

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) PO BOX 72861 MARIETTA GA 30007

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

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

5. Covering Period 07 / 01 / 2017 through 12 / 31 / 2017

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

Signature of Treasurer Krason, Patrick, , [Electronically Filed] Date 01 / 31 / 2018

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

WOMEN VOTE SMART

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>	<input type="text"/>	<input type="text" value="6307.93"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1845.03"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="6996.00"/>	<input type="text" value="7044.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="8841.03"/>	<input type="text" value="13351.93"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="6422.38"/>	<input type="text" value="10933.28"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2418.65"/>	<input type="text" value="2418.65"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="17836.13"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

WOMEN VOTE SMART

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1950.00	1950.00
(ii) Unitemized	5046.00	5094.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	6996.00	7044.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	6996.00	7044.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total 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)).....▶	6996.00	7044.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	6996.00	7044.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

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	6422.38	10933.28
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	6422.38	10933.28
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	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	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	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)) ..	6422.38	10933.28
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6422.38	10933.28

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	6996.00	7044.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6996.00	7044.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	6422.38	10933.28
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	6422.38	10933.28

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 13
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
WOMEN VOTE SMART

A. Christopher, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1132 Riverside Drive
 City CINCINNATI State OH Zip Code 45202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) retired Occupation (for Individual) retired
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2017
Transaction ID : SA11AI.4466
 Amount of Each Receipt this Period
 500.00
 Memo Item Contribution

B. Hall, Ollabelle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3603 Meadow lake Lane
 City HOUSTON State TX Zip Code 77027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) retired Occupation (for Individual) retired
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2017
Transaction ID : SA11AI.4172
 Amount of Each Receipt this Period
 250.00
 Memo Item Contribution

C. Harvell, Jim, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 367 Knollwood Dr
 City ANDERSON State SC Zip Code 29625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Info Requested Occupation (for Individual) Info Requested
 Receipt For: 2018
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2017
Transaction ID : SA11AI.4437
 Amount of Each Receipt this Period
 1000.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶	1750.00
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 7 OF 13
(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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMEN VOTE SMART

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Walton, Randie, , ,

Mailing Address 1611 N Hermitage Ave

City CHICAGO	State IL	Zip Code 60622
-----------------	-------------	-------------------

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

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

Receipt For: 2018
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
11 / 07 / 2017

Transaction ID : SA11AI.4443

Amount of Each Receipt this Period
200.00

Memo Item Contribution

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
MM / DD / YYYY

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
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	1950.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
WOMEN VOTE SMART

Full Name (Last, First, Middle Initial)

A. ABC Signs & Shirts

Mailing Address 5851 LaRue Steiner Rd

City Theodore State AL Zip Code 36582

Purpose of Disbursement Signs

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement
M M / D D / Y Y Y Y Y
12 / 08 / 2017

FEC Identification Number
C
Transaction ID : SB21B.4121
Amount of Each Disbursement this Period
451.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Anedot

Mailing Address PO Box 84314

City Baton Rouge State LA Zip Code 70884

Purpose of Disbursement Credit Card Processing Fees

Candidate Name

WOMEN VOTE SMART

Office Sought: House Senate President
State: District:

Disbursement For: 2017
 Primary General
 Other (specify)

Category/Type

Date of Disbursement
M M / D D / Y Y Y Y Y
12 / 31 / 2017

FEC Identification Number
C C00616912
Transaction ID : SB21B.4146
Amount of Each Disbursement this Period
324.74

Memo Item

Full Name (Last, First, Middle Initial)

C. A Political Firm, LLC

Mailing Address 2221 S Clark St

City Arlington State VA Zip Code 22202

Purpose of Disbursement FEC Compliance Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement
M M / D D / Y Y Y Y Y
10 / 15 / 2017

FEC Identification Number
C
Transaction ID : SB21B.4111
Amount of Each Disbursement this Period
500.00

Memo Item

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

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

1275.74

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)
WOMEN VOTE SMART

A. A Political Firm, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 2221 S Clark St

City Arlington State VA Zip Code 22202

Purpose of Disbursement
FEC Compliance Consulting

Candidate Name
WOMEN VOTE SMART

Office Sought: House Senate President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2017

FEC Identification Number: C 000616912
Transaction ID : SB21B.4115
Amount of Each Disbursement this Period: 500.00

