 53701

Purpose of Disbursement
ERMK: ROBYN HELMLINGER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
BALDWIN, TAMMY, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: WI District:

Date of Disbursement: 04 / 12 / 2017

FEC Identification Number: C00326801
Transaction ID : EXPB12639

Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1015.00

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

**SCHEDULE 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)
A. TAMMY BALDWIN FOR SENATE

Mailing Address P.O. BOX 696

City MADISON State WI Zip Code 53701

Purpose of Disbursement
ERMK: ROBIN BASS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
BALDWIN, TAMMY, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: WI District:

Date of Disbursement: 04 / 12 / 2017

FEC Identification Number: **C00326801**
Transaction ID : **EXPB12640**
Amount of Each Disbursement this Period: 5.00

Memo Item

Full Name (Last, First, Middle Initial)
B. GILLIBRAND FOR SENATE

Mailing Address 313 C STREET, NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
ERMK: TARA JASPER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
GILLIBRAND, KIRSTEN ELIZABETH, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: NY District:

Date of Disbursement: 04 / 19 / 2017

FEC Identification Number: **C00413914**
Transaction ID : **EXPB12682**
Amount of Each Disbursement this Period: 1000.00

Memo Item

Full Name (Last, First, Middle Initial)
C. GILLIBRAND FOR SENATE

Mailing Address 313 C STREET, NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
ERMK: LINDA KAMRAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
GILLIBRAND, KIRSTEN ELIZABETH, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: NY District:

Date of Disbursement: 04 / 19 / 2017

FEC Identification Number: **C00413914**
Transaction ID : **EXPB12683**
Amount of Each Disbursement this Period: 1700.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2705.00

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

**SCHEDULE 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. MCCASKILL SENATE FUND

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 300077

City ST LOUIS State MO Zip Code 63130

Purpose of Disbursement
ERMK: LINDA KAMRAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
MCCASKILL, CLAIRE, , ,

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

Date of Disbursement

MM / DD / YYYY
04 / 19 / 2017

FEC Identification Number

C C00577148

Transaction ID : EXPB12684

Amount of Each Disbursement this Period

1700.00

Memo Item

B. STABENOW FOR US SENATE

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 4945

City EAST LANSING State MI Zip Code 48826

Purpose of Disbursement
ERMK: JOANN LOULAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
STABENOW, DEBBIE, , ,

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

Date of Disbursement

MM / DD / YYYY
04 / 19 / 2017

FEC Identification Number

C C00344473

Transaction ID : EXPB12672

Amount of Each Disbursement this Period

1000.00

Memo Item

C. STABENOW FOR US SENATE

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 4945

City EAST LANSING State MI Zip Code 48826

Purpose of Disbursement
ERMK: LISA HONIG-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
STABENOW, DEBBIE, , ,

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

Date of Disbursement

MM / DD / YYYY
04 / 19 / 2017

FEC Identification Number

C C00344473

Transaction ID : EXPB12673

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

3700.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)
A. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City EAST LANSING State MI Zip Code 48826

Purpose of Disbursement
ERMK: DALE SCHROEDEL-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
STABENOW, DEBBIE, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: MI District:

Date of Disbursement: 04 / 19 / 2017

FEC Identification Number: C00344473
Transaction ID : EXPB12674

Amount of Each Disbursement this Period: 1000.00

Memo Item

Full Name (Last, First, Middle Initial)
B. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City EAST LANSING State MI Zip Code 48826

Purpose of Disbursement
ERMK: SHANNON HUNT-SCOTT-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
STABENOW, DEBBIE, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: MI District:

Date of Disbursement: 04 / 19 / 2017

FEC Identification Number: C00344473
Transaction ID : EXPB12675

Amount of Each Disbursement this Period: 1000.00

Memo Item

Full Name (Last, First, Middle Initial)
C. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City EAST LANSING State MI Zip Code 48826

Purpose of Disbursement
ERMK: TOD COHEN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
STABENOW, DEBBIE, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: MI District:

Date of Disbursement: 04 / 19 / 2017

FEC Identification Number: C00344473
Transaction ID : EXPB12676

Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3000.00

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

**SCHEDULE 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)
A. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City EAST LANSING State MI Zip Code 48826

Purpose of Disbursement
ERMK: STACY MASON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
STABENOW, DEBBIE, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: MI District:

Date of Disbursement: 04 / 19 / 2017

FEC Identification Number: C00344473
Transaction ID : EXPB12677

Amount of Each Disbursement this Period: 1000.00

Memo Item

Full Name (Last, First, Middle Initial)
B. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City EAST LANSING State MI Zip Code 48826

Purpose of Disbursement
ERMK: KAREN SILVERMAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
STABENOW, DEBBIE, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: MI District:

Date of Disbursement: 04 / 19 / 2017

FEC Identification Number: C00344473
Transaction ID : EXPB12678

Amount of Each Disbursement this Period: 1000.00

Memo Item

Full Name (Last, First, Middle Initial)
C. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City EAST LANSING State MI Zip Code 48826

Purpose of Disbursement
ERMK: SAMUEL SCHILLACE-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
STABENOW, DEBBIE, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: MI District:

