

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER
2016 OCT 27 AM 11:53
Office Use Only

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

FEMINIST MAJORITY PAC

ADDRESS (number and street) 11600 WILSON BLVD.
SUITE 801
 Check if different than previously reported. (ACC) ARLINGTON, VA 22209

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

C00377168

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:

Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

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

Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)

Election on / / in the State of

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

General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period 07 / 01 / 2016 through 09 / 30 / 2016

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 ELEANOR SMEAU, ASSISTANT TREASURER

Signature of Treasurer *Eleanor Smeau* Date 10 / 26 / 2016

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

2016-10-27 09:01:01

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

FEMINIST MAJORITY PAC

Report Covering the Period: From:

MM ' DD ' YYYY
07 ' 01 ' 2016

To:

MM ' DD ' YYYY
09 ' 30 ' 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>2016</u>		<u>20,313.49</u>
(b) Cash on Hand at Beginning of Reporting Period.....	<u>25,385.85</u>	
(c) Total Receipts (from Line 19).....	<u>6,449.00</u>	<u>34,422.38</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<u>31,834.85</u>	<u>54,735.87</u>
7. Total Disbursements (from Line 31).....	<u>29,379.28</u>	<u>52,280.30</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<u>3,455.57</u>	<u>3,455.57</u>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<u>0</u>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<u>0</u>	

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

20161010127-0014-150

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

FEMINIST MAJORITY PAC

Report Covering the Period: From: **07** ' **01** ' **2016** To: **09** ' **30** ' **2016**

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).....

1,400.00

19,440.00

(ii) Unitemized.....

50,490.00

14,982.38

(iii) TOTAL (add Lines 11(a)(i) and (ii).....▶

6,449.00

34,422.38

(b) Political Party Committees.....

0

0

(c) Other Political Committees (such as PACs).....

0

0

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

6,449.00

34,422.38

12. Transfers From Affiliated/Other Party Committees.....

0

0

13. All Loans Received.....

0

0

14. Loan Repayments Received.....

0

0

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

0

0

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

0

0

17. Other Federal Receipts (Dividends, Interest, etc.).....

0

0

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

0

0

(b) Levin Funds (from Schedule H5).....

0

0

(c) Total Transfers (add 18(a) and 18(b))..

0

0

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

6,449.00

34,422.38

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

6,449.00

34,422.38

20161017 01100127 414

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	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures	379.28	1,280.30
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	379.28	1,280.30
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	29,000.00	51,000.00
24. Independent Expenditures (use Schedule E).....	0	0
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	0
29. Other Disbursements (Including Non-Federal Donations).....	0	0
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	29,379.28	52,280.30
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	29,379.28	52,280.30

NOV 10 2017 10:00 AM

DETAILED SUMMARY PAGE
of Disbursements

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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)	6,449.00	34,422.38
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6,449.00	34,422.38
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	379.28	1,280.30
37. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	379.28	1,280.30

2019 10 27 09:11:44

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 <u>6</u> OF <u>19</u>	
	<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)
FEMINIST MAJORITY PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
CLARK, CECILY

Mailing Address
75 PORT HILL RD.

City **DSSIPEE** State **NH** Zip Code **03864**

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

Name of Employer (for Individual) **SELF EMPLOYED** Occupation (for Individual) **SCULPTER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
09 / 27 / 2016

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address
932 FRANKLIN ST.

City **WYOMISSING** State **PA** Zip Code **19610**

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
870.00

Date of Receipt
09 / 28 / 2016

Amount of Each Receipt this Period
400.00

Memo Item

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

Mailing Address
PO BOX 1277

City **TIBURON** State **CA** Zip Code **94920**

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

Name of Employer (for Individual) **SELF EMPLOYED** Occupation (for Individual) **AUTHOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 30 / 2016

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... **1,150.00**

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

NOV 10 10 27 AM '16

**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 19

(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
FEMINIST MAJORITY PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SCHONBERGER, ANN

Mailing Address
40 GARLAND ST.

