

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. Washington Women For Choice

ADDRESS (number and street) 603 Stewart Street #819 Seattle WA 98101

2. FEC IDENTIFICATION NUMBER C00368332 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, July 31 Mid-Year Report (X), Termination Report (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), Dec 20 (M12), Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S) (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 01/01/2013 through 06/30/2013

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

Type or Print Name of Treasurer Tracy Newman

Signature of Treasurer Tracy Newman [Electronically Filed] Date 07/11/2013

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Washington Women For Choice

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="2013"/>	<input type="text" value="5761.48"/>	<input type="text" value="5761.48"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="5761.48"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="33500.00"/>	<input type="text" value="33500.00"/>
(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="39261.48"/>	<input type="text" value="39261.48"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="26047.71"/>	<input type="text" value="26047.71"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="13213.77"/>	<input type="text" value="13213.77"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Washington Women For Choice**

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).....	33500.00	33500.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	33500.00	33500.00
(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) .....	33500.00	33500.00
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))..... ▶	33500.00	33500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	33500.00	33500.00

**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 .....	1047.71	1047.71
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	1047.71	1047.71
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25000.00	25000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	26047.71	26047.71
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	26047.71	26047.71

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	33500.00	33500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	33500.00	33500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	1047.71	1047.71
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1047.71	1047.71

**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 19
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**Washington Women For Choice**

Full Name (Last, First, Middle Initial) <b>A. Lorraine Barrick</b>		Date of Receipt MM / DD / YYYY 03 / 12 / 2013 <b>Transaction ID : SA11AI.5401</b>
Mailing Address 1144 Federal Ave E		Amount of Each Receipt this Period 1000.00
City Seattle	State WA	Zip Code 98102
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Lorraine barrick LLC	Occupation Business Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Sarah Barton</b>		Date of Receipt MM / DD / YYYY 01 / 25 / 2013 <b>Transaction ID : SA11AI.5380</b>
Mailing Address 1020 37th Avenue East		Amount of Each Receipt this Period 1000.00
City Seattle	State WA	Zip Code 98112
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Self	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Elizabeth Berry</b>		Date of Receipt MM / DD / YYYY 05 / 03 / 2013 <b>Transaction ID : SA11AI.5410</b>
Mailing Address 2243 12th Street NW		Amount of Each Receipt this Period 1000.00
City Washington	State DC	Zip Code 20009
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Fuse	Occupation Program Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3000.00
<b>TOTAL</b> 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 19
	<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)  
**Washington Women For Choice**

Full Name (Last, First, Middle Initial)  
**A. Allison Capen**

Mailing Address 1809 North 55th Street

City State Zip Code  
Seattle WA 98103

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

Name of Employer Occupation  
None Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
02 / 25 / 2013  
**Transaction ID : SA11AI.5396**

Amount of Each Receipt this Period  
1000.00

Contribution

Full Name (Last, First, Middle Initial)  
**B. Liz Covert**

Mailing Address PO Box 762

City State Zip Code  
Friday Harbor WA 98250

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

Name of Employer Occupation  
Self Artist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 06 / 2013  
**Transaction ID : SA11AI.5399**

Amount of Each Receipt this Period  
1000.00

Contribution

Full Name (Last, First, Middle Initial)  
**C. Stephanie De Vaan**

Mailing Address PO Box 559

City State Zip Code  
Medina WA 98039

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

Name of Employer Occupation  
Self Print Artist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
02 / 19 / 2013  
**Transaction ID : SA11AI.5394**

Amount of Each Receipt this Period  
2000.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4000.00
<b>TOTAL</b> 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 19
	<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)  
**Washington Women For Choice**

**A. Maria Ehsan**  
Full Name (Last, First, Middle Initial)

Mailing Address 22100 Bothell-Everett Highway

City	State	Zip Code
Bothell	WA	98041

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

Name of Employer	Occupation
Phillips Medical	Consultant

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  
 05 / 02 / 2013  
**Transaction ID : SA11AI.5409**

Amount of Each Receipt this Period  
 1000.00

Contribution

**B. Sonya Erickson**  
Full Name (Last, First, Middle Initial)

Mailing Address 843 East Gwinn Place

City	State	Zip Code
Seattle	WA	98102

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

Name of Employer	Occupation
Venture Law Group	Attorney

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  
 01 / 25 / 2013  
**Transaction ID : SA11AI.5379**