Date of Disbursement: 04 / 19 / 2017

FEC Identification Number: C00344473
Transaction ID : EXPB12679

Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3000.00

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

**SCHEDULE 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. STABENOW FOR US SENATE

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 4945

City
EAST LANSING

State
MI

Zip Code
48826

Purpose of Disbursement
ERMK: SHEILA SCHROEDER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
STABENOW, DEBBIE, , ,

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: MI District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	1	7

FEC Identification Number

C C00344473

Transaction ID : EXPB12680

Amount of Each Disbursement this Period

1000.00

Memo Item

B. STABENOW FOR US SENATE

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 4945

City
EAST LANSING

State
MI

Zip Code
48826

Purpose of Disbursement
ERMK: LINDA KAMRAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
STABENOW, DEBBIE, , ,

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: MI District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	1	7

FEC Identification Number

C C00344473

Transaction ID : EXPB12681

Amount of Each Disbursement this Period

2700.00

Memo Item

C. ANNA ESHOO FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 555 CAPITOL MALL, SUITE 1425

City
SACRAMENTO

State
CA

Zip Code
95814

Purpose of Disbursement
ERMK: IVORY MADISON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
ESHOO, ANNA, , ,

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: CA District: 18

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	1	7

FEC Identification Number

C C00258475

Transaction ID : EXPB12713

Amount of Each Disbursement this Period

5.00

Memo Item

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

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

3705.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial) A. ANNA ESHOO FOR CONGRESS		Date of Disbursement MM / DD / YYYY 04 / 26 / 2017
Mailing Address 555 CAPITOL MALL, SUITE 1425		FEC Identification Number C C00258475 Transaction ID : EXPB12714
City SACRAMENTO	State CA	Zip Code 95814
Purpose of Disbursement ERMK: ANNE HENDREN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED		Amount of Each Disbursement this Period 5.00
Candidate Name ESHOO, ANNA, , ,		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" 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: CA	District: 18	

Full Name (Last, First, Middle Initial) B. BONAMICI FOR CONGRESS		Date of Disbursement MM / DD / YYYY 04 / 26 / 2017
Mailing Address PO BOX 1632		FEC Identification Number C C00500421 Transaction ID : EXPB12703
City BEAVERTON	State OR	Zip Code 97075
Purpose of Disbursement ERMK: JUDY WEIL-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED		Amount of Each Disbursement this Period 5.00
Candidate Name BONAMICI, SUZANNE, , ,		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" 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: OR	District: 01	

Full Name (Last, First, Middle Initial) C. BONAMICI FOR CONGRESS		Date of Disbursement MM / DD / YYYY 04 / 26 / 2017
Mailing Address PO BOX 1632		FEC Identification Number C C00500421 Transaction ID : EXPB12704
City BEAVERTON	State OR	Zip Code 97075
Purpose of Disbursement ERMK: JUDITH HUGHES-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED		Amount of Each Disbursement this Period 10.00
Candidate Name BONAMICI, SUZANNE, , ,		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" 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: OR	District: 01	

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

20.00

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

**SCHEDULE 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. BONAMICI FOR CONGRESS

Mailing Address PO BOX 1632

City BEAVERTON State OR Zip Code 97075

Purpose of Disbursement
ERMK: IVORY MADISON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
BONAMICI, SUZANNE, , ,

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

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	1	7

FEC Identification Number

C C00500421

Transaction ID : EXPB12705

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

B. BONAMICI FOR CONGRESS

Mailing Address PO BOX 1632

City BEAVERTON State OR Zip Code 97075

Purpose of Disbursement
ERMK: ANNE HENDREN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
BONAMICI, SUZANNE, , ,

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

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	1	7

FEC Identification Number

C C00500421

Transaction ID : EXPB12706

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

C. CATHERINE CORTEZ MASTO FOR SENATE

Mailing Address 8020 SOUTH RAINBOW BLVD. SUITE 100

City LAS VEGAS State NV Zip Code 89139

Purpose of Disbursement
ERMK: JUDY WEIL-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
MASTO, CATHERINE CORTEZ, , ,

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

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	1	7

FEC Identification Number

C C00575548

Transaction ID : EXPB12697

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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Memo Item

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

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

1	5	0	0	0	0	0	0	0	0
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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)

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

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial) A. GILLIBRAND FOR SENATE		Date of Disbursement MM / DD / YYYY 04 / 26 / 2017
Mailing Address 313 C STREET, NE		FEC Identification Number C00413914 Transaction ID : EXPB12689 Amount of Each Disbursement this Period 1000.00
City WASHINGTON	State DC	Zip Code 20002
Purpose of Disbursement ERMK: DEBBY HOPKINS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED		Category/ Type
Candidate Name GILLIBRAND, KIRSTEN ELIZABETH, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY	District:	

Full Name (Last, First, Middle Initial) B. GILLIBRAND FOR SENATE		Date of Disbursement MM / DD / YYYY 04 / 26 / 2017
Mailing Address 313 C STREET, NE		FEC Identification Number C00413914 Transaction ID : EXPB12690 Amount of Each Disbursement this Period 5.00
City WASHINGTON	State DC	Zip Code 20002
Purpose of Disbursement ERMK: SUSANNE STEWART-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED		Category/ Type
Candidate Name GILLIBRAND, KIRSTEN ELIZABETH, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY	District:	