City BANGOR State ME Zip Code 04401

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 ▼
250.00

Date of Receipt
09 / 30 / 2016

Amount of Each Receipt this Period
250.00

Memo Item

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

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
____/____/____

Amount of Each Receipt this Period

Memo Item

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

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
____/____/____

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 250.00

TOTAL This Period (last page this line number only).....▶ 1,400.00

20161027 03:00:14 18

**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)

FEMINIST MAJORITY PAC

Full Name (Last, First, Middle Initial)

Date of Disbursement

A. BANK OF AMERICA

Mailing Address
PO BOX 15284

City **WILMINGTON** State **DE** Zip Code **19850**

Purpose of Disbursement
BANK ACCOUNT FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

07 / 15 / 2016

FEC Identification Number

C

Amount of Each Disbursement this Period

88.42

Memo Item

Full Name (Last, First, Middle Initial)

Date of Disbursement

B. PAYPAL, INC

Mailing Address
4100 SOLUTIONS CENTER

City **CHICAGO** State **IL** Zip Code **60677**

Purpose of Disbursement
FEE, MONTHLY CREDIT CARD PAYMENTS

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

07 / 03 / 2016

FEC Identification Number

C

Amount of Each Disbursement this Period

54.10

Memo Item

Full Name (Last, First, Middle Initial)

Date of Disbursement

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

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

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

142.52

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

2016-10-27 09:00:11

**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)

FEMINIST MAJORITY PAC

Full Name (Last, First, Middle Initial)

A. BANK OF AMERICA

Mailing Address

PO BOX 15284

City

WILMINGTON

State

DE

Zip Code

19850

Purpose of Disbursement

BANK ACCOUNT FEE

Candidate Name

001

Category/Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

08 / 15 / 2016

FEC Identification Number

C

Amount of Each Disbursement this Period

65.11

Memo Item

Full Name (Last, First, Middle Initial)

B. PAYPAL, INC

Mailing Address

4100 SOLUTIONS CENTER

City

CHICAGO,

State

IL

Zip Code

60677

Purpose of Disbursement

FEE, MONTHLY CREDIT CARD PROCESS

Candidate Name

001

Category/Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

08 / 03 / 2016

FEC Identification Number

C

Amount of Each Disbursement this Period

54.10

Memo Item

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

001

Category/Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C

Amount of Each Disbursement this Period

119.21

Memo Item

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

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

119.21

119.21

20161027-0314420

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE 10 OF 19		
	<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

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NAME OF COMMITTEE (In Full)
FEMINIST MAJORITY PAC

A. Full Name (Last, First, Middle Initial)
BANK OF AMERICA

Date of Disbursement
09 / 15 / 2016

Mailing Address
PO BOX 15284

City **WILMINGTON** State **DE** Zip Code **19850**

Purpose of Disbursement
BANK ACCOUNT FEE Category/Type **001**

Candidate Name

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

State: District:

FEC Identification Number **C**

Amount of Each Disbursement this Period
63.45

Memo Item

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

Date of Disbursement
09 / 03 / 2016

Mailing Address
4100 SOLUTIONS CENTER

City **CHICAGO** State **IL** Zip Code **60677**

Purpose of Disbursement
FEE MONTHLY CREDIT CARD PAYERS Category/Type **001**

Candidate Name

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

State: District:

FEC Identification Number **C**

Amount of Each Disbursement this Period
54.10

Memo Item

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

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

FEC Identification Number **C**

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ **117.55**

TOTAL This Period (last page this line number only).....▶ **379.28**

20161027 03:00:14Z

**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)

FEMINIST MAJORITY PAC

Full Name (Last, First, Middle Initial)

A. *SUSANNAH RANDOLPH FOR CONGRESS*

Date of Disbursement

08 / 09 / 2016

Mailing Address

PO BOX 533643

FEC Identification Number

C00581041

City

ORLANDO

State

FL

Zip Code

32853

Purpose of Disbursement

CONTRIBUTION

011

Candidate Name

SUSANNAH RANDOLPH

Category/
Type

Amount of Each Disbursement this Period

1000.00

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: *FL*

District: *09*

Memo Item

Full Name (Last, First, Middle Initial)