Amount of Each Receipt this Period  
 1000.00

Contribution

**C. Kathryn Gardow**  
Full Name (Last, First, Middle Initial)

Mailing Address 5063 Harold Place, NE

City	State	Zip Code
Seattle	WA	98105

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

Name of Employer	Occupation
Kathryn Gardow & Associates	Consultant

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 / 07 / 2013  
**Transaction ID : SA11AI.5407**

Amount of Each Receipt this Period  
 1000.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3000.00
<b>TOTAL</b> 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 19
	<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)  
**Washington Women For Choice**

**A. Diane Glover**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3616 E Pike Street  
 City Seattle State WA Zip Code 98122  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Swedish Hospital Occupation Physician  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt **01 / 02 / 2013**  
**Transaction ID : SA11AI.5378**  
 Amount of Each Receipt this Period **250.00**  
 Contribution

**B. K. Diane Haelsig**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11 Cascade Key  
 City Bellevue State WA Zip Code 98006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Retired  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt **02 / 06 / 2013**  
**Transaction ID : SA11AI.5385**  
 Amount of Each Receipt this Period **1000.00**  
 Contribution

**C. Leslie Hanauer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address The Highlands  
 City Seattle State WA Zip Code 98177  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Homemaker  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt **04 / 09 / 2013**  
**Transaction ID : SA11AI.5408**  
 Amount of Each Receipt this Period **1000.00**  
 Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>2250.00</b>
<b>TOTAL</b> 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 19
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Washington Women For Choice**

Full Name (Last, First, Middle Initial) <b>A. Kathryn Kelly</b>		Date of Receipt MM / DD / YYYY 02 / 12 / 2013 <b>Transaction ID : SA11AI.5389</b>
Mailing Address PO Box 95197		Amount of Each Receipt this Period 1000.00
City Seattle	State WA	Zip Code 98145
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer University of Washington	Occupation Scientist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Anne Kroeker</b>		Date of Receipt MM / DD / YYYY 02 / 12 / 2013 <b>Transaction ID : SA11AI.5391</b>
Mailing Address 1075 Bellevue Way, NE		Amount of Each Receipt this Period 1000.00
City Bellevue	State WA	Zip Code 98004
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Self	Occupation Philanthropist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Janet Levinger</b>		Date of Receipt MM / DD / YYYY 01 / 31 / 2013 <b>Transaction ID : SA11AI.5382</b>
Mailing Address 4050 134th Avenue, NE		Amount of Each Receipt this Period 2500.00
City Bellevue	State WA	Zip Code 98006
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer None	Occupation Community Volunteer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4500.00
<b>TOTAL</b> 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 19
	<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)  
**Washington Women For Choice**

**A. Ruth Lipscomb**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 103 Cascade Key  
 City Bellevue State WA Zip Code 98006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Investor  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt **03 / 13 / 2013**  
**Transaction ID : SA11AI.5402**  
 Amount of Each Receipt this Period **1000.00**  
 Contribution

**B. Elsie Lufkin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2817 10th Ave E  
 City Seattle State WA Zip Code 98102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Giving Assets Inc. Occupation Program Director  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt **02 / 06 / 2013**  
**Transaction ID : SA11AI.5387**  
 Amount of Each Receipt this Period **1000.00**  
 Contribution

**C. Shaula Massena**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2000 1st Ave #1102  
 City Seattle State WA Zip Code 98121  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Business Owner  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2000.00**

Date of Receipt **02 / 06 / 2013**  
**Transaction ID : SA11AI.5386**  
 Amount of Each Receipt this Period **2000.00**  
 Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>4000.00</b>
<b>TOTAL</b> 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 19
	<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)  
**Washington Women For Choice**