Memo Item

B. Delta Airlines

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 20980

City Atlanta State GA Zip Code 30320

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: 11 / 14 / 2017

FEC Identification Number: C
Transaction ID : SB21B.4113
Amount of Each Disbursement this Period: 509.63

Memo Item

C. Enterprise Rent A Car

Full Name (Last, First, Middle Initial)

Mailing Address 600 Corp Park Dr

City St Louis State MO Zip Code 63105

Purpose of Disbursement
Travel

Candidate Name
WOMEN VOTE SMART

Office Sought: House Senate President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: 12 / 08 / 2017

FEC Identification Number: C 000616912
Transaction ID : SB21B.4119
Amount of Each Disbursement this Period: 490.58

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1500.21

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)
WOMEN VOTE SMART

Full Name (Last, First, Middle Initial) A. Kremer, Amy, , ,			Date of Disbursement MM / DD / YYYY 12 / 22 / 2017	
Mailing Address PO BOX 72861			FEC Identification Number C 000616912 Transaction ID : SB21B.4140	
City Marietta	State GA	Zip Code 30007	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement PAC Management Consulting Fee		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name WOMEN VOTE SMART		Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) B. Lyle, James, , ,			Date of Disbursement MM / DD / YYYY 12 / 22 / 2017	
Mailing Address PO BOX 72861			FEC Identification Number C Transaction ID : SB21B.4144	
City Marietta	State GA	Zip Code 30007	Amount of Each Disbursement this Period 206.36	
Purpose of Disbursement Expense Reimbursement		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name		Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) C. Marriott Prattville			Date of Disbursement MM / DD / YYYY 12 / 11 / 2017	
Mailing Address 2500 Legends Cir			FEC Identification Number C 000616912 Transaction ID : SB21B.4127	
City Prattville	State AL	Zip Code 36066	Amount of Each Disbursement this Period 443.17	
Purpose of Disbursement Hotel		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name WOMEN VOTE SMART		Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	1149.53
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)
WOMEN VOTE SMART

Full Name (Last, First, Middle Initial) A. Serkes, Kathryn, , ,		Date of Disbursement MM / DD / YYYY 12 / 22 / 2017	
Mailing Address PO BOX 72861		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4142 Amount of Each Disbursement this Period 500.00	
City Marietta	State GA	Zip Code 30007	Category/ Type
Purpose of Disbursement PAC Management Consulting Fee			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2017 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. The Rocket Science Group		Date of Disbursement MM / DD / YYYY 11 / 14 / 2017	
Mailing Address 675 Ponce de Leon Ave NE Ste 5000		FEC Identification Number C C00616912 Transaction ID : SB21B.4105 Amount of Each Disbursement this Period 415.00	
City Atlanta	State GA	Zip Code 30308	Category/ Type
Purpose of Disbursement Email Services			
Candidate Name WOMEN VOTE SMART		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. The Rocket Science Group		Date of Disbursement MM / DD / YYYY 11 / 15 / 2017	
Mailing Address 675 Ponce de Leon Ave NE Ste 5000		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4116 Amount of Each Disbursement this Period 100.00	
City Atlanta	State GA	Zip Code 30308	Category/ Type
Purpose of Disbursement Email Services			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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 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)
WOMEN VOTE SMART

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address P.O. Box 4846

City Trenton State NJ Zip Code 08650

Purpose of Disbursement Cellular Services

Candidate Name
WOMEN VOTE SMART

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 14 / 2017

FEC Identification Number

C C00616912

Transaction ID : SB21B.4107

Amount of Each Disbursement this Period

249.95

Memo Item

Full Name (Last, First, Middle Initial)

B. Verizon Wireless

Mailing Address P.O. Box 4846

City Trenton State NJ Zip Code 08650

Purpose of Disbursement Cellular Services

Candidate Name
WOMEN VOTE SMART

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 14 / 2017

FEC Identification Number

C C00616912

Transaction ID : SB21B.4109

Amount of Each Disbursement this Period

249.95

Memo Item

Full Name (Last, First, Middle Initial)

C. Verizon Wireless

Mailing Address P.O. Box 4846

City Trenton State NJ Zip Code 08650

Purpose of Disbursement Cellular Services

Candidate Name
WOMEN VOTE SMART

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 14 / 2017

FEC Identification Number

C C00616912

Transaction ID : SB21B.4110

Amount of Each Disbursement this Period

249.95

Memo Item

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

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

749.85

5690.33

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

NAME OF COMMITTEE (In Full)
WOMEN VOTE SMART

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

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

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

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

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

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

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