B. *DEBBIE WASSERMAN-SCHULTZ FOR CONGRESS*

Date of Disbursement

08 / 11 / 2016

Mailing Address

1071 TWIN BRANCH LANE

FEC Identification Number

C00385773

City

WESTON

State

FL

Zip Code

33326

Purpose of Disbursement

CONTRIBUTION

011

Candidate Name

DEBBIE WASSERMAN-SCHULTZ

Category/
Type

Amount of Each Disbursement this Period

1000.00

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

_____ / _____ / _____

Mailing Address

FEC Identification Number

C _____

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Memo Item

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

2000.00

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

2016-10-20 10:00:14 AM

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

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

FOR LINE NUMBER:
(check only one)

PAGE 2 OF 19

<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)
FEMINIST MAJORITY PAC

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address
PO BOX 536926

City ORLANDO State FL Zip Code 32853

Purpose of Disbursement
CONTRIBUTION 011
Category/Type

Candidate Name
VAL DEMINGS

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

State: FL District: 10

Date of Disbursement

08 / 19 / 2016

FEC Identification Number

C00498980

Amount of Each Disbursement this Period

1,000.00

Memo Item

B. TADDEO FOR CONGRESS

Mailing Address
PO BOX 432094

City SOUTH MIAMI State FL Zip Code 33243

Purpose of Disbursement
CONTRIBUTION 011
Category/Type

Candidate Name
ANNETTE TADDEO

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

State: FL District: 26

Date of Disbursement

08 / 19 / 2016

FEC Identification Number

C00445163

Amount of Each Disbursement this Period

1,000.00

Memo Item

C.

Mailing Address

City State Zip Code

Purpose of Disbursement C
Category/Type

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).....▶

2,000.00

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

2016-10-27 09:00:13 AM

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 19
	<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)
FEMINIST MAJORITY FOUNDATION

A.

Full Name (Last, First, Middle Initial): **FRIENDS OF ANNA THRONE-HOLST**

Date of Disbursement: **09/19/2016**

Mailing Address: **PO BOX 6**

City: **SOUTHAMPTON** State: **NY** Zip Code: **11969**

Purpose of Disbursement: **CONTRIBUTION** Category/Type: **011**

Candidate Name: **ANNA THRONE-HOLST**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **NY** District: **01**

FEC Identification Number: **C00578401**

Amount of Each Disbursement this Period: **1,000.00**

Memo Item

B.

Full Name (Last, First, Middle Initial): **CATHERINE CORTEZ MASTRO FOR SENATE**

Date of Disbursement: **09/19/2016**

Mailing Address: **8020 S. RAINBOW BLVD., #110-112**

City: **LAS VEGAS** State: **NV** Zip Code: **89139**

Purpose of Disbursement: **CONTRIBUTION** Category/Type: **011**

Candidate Name: **CATHERINE CORTEZ MASTRO**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **NV** District: _____

FEC Identification Number: **C**

Amount of Each Disbursement this Period: **2,000.00**

Memo Item

C.

Full Name (Last, First, Middle Initial): **KATIE MCGINTY FOR SENATE**

Date of Disbursement: **09/19/2016**

Mailing Address: **PO BOX 22447**

City: **PHILADELPHIA** State: **PA** Zip Code: **19110**

Purpose of Disbursement: **CONTRIBUTION** Category/Type: **011**

Candidate Name: **KATIE MCGINTY**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **PA** District: _____

FEC Identification Number: **C00582809**

Amount of Each Disbursement this Period: **2,000.00**

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ **5,000.00**

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

2016-10-27 00:14:24

**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)

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<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)

FEMINIST MAJORITY PAC

Full Name (Last, First, Middle Initial)

A. *MAGGIE HASAN FOR NH*

Date of Disbursement

09 / *19* / *2016*

Mailing Address

PO BOX 298

City
CONCORD

State
NH

Zip Code
03302

FEC Identification Number

C

Purpose of Disbursement

CONTRIBUTION

011

Category/
Type

Amount of Each Disbursement this Period

2,000.00

Candidate Name

MAGGIE HASAN

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: *NH*

District:

Memo Item

Full Name (Last, First, Middle Initial)