Full Name (Last, First, Middle Initial) C. JUDY CHU FOR CONGRESS		Date of Disbursement MM / DD / YYYY 04 / 26 / 2017
Mailing Address 16633 VENTURA BLVD # 1008		FEC Identification Number C00458125 Transaction ID : EXPB12709 Amount of Each Disbursement this Period 5.00
City ENCINO	State CA	Zip Code 91436
Purpose of Disbursement ERMK: IVORY MADISON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED		Category/ Type
Candidate Name CHU, JUDY, , ,		
Office Sought: <input checked="" 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: CA	District: 27	

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

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

1010.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. JUDY CHU FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 16633 VENTURA BLVD # 1008

City ENCINO State CA Zip Code 91436

Purpose of Disbursement ERMK: ANNE HENDREN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED
Candidate Name

CHU, JUDY, , ,

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: CA District: 27

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 26 / 2017

FEC Identification Number

C C00458125

Transaction ID : EXPB12710

Amount of Each Disbursement this Period

5.00

Memo Item

B. JULIA BROWNLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 2018

City THOUSAND OAKS State CA Zip Code 91358

Purpose of Disbursement ERMK: JUDY WEIL-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED
Candidate Name

BROWNLEY, JULIA, , ,

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: CA District: 26

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 26 / 2017

FEC Identification Number

C C00513077

Transaction ID : EXPB12694

Amount of Each Disbursement this Period

5.00

Memo Item

C. JULIA BROWNLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 2018

City THOUSAND OAKS State CA Zip Code 91358

Purpose of Disbursement ERMK: JUDITH HUGHES-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED
Candidate Name

BROWNLEY, JULIA, , ,

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: CA District: 26

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 26 / 2017

FEC Identification Number

C C00513077

Transaction ID : EXPB12695

Amount of Each Disbursement this Period

10.00

Memo Item

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

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

20.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. JULIA BROWNLEY FOR CONGRESS

Mailing Address PO BOX 2018

City THOUSAND OAKS State CA Zip Code 91358

Purpose of Disbursement ERMK: SHELLEY MARDER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED
Candidate Name

BROWNLEY, JULIA, , ,

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: CA District: 26

Date of Disbursement

MM / DD / YYYY
04 / 26 / 2017

FEC Identification Number

C C00513077

Transaction ID : EXPB12696

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

B. KAMALA HARRIS FOR SENATE

Mailing Address 777 S FIGUEROA ST STE 4050

City LOS ANGELES State CA Zip Code 90017

Purpose of Disbursement ERMK: SUSANNE STEWART-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED
Candidate Name

HARRIS, KAMALA, , ,

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

Date of Disbursement

MM / DD / YYYY
04 / 26 / 2017

FEC Identification Number

C C00571919

Transaction ID : EXPB12718

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

C. KLOBUCHAR FOR MINNESOTA

Mailing Address PO BOX 4146

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement ERMK: SUSANNE STEWART-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED
Candidate Name

KLOBUCHAR, AMY, , ,

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

Date of Disbursement

MM / DD / YYYY
04 / 26 / 2017

FEC Identification Number

C C00431353

Transaction ID : EXPB12717

Amount of Each Disbursement this Period

5.00

Memo Item

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

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

15.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)
A. LOUISE SLAUGHTER RE-ELECTION COMMITTEE

Mailing Address P.O. BOX 30632

City ROCHESTER State NY Zip Code 14603

Purpose of Disbursement
ERMK: IVORY MADISON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
SLAUGHTER, LOUISE, , ,

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

State: NY District: 25

Date of Disbursement: 04 / 26 / 2017

FEC Identification Number: **C** C00213611
Transaction ID : EXPB12715
Amount of Each Disbursement this Period: 5.00

Memo Item

Full Name (Last, First, Middle Initial)
B. LOUISE SLAUGHTER RE-ELECTION COMMITTEE

Mailing Address P.O. BOX 30632

City ROCHESTER State NY Zip Code 14603

Purpose of Disbursement
ERMK: ANNE HENDREN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
SLAUGHTER, LOUISE, , ,

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

State: NY District: 25

Date of Disbursement: 04 / 26 / 2017

FEC Identification Number: **C** C00213611
Transaction ID : EXPB12716
Amount of Each Disbursement this Period: 5.00

Memo Item

Full Name (Last, First, Middle Initial)
C. NITA LOWEY FOR CONGRESS

Mailing Address PO BOX 271

City WHITE PLAINS State NY Zip Code 10605

Purpose of Disbursement
ERMK: IVORY MADISON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
LOWEY, NITA, , ,

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

State: NY District:

Date of Disbursement: 04 / 26 / 2017

FEC Identification Number: **C** C00219881
Transaction ID : EXPB12711
Amount of Each Disbursement this Period: 5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 15.00