Full Name (Last, First, Middle Initial) <b>A. Shelley McIntyre</b>		Date of Receipt MM / DD / YYYY 02 / 12 / 2013 <b>Transaction ID : SA11AI.5392</b>
Mailing Address 1623 22nd Ave E		Amount of Each Receipt this Period 1000.00
City Seattle	State WA	Zip Code 98122
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Intentional Futures	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Penny Miller</b>		Date of Receipt MM / DD / YYYY 03 / 14 / 2013 <b>Transaction ID : SA11AI.5403</b>
Mailing Address 15941 252nd Ave SE		Amount of Each Receipt this Period 1000.00
City Issaquah	State WA	Zip Code 98027
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Woodland Park Zoo	Occupation Assistant Registrar	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Tracy Newman</b>		Date of Receipt MM / DD / YYYY 05 / 08 / 2013 <b>Transaction ID : SA11AI.5411</b>
Mailing Address 712 35th Ave		Amount of Each Receipt this Period 1000.00
City Seattle	State WA	Zip Code 98122
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Self	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 OF 19
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Washington Women For Choice**

**A. Judith Nicastro**  
Full Name (Last, First, Middle Initial)

Mailing Address 4010 Woodland Park Avenue N

City State Zip Code  
Seattle WA 96103

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

Name of Employer Occupation  
Seattle City Council City Council

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  
01 / 28 / 2013  
**Transaction ID : SA11AI.5381**

Amount of Each Receipt this Period  
250.00

Contribution

**B. Carol Pencke**  
Full Name (Last, First, Middle Initial)

Mailing Address 409 18th Ave E

City State Zip Code  
Seattle WA 98112

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

Name of Employer Occupation  
Self Non-Profit Consultant

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  
03 / 29 / 2013  
**Transaction ID : SA11AI.5406**

Amount of Each Receipt this Period  
1000.00

Contribution

**C. Michelle Quackenbush**  
Full Name (Last, First, Middle Initial)

Mailing Address 8208 42nd Ave NE

City State Zip Code  
Seattle WA 98115

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

Name of Employer Occupation  
None Not Employed

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  
02 / 19 / 2013  
**Transaction ID : SA11AI.5395**

Amount of Each Receipt this Period  
1000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2250.00

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

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

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

FOR LINE NUMBER: PAGE 14 OF 19  
(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)  
**Washington Women For Choice**

Full Name (Last, First, Middle Initial)  
**A. Roberta Riley**

Mailing Address 1116 Grand Avenue

City State Zip Code  
Seattle WA 98122-3516

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

Name of Employer Occupation  
Planned Parenthood Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
03 / 19 / 2013  
**Transaction ID : SA11AI.5405**

Amount of Each Receipt this Period  
1000.00

Contribution

Full Name (Last, First, Middle Initial)  
**B. Sara Robinson**

Mailing Address 4152 Maridian St #105-215

City State Zip Code  
Bellingham WA 98226

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

Name of Employer Occupation  
Campaign for America's Future Senior Fellow

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
03 / 11 / 2013  
**Transaction ID : SA11AI.5400**

Amount of Each Receipt this Period  
1000.00

Contribution

Full Name (Last, First, Middle Initial)  
**C. Evelyne Rozner**

Mailing Address 1500 4th Avenue

City State Zip Code  
Seattle WA 98101

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

Name of Employer Occupation  
Self Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
02 / 04 / 2013  
**Transaction ID : SA11AI.5384**

Amount of Each Receipt this Period  
2500.00

Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4500.00

**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 15 OF 19  
(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)  
**Washington Women For Choice**

Full Name (Last, First, Middle Initial)  
**A. Irene Saraf**

Mailing Address 924 36th Ave

City State Zip Code  
Seattle WA 98122

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

Name of Employer Occupation  
None Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
02 / 06 / 2013

**Transaction ID : SA11AI.5388**

Amount of Each Receipt this Period  
1000.00

Contribution

Full Name (Last, First, Middle Initial)  
**B. Lisa Wahbe**

Mailing Address 900 39th Ave E

City State Zip Code  
Seattle WA 98112

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

Name of Employer Occupation  
Microsoft Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
02 / 12 / 2013

**Transaction ID : SA11AI.5390**

Amount of Each Receipt this Period  
1000.00

Contribution

Full Name (Last, First, Middle Initial)  
**C. Julie Weed**

Mailing Address 1217 Federal Avenue E.