B. *TAMMY DUCKWORTH FOR IL*

Date of Disbursement

09 / *19* / *2016*

Mailing Address

PO BOX 10793

City
CHICAGO

State
IL

Zip Code
60610

FEC Identification Number

C

Purpose of Disbursement

CONTRIBUTION

011

Category/
Type

Amount of Each Disbursement this Period

1,000.00

Candidate Name

TAMMY DUCKWORTH

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: *IL*

District:

Memo Item

Full Name (Last, First, Middle Initial)

C. *EMILIO HUERTA FOR CONGRESS*

Date of Disbursement

09 / *19* / *2016*

Mailing Address

PO BOX 2327

City
BAKERSFIELD

State
CA

Zip Code
93303

FEC Identification Number

C00602888

Purpose of Disbursement

CONTRIBUTION

011

Category/
Type

Amount of Each Disbursement this Period

1,000.00

Candidate Name

EMILIO HUERTA

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: *CA*

District: *21*

Memo Item

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

4,000.00

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

2016-10-27 09:00:14 AM

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

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

FOR LINE NUMBER:
(check only one)

PAGE 15 OF 19

<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)

FEMINIST MAJORITY PAC

Full Name (Last, First, Middle Initial)

A. *KIRKPATRICK FOR SENATE*

Date of Disbursement

09' 28' 2016

Mailing Address

PO BOX 34421

City

PHOENIX

State

AZ

Zip Code

85067

Purpose of Disbursement

CONTRIBUTION

Candidate Name

ANN KIRKPATRICK

011

Category/
Type

FEC Identification Number

C00578484

Amount of Each Disbursement this Period

1,000.00

Memo Item

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: *AZ*

District:

Full Name (Last, First, Middle Initial)

B. *DEBORAH ROSS FOR SENATE*

Date of Disbursement

09' 19' 2016

Mailing Address

PO BOX 28258

City

RALEIGH

State

NC

Zip Code

27611

Purpose of Disbursement

CONTRIBUTION

Candidate Name

DEBORAH ROSS

011

Category/
Type

FEC Identification Number

C00589820

Amount of Each Disbursement this Period

2,000.00

Memo Item

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: *NC*

District:

Full Name (Last, First, Middle Initial)

C. *COLLEEN DEACON FOR CONGRESS*

Date of Disbursement

09' 28' 2016

Mailing Address

118 TULLIAN PLACE, #208

City

SYRACUSE

State

NY

Zip Code

13210

Purpose of Disbursement

CONTRIBUTION

Candidate Name

COLLEEN DEACON

011

Category/
Type

FEC Identification Number

C00588483

Amount of Each Disbursement this Period

1,000.00

Memo Item

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: *NY*

District: *24*

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

4,000.00

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

20161027 001414

**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)

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<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)

FEMINIST MAJORITY PAC

Full Name (Last, First, Middle Initial)

A. EMILY CAIN FOR CONGRESS

Date of Disbursement

09 / 28 / 2016

Mailing Address

1 SPRINGER DR., #201

FEC Identification Number

C

City

BANGOR

State

ME

Zip Code

04401

Purpose of Disbursement

CONTRIBUTION

011

Candidate Name

EMILY CAIN

Category/
Type

Amount of Each Disbursement this Period

1,000.00

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: ME

District: 02

Memo Item

Full Name (Last, First, Middle Initial)

B. GRETCHEN DRISKELL FOR CONGRESS

Date of Disbursement

09 / 28 / 2016

Mailing Address

PO BOX 464

FEC Identification Number

C00572859

City

SALINE

State

MI

Zip Code

48176

Purpose of Disbursement

CONTRIBUTION

011

Candidate Name

GRETCHEN DRISKELL

Category/
Type

Amount of Each Disbursement this Period

1,000.00

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: MI

District: 07

Memo Item

Full Name (Last, First, Middle Initial)

C. BARRAGAN FOR CONGRESS

Date of Disbursement

09 / 29 / 2016

Mailing Address

1840 S. GAFFEY ST., # 421

FEC Identification Number

C00577353

City

SAN PEDRO

State

CA

Zip Code

90731

Purpose of Disbursement

CONTRIBUTION

011

Candidate Name

NANETTE BARRAGAN

Category/
Type

Amount of Each Disbursement this Period

1,000.00

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: CA

District