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

**SCHEDULE 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. NITA LOWEY FOR CONGRESS

Mailing Address PO BOX 271

City WHITE PLAINS State NY Zip Code 10605

Purpose of Disbursement
ERMK: ANNE HENDREN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED
Candidate Name

LOWEY, NITA, , ,

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

Date of Disbursement

MM / DD / YYYY
04 / 26 / 2017

FEC Identification Number

C C00219881

Transaction ID : EXPB12712

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

B. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City EAST LANSING State MI Zip Code 48826

Purpose of Disbursement
ERMK: AMY RAO-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED
Candidate Name

STABENOW, DEBBIE, , ,

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

Date of Disbursement

MM / DD / YYYY
04 / 26 / 2017

FEC Identification Number

C C00344473

Transaction ID : EXPB12720

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. TAMMY BALDWIN FOR SENATE

Mailing Address P.O. BOX 696

City MADISON State WI Zip Code 53701

Purpose of Disbursement
ERMK: MELINDA MATTES-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED
Candidate Name

BALDWIN, TAMMY, , ,

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

Date of Disbursement

MM / DD / YYYY
04 / 26 / 2017

FEC Identification Number

C C00326801

Transaction ID : EXPB12685

Amount of Each Disbursement this Period

50.00

Memo Item

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

1055.00

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

**SCHEDULE 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)
A. TAMMY BALDWIN FOR SENATE

Mailing Address P.O. BOX 696

City MADISON State WI Zip Code 53701

Purpose of Disbursement
ERMK: KAREN CAIN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
BALDWIN, TAMMY, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: WI District:

Date of Disbursement: 04 / 26 / 2017

FEC Identification Number: C00326801
Transaction ID : EXPB12686

Amount of Each Disbursement this Period: 50.00

Memo Item

Full Name (Last, First, Middle Initial)
B. TAMMY BALDWIN FOR SENATE

Mailing Address P.O. BOX 696

City MADISON State WI Zip Code 53701

Purpose of Disbursement
ERMK: EMILY GARRISON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
BALDWIN, TAMMY, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: WI District:

Date of Disbursement: 04 / 26 / 2017

FEC Identification Number: C00326801
Transaction ID : EXPB12687

Amount of Each Disbursement this Period: 50.00

Memo Item

Full Name (Last, First, Middle Initial)
C. TAMMY BALDWIN FOR SENATE

Mailing Address P.O. BOX 696

City MADISON State WI Zip Code 53701

Purpose of Disbursement
ERMK: SUSANNE STEWART-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
BALDWIN, TAMMY, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: WI District:

Date of Disbursement: 04 / 26 / 2017

FEC Identification Number: C00326801
Transaction ID : EXPB12688

Amount of Each Disbursement this Period: 5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 105.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial) A. TAMMY FOR ILLINOIS		Date of Disbursement MM / DD / YYYY 04 / 26 / 2017
Mailing Address P.O. BOX 59568		FEC Identification Number C00574889 Transaction ID : EXPB12700 Amount of Each Disbursement this Period 5.00
City SCHAUMBURG	State IL	Zip Code 60159
Purpose of Disbursement ERMK: JUDY WEIL-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED		Category/ Type
Candidate Name DUCKWORTH, TAMMY, , ,		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL	District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. TAMMY FOR ILLINOIS		Date of Disbursement MM / DD / YYYY 04 / 26 / 2017
Mailing Address P.O. BOX 59568		FEC Identification Number C00574889 Transaction ID : EXPB12701 Amount of Each Disbursement this Period 10.00
City SCHAUMBURG	State IL	Zip Code 60159
Purpose of Disbursement ERMK: JUDITH HUGHES-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED		Category/ Type
Candidate Name DUCKWORTH, TAMMY, , ,		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL	District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. TAMMY FOR ILLINOIS		Date of Disbursement MM / DD / YYYY 04 / 26 / 2017
Mailing Address P.O. BOX 59568		FEC Identification Number C00574889 Transaction ID : EXPB12702 Amount of Each Disbursement this Period 5.00
City SCHAUMBURG	State IL	Zip Code 60159
Purpose of Disbursement ERMK: SHELLEY MARDER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED		Category/ Type
Candidate Name DUCKWORTH, TAMMY, , ,		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL	District:	<input type="checkbox"/> Memo Item

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

20.00

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

**SCHEDULE 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. THE NIKI TSONGAS COMMITTEE

Mailing Address PO BOX 1454

City
LOWELL

State
MA

Zip Code
01853

Purpose of Disbursement
ERMK: JUDY WEIL-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
TSONGAS, NIKI, , ,

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: MA District: 03

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 26 / 2017

FEC Identification Number

C C00433136

Transaction ID : **EXPB12691**

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

B. THE NIKI TSONGAS COMMITTEE

Mailing Address PO BOX 1454

City
LOWELL

State
MA

Zip Code
01853

Purpose of Disbursement
ERMK: JUDITH HUGHES-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
TSONGAS, NIKI, , ,