City State Zip Code  
Seattle WA 98102

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

Name of Employer Occupation  
Self Author

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
02 / 04 / 2013

**Transaction ID : SA11AI.5383**

Amount of Each Receipt this Period  
1000.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	33500.00

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Washington Women For Choice**

Full Name (Last, First, Middle Initial)

**A. Bank of America Merchant Services**

Mailing Address PO Box 2485

City Spokane State WA Zip Code 99210

Purpose of Disbursement  
Credit Card Processing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2013  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	1	3

Transaction ID : **SB21B.5415**

Amount of Each Disbursement this Period

1	8	3	.	1	5
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Bank of America Merchant Services**

Mailing Address PO Box 2485

City Spokane State WA Zip Code 99210

Purpose of Disbursement  
Credit Card Processing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	1	3

Transaction ID : **SB21B.5420**

Amount of Each Disbursement this Period

9	.	0	0
---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Network Merchants Inc**

Mailing Address 201 Main Street

City Roselle State IL Zip Code 60172

Purpose of Disbursement  
Credit Card Processing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	3

Transaction ID : **SB21B.5421**

Amount of Each Disbursement this Period

1	5	6	.	5	8
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

3	4	8	.	7	3
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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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Washington Women For Choice**

Full Name (Last, First, Middle Initial)

**A. Network Merchants Inc**

Mailing Address 201 Main Street

City Roselle State IL Zip Code 60172

Purpose of Disbursement  
Credit Card Processing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	02	/	2013

Transaction ID : **SB21B.5427**

Amount of Each Disbursement this Period

73.02
-------

Full Name (Last, First, Middle Initial)

**B. Network Merchants Inc**

Mailing Address 201 Main Street

City Roselle State IL Zip Code 60172

Purpose of Disbursement  
Credit Card Processing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	07	/	2013

Transaction ID : **SB21B.5432**

Amount of Each Disbursement this Period

73.72
-------

Full Name (Last, First, Middle Initial)

**C. Project Accounting Services**

Mailing Address 603 Stewart St Ste 819

City Seattle State WA Zip Code 98101

Purpose of Disbursement  
Accounting/Compliance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	05	/	2013

Transaction ID : **SB21B.5419**

Amount of Each Disbursement this Period

333.75
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

480.49
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829.22
--------

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Washington Women For Choice**

Full Name (Last, First, Middle Initial)

**A. BRALEY FOR IOWA**

Mailing Address PO BOX 856

City State Zip Code  
DES MOINES IA 50304

Purpose of Disbursement  
Contribution

Candidate Name  
**BRUCE L BRALEY**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: IA District: 00

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 07 / 2013

Transaction ID : **SB23.5429**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF JEANNE SHAHEEN**

Mailing Address 105 N STATE STREET

City State Zip Code  
CONCORD NH 03301

Purpose of Disbursement  
Contribution

Candidate Name  
**JEANNE SHAHEEN**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: NH District: 00

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2013

Transaction ID : **SB23.5434**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF JEANNE SHAHEEN**

Mailing Address 105 N STATE STREET

City State Zip Code  
CONCORD NH 03301

Purpose of Disbursement  
Contribution

Candidate Name  
**Jean Shaheen**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: NH District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2013

Transaction ID : **SB23.5437**

Amount of Each Disbursement this Period

5000.00

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

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

15000.00

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Washington Women For Choice**

Full Name (Last, First, Middle Initial)

**A. MARKEY COMMITTEE; THE**

Mailing Address PO BOX 526

City MEDFORD State MA Zip Code 02155

Purpose of Disbursement  
Contribution

Candidate Name  
**EDWARD J MARKEY**

Office Sought:  House  
 Senate  
 President  
State: MA District: 00

Disbursement For: 2013  
 Primary  General  
 Other (specify) ▼  
Special-Primary

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	3

Transaction ID : **SB23.5423**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

**B. MARKEY COMMITTEE; THE**

Mailing Address PO BOX 526

City MEDFORD State MA Zip Code 02155

Purpose of Disbursement  
Contribution

Candidate Name  
**EDWARD J MARKEY**

Office Sought:  House  
 Senate  
 President  
State: MA District: 00

Disbursement For: 2013  
 Primary  General  
 Other (specify) ▼  
Special-General

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	3

Transaction ID : **SB23.5425**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

**C.**

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

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

Amount of Each Disbursement this Period

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

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

1	0	0	0	0	0	0	0	0	0
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2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---