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: MA District: 03

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 26 / 2017

FEC Identification Number

C C00433136

Transaction ID : **EXPB12692**

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

C. THE NIKI TSONGAS COMMITTEE

Mailing Address PO BOX 1454

City
LOWELL

State
MA

Zip Code
01853

Purpose of Disbursement
ERMK: SHELLEY MARDER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
TSONGAS, NIKI, , ,

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: MA District: 03

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 26 / 2017

FEC Identification Number

C C00433136

Transaction ID : **EXPB12693**

Amount of Each Disbursement this Period

5.00

Memo Item

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

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

20.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. TULSI FOR HAWAII

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 75561

City KAPOLEI State HI Zip Code 96707

Purpose of Disbursement
ERMK: JUDY WEIL-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
GABBARD, TULSI, , ,

Office Sought: House Senate President
State: HI District: 02

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 26 / 2017

FEC Identification Number: C00497396
Transaction ID : EXPB12707

Amount of Each Disbursement this Period: 5.00

Memo Item

B. TULSI FOR HAWAII

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 75561

City KAPOLEI State HI Zip Code 96707

Purpose of Disbursement
ERMK: JUDITH HUGHES-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name
GABBARD, TULSI, , ,

Office Sought: House Senate President
State: HI District: 02

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 26 / 2017

FEC Identification Number: C00497396
Transaction ID : EXPB12708

Amount of Each Disbursement this Period: 10.00

Memo Item

C.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 15.00

TOTAL This Period (last page this line number only)..... ▶ 47652.30

**SCHEDULE 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 checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial) A. AGREST, DIANA, , ,		Date of Disbursement MM / DD / YYYY 04 / 10 / 2017
Mailing Address 103 EAST 86TH STREET		FEC Identification Number C Transaction ID : EXPB12426 Amount of Each Disbursement this Period 5.00
City NEW YOTK	State NY	
Zip Code 10028		Memo Item <input type="checkbox"/>
Purpose of Disbursement REFUND OF CONTRIBUTION. ERMK: ELIZABETH FOR MA.		
Candidate Name		Category/Type 010
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. APODACA, ALIANA, , ,		Date of Disbursement MM / DD / YYYY 04 / 10 / 2017
Mailing Address 814 WYOMING AVENUE		FEC Identification Number C Transaction ID : EXPB12411 Amount of Each Disbursement this Period 100.00
City EL PASO	State TX	
Zip Code 79902		Memo Item <input type="checkbox"/>
Purpose of Disbursement REFUND OF CONTRIBUTION. ERMK: PODER PAC		
Candidate Name		Category/Type 010
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. CARLTON, PATRICIA, , ,		Date of Disbursement MM / DD / YYYY 04 / 10 / 2017
Mailing Address 500 RODEO RD APT 1121		FEC Identification Number C Transaction ID : EXPB12419 Amount of Each Disbursement this Period 5.00
City SANTA FE	State NM	
Zip Code 87505		Memo Item <input type="checkbox"/>
Purpose of Disbursement REFUND OF CONTRIBUTION. ERMK: ANNA ESHOO FOR CONGRESS		
Candidate Name		Category/Type 010
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).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial) A. DOROSIN, LESLIE, , ,		Date of Disbursement M M / D D / Y Y Y Y Y Y 04 / 10 / 2017	
Mailing Address 3810 MAGNOLIA DR			
City PALO ALTO	State CA	Zip Code 94306	
Purpose of Disbursement REFUND OF CONTRIBUTION. ERMK: PAMELIA KEITH FOR SENATE		Category/ Type 010	FEC Identification Number C
Candidate Name		Transaction ID : EXPB12412 Amount of Each Disbursement this Period 7.50	
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:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. FRANCIS, KERRY, , ,		Date of Disbursement M M / D D / Y Y Y Y Y Y 04 / 10 / 2017	
Mailing Address 5940 ESTATES DRIVE			
City OAKLAND	State CA	Zip Code 94611	
Purpose of Disbursement REFUND OF CONTRIBUTION. ERMK: ELIZABETH FOR MA		Category/ Type 010	FEC Identification Number C
Candidate Name		Transaction ID : EXPB12423 Amount of Each Disbursement this Period 50.00	
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:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. HABIB, SARAH, , ,		Date of Disbursement M M / D D / Y Y Y Y Y Y 04 / 10 / 2017	
Mailing Address 7740 GIVEN ROAD			
City CINCINNATI	State OH	Zip Code 45243	
Purpose of Disbursement REFUND OF CONTRIBUTION. ERMK: KAREN BASS FOR CONGRESS		Category/ Type 010	FEC Identification Number C
Candidate Name		Transaction ID : EXPB12416 Amount of Each Disbursement this Period 5.00	
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:	<input type="checkbox"/> Memo Item		

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

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

62.50

**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 checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. HOOP, DONNA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3272 STONEHURST DR

City EL DORADO HILLS State CA Zip Code 95762

Purpose of Disbursement REFUND OF CONTRIBUTION. ERMK: MONICA VERNON FOR CONGRESS

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 10 / 2017

FEC Identification Number: C

Transaction ID : EXPB12421

Amount of Each Disbursement this Period: 5.00

Memo Item

B. HOWARD, GLORIA J, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 12425 NORTH DERRINGER ROAD

City MARANA State AZ Zip Code 85653

Purpose of Disbursement ERMK: MONICA VERNON FOR CONGRESS

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 10 / 2017

FEC Identification Number: C

Transaction ID : EXPB12422

Amount of Each Disbursement this Period: 5.00

Memo Item

C. HUNT-SCOTT, SHANNON, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 16348 AZTEC RIDGE DR

City LOS GATOS State CA Zip Code 95030

Purpose of Disbursement REFUND OF CONTRIBUTION. ERMK: ELIZABETH FOR MA

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 10 / 2017

FEC Identification Number: C

Transaction ID : EXPB12427

Amount of Each Disbursement this Period: 20.20

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 30.20

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

**SCHEDULE 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 checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial) A. MASON, STACY, , ,		Date of Disbursement MM / DD / YYYY 04 / 10 / 2017
Mailing Address 839 MELVILLE AVENUE		FEC Identification Number C [REDACTED] Transaction ID : EXPB12415 Amount of Each Disbursement this Period 5.00
City PALO ALTO	State CA	Zip Code 94301
Purpose of Disbursement REFUND OF CONTRIBUTION. ERMK: GRACE FOR NEW YORK		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. MILLER, KATHARINE, , ,		Date of Disbursement MM / DD / YYYY 04 / 10 / 2017
Mailing Address 849 LINCOLN AVE		FEC Identification Number C [REDACTED] Transaction ID : EXPB12413 Amount of Each Disbursement this Period 15.00
City PALO ALTO	State CA	Zip Code 94301
Purpose of Disbursement REFUND OF CONTRIBUTION. ERMK: PAMELIA KEITH FOR SENATE		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. MUKHOPADHYAY, CAROL, , ,		Date of Disbursement MM / DD / YYYY 04 / 10 / 2017
Mailing Address 30 WEST POINT PLACE		FEC Identification Number C [REDACTED] Transaction ID : EXPB12418 Amount of Each Disbursement this Period 5.00
City SAN MATEO	State CA	Zip Code 94402
Purpose of Disbursement REFUND OF CONTRIBUTION. ERMK: ANNA ESHOO FOR CONGRESS		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
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).....▶	25.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE 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 checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. NEWMAN, BETH, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 712 RIDGEWAY ST

City DALLAS State TX Zip Code 75214

Purpose of Disbursement REFUND OF CONTRIBUTION. ERMK: ELIZABETH FOR MA

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 10 / 2017

FEC Identification Number: C

Transaction ID : EXPB12424

Amount of Each Disbursement this Period: 5.00

Memo Item

B. TOEVS, LOIS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 68-3549 AWAMOA PLACE

City WAIKOLOA State HI Zip Code 96738

Purpose of Disbursement REFUND OF CONTRIBUTION. ERMK: MONICA VERNON FOR CONGRESS

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 10 / 2017

FEC Identification Number: C

Transaction ID : EXPB12417

Amount of Each Disbursement this Period: 5.00

Memo Item

C. WERBINSKI, JANICE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 10073 WOODLAWN DRIVE

City PORTAGE State MI Zip Code 49002

Purpose of Disbursement REFUND OF CONTRIBUTION. ERMK: PAMELIA KEITH FOR SENATE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 10 / 2017

FEC Identification Number: C

Transaction ID : EXPB12414

Amount of Each Disbursement this Period: 5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 15.00

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

**SCHEDULE 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 checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. WILLETT, BRENDA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 117 PINE ST

City NACOGDOCHES State TX Zip Code 75965

Purpose of Disbursement REFUND OF CONTRIBUTION. ERMK: ELIZABETH FOR MA

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 10 / 2017

FEC Identification Number: C

Transaction ID : EXPB12425

Amount of Each Disbursement this Period: 10.00

Memo Item

B. WILSON, BARBARA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 27305 W. PONTIAC DR.

City BUCKEYE State AZ Zip Code 85396

Purpose of Disbursement REFUND OF CONTRIBUTION. ERMK: ANNA ESHOO FOR CONGRESS

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 10 / 2017

FEC Identification Number: C

Transaction ID : EXPB12420

Amount of Each Disbursement this Period: 10.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

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: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	20.00
TOTAL This Period (last page this line number only).....▶	262.70

**SCHEDULE 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 checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)
A. ANNA ESHOO FOR CONGRESS

Mailing Address 555 CAPITOL MALL, SUITE 1425

City SACRAMENTO State CA Zip Code 95814

Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name
ESHOO, ANNA, , ,

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

State: CA District: 18

Date of Disbursement: 04 / 10 / 2017

FEC Identification Number: C00258475
Transaction ID : EXPB12437

Amount of Each Disbursement this Period: 0.40

Memo Item

Full Name (Last, First, Middle Initial)
B. ANNA ESHOO FOR CONGRESS

Mailing Address 555 CAPITOL MALL, SUITE 1425

City SACRAMENTO State CA Zip Code 95814

Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name
ESHOO, ANNA, , ,

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

State: CA District: 18

Date of Disbursement: 04 / 10 / 2017

FEC Identification Number: C00258475
Transaction ID : EXPB12436

Amount of Each Disbursement this Period: 0.20

Memo Item

Full Name (Last, First, Middle Initial)
C. ANNA ESHOO FOR CONGRESS

Mailing Address 555 CAPITOL MALL, SUITE 1425

City SACRAMENTO State CA Zip Code 95814

Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name
ESHOO, ANNA, , ,

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

State: CA District: 18

Date of Disbursement: 04 / 10 / 2017

FEC Identification Number: C00258475
Transaction ID : EXPB12435

Amount of Each Disbursement this Period: 0.20

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.80

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

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

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

FOR LINE NUMBER:
(check only one)

<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 checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial) A. ELIZABETH FOR MA INC		Date of Disbursement MM / DD / YYYY 04 / 10 / 2017
Mailing Address PO BOX 290568		FEC Identification Number C00500843 Transaction ID : EXPB12440
City BOSTON	State MA	Zip Code 02129
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/Type 010
Candidate Name WARREN, ELIZABETH, , ,		Amount of Each Disbursement this Period 2.00
Office Sought: <input checked="" 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: MA District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. ELIZABETH FOR MA INC		Date of Disbursement MM / DD / YYYY 04 / 10 / 2017
Mailing Address PO BOX 290568		FEC Identification Number C00500843 Transaction ID : EXPB12442
City BOSTON	State MA	Zip Code 02129
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/Type 010
Candidate Name WARREN, ELIZABETH, , ,		Amount of Each Disbursement this Period 0.40
Office Sought: <input checked="" 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: MA District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. ELIZABETH FOR MA INC		Date of Disbursement MM / DD / YYYY 04 / 10 / 2017
Mailing Address PO BOX 290568		FEC Identification Number C00500843 Transaction ID : EXPB12441
City BOSTON	State MA	Zip Code 02129
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/Type 010
Candidate Name WARREN, ELIZABETH, , ,		Amount of Each Disbursement this Period 0.20
Office Sought: <input checked="" 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: MA District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	2.60
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<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 checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial) A. ELIZABETH FOR MA INC		Date of Disbursement MM / DD / YYYY 04 / 10 / 2017
Mailing Address PO BOX 290568		FEC Identification Number C00500843 Transaction ID : EXPB12444
City BOSTON	State MA	Zip Code 02129
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/Type 010
Candidate Name WARREN, ELIZABETH, , ,		Amount of Each Disbursement this Period 0.81
Office Sought: <input checked="" 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: MA District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. ELIZABETH FOR MA INC		Date of Disbursement MM / DD / YYYY 04 / 10 / 2017
Mailing Address PO BOX 290568		FEC Identification Number C00500843 Transaction ID : EXPB12443
City BOSTON	State MA	Zip Code 02129
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/Type 010
Candidate Name WARREN, ELIZABETH, , ,		Amount of Each Disbursement this Period 0.20
Office Sought: <input checked="" 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: MA District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. GRACE FOR NEW YORK		Date of Disbursement MM / DD / YYYY 04 / 10 / 2017
Mailing Address PO BOX 656555		FEC Identification Number C00516666 Transaction ID : EXPB12432
City FRESH MEADOWS	State NY	Zip Code 11365
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/Type 010
Candidate Name MENG, GRACE, , ,		Amount of Each Disbursement this Period 0.35
Office Sought: <input checked="" 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: NY District: 06	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	1.36
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<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 checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KAREN BASS FOR CONGRESS

Mailing Address 777 S. FIGUEROA STREET SUITE 4050

City LOS ANGELES State CA Zip Code 90017

Purpose of Disbursement
REFUND OF CONTRIBUTION

010

Candidate Name
BASS, KAREN, , ,

Category/
Type

Office Sought: House
 Senate
 President
State: CA District: 37

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 10 / 2017

FEC Identification Number

C C00476523

Transaction ID : EXPB12433

Amount of Each Disbursement this Period

0.20

Memo Item

Full Name (Last, First, Middle Initial)

B. MONICA VERNON FOR CONGRESS

Mailing Address PO BOX 1635

City CEDAR RAPIDS State IA Zip Code 52406

Purpose of Disbursement
REFUND OF CONTRIBUTION

010

Candidate Name
VERNON, MONICA, , ,

Category/
Type

Office Sought: House
 Senate
 President
State: IA District: 01

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 10 / 2017

FEC Identification Number

C C00571562

Transaction ID : EXPB12438

Amount of Each Disbursement this Period

0.20

Memo Item

Full Name (Last, First, Middle Initial)

C. MONICA VERNON FOR CONGRESS

Mailing Address PO BOX 1635

City CEDAR RAPIDS State IA Zip Code 52406

Purpose of Disbursement
REFUND OF CONTRIBUTION

010

Candidate Name
VERNON, MONICA, , ,

Category/
Type

Office Sought: House
 Senate
 President
State: IA District: 01

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 10 / 2017

FEC Identification Number

C C00571562

Transaction ID : EXPB12434

Amount of Each Disbursement this Period

0.20

Memo Item

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

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

0.60

**SCHEDULE 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 checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. MONICA VERNON FOR CONGRESS

Mailing Address PO BOX 1635

City
CEDAR RAPIDS

State
IA

Zip Code
52406

Purpose of Disbursement
REFUND OF CONTRIBUTION

010

Candidate Name

VERNON, MONICA, , ,

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: IA District: 01

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 10 / 2017

FEC Identification Number

C C00571562

Transaction ID : EXPB12439

Amount of Each Disbursement this Period

0.20

Memo Item

Full Name (Last, First, Middle Initial)

B. PAMELA KEITH FOR SENATE 2016

Mailing Address 120 N RIVER DRIVE W

City
JUPITER

State
FL

Zip Code
33458

Purpose of Disbursement
REFUND OF CONTRIBUTION

010

Candidate Name

KEITH, PAM, , ,

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: FL District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 10 / 2017

FEC Identification Number

C C00570564

Transaction ID : EXPB12430

Amount of Each Disbursement this Period

1.05

Memo Item

Full Name (Last, First, Middle Initial)

C. PAMELA KEITH FOR SENATE 2016

Mailing Address 120 N RIVER DRIVE W

City
JUPITER

State
FL

Zip Code
33458

Purpose of Disbursement
REFUND OF CONTRIBUTION

010

Candidate Name

KEITH, PAM, , ,

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: FL District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 10 / 2017

FEC Identification Number

C C00570564

Transaction ID : EXPB12431

Amount of Each Disbursement this Period

0.35

Memo Item

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

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

1.60

**SCHEDULE 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 checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. PAMELA KEITH FOR SENATE 2016

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 120 N RIVER DRIVE W

M M M	/	D D D	/	Y Y Y Y Y
04		10		2017

City JUPITER State FL Zip Code 33458

FEC Identification Number

Purpose of Disbursement
REFUND OF CONTRIBUTION

C	C00570564
---	-----------

Candidate Name
KEITH, PAM, , ,

010
Category/ Type

Transaction ID : EXPB12429

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President
State: FL District:

Disbursement For:
 Primary General
 Other (specify) ▼

0.53

Memo Item

B. PODER PAC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 520 MAPLE COURT

M M M	/	D D D	/	Y Y Y Y Y
04		10		2017

City FALLS CHURCH State VA Zip Code 22041

FEC Identification Number

Purpose of Disbursement
REFUND OF CONTRIBUTION

C	C00452276
---	-----------

Candidate Name
PODER PAC

010
Category/ Type

Transaction ID : EXPB12428

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

7.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

M M M	/	D D D	/	Y Y Y Y Y

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C	
---	--

Candidate Name

Category/ Type

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

--

Memo Item

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

7.53

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

14.49

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 129 OF 130
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor HANSON BRIDGETT LLP			Nature of Debt (Purpose): LEGAL AND COMPLIANCE
Mailing Address 425 MARKET STREET, 26TH FLOOR			
City SAN FRANCISCO	State CA	Zip Code 94105	

Outstanding Balance Beginning This Period 1305.00	Transaction ID : PAYD3367	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1305.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor VIEW AVENUE GROUP			Nature of Debt (Purpose): COMPLIANCE/REPORTING
Mailing Address 393 7TH AVENUE, SUITE 301			
City SAN FRANCISCO	State CA	Zip Code 94118	

Outstanding Balance Beginning This Period 1992.50	Transaction ID : PAYD9591	
Amount Incurred This Period 0.00	Payment This Period 1992.50	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor VIEW AVENUE GROUP			Nature of Debt (Purpose): COMPLIANCE/REPORTING
Mailing Address 393 7TH AVENUE, SUITE 301			
City SAN FRANCISCO	State CA	Zip Code 94118	

Outstanding Balance Beginning This Period 3007.50	Transaction ID : PAYD9592	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3007.50

1) SUBTOTALS This Period This Page (optional)..... ▶	4312.50
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 130 OF 130
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor VIEW AVENUE GROUP			Nature of Debt (Purpose): COMPLIANCE SERVICES
Mailing Address 393 7TH AVENUE, SUITE 301			
City SAN FRANCISCO	State CA	Zip Code 94118	

Outstanding Balance Beginning This Period 1890.94	Transaction ID : PAYD11385	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1890.94

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor VIEW AVENUE GROUP			Nature of Debt (Purpose): COMPLIANCE SERVICES
Mailing Address 393 7TH AVENUE, SUITE 301			
City SAN FRANCISCO	State CA	Zip Code 94118	

Outstanding Balance Beginning This Period 2501.05	Transaction ID : PAYD12409	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2501.05

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor VIEW AVENUE GROUP			Nature of Debt (Purpose): COMPLIANCE SERVICES
Mailing Address 393 7TH AVENUE, SUITE 301			
City SAN FRANCISCO	State CA	Zip Code 94118	

Outstanding Balance Beginning This Period 0.00	Transaction ID : PAYD12795	
Amount Incurred This Period 1282.50	Payment This Period 0.00	Outstanding Balance at Close of This Period 1282.50

1) SUBTOTALS This Period This Page (optional)..... ▶	5674.49
2) TOTALS This Period (last page this line number only)..... ▶	9986.99
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) ▶	9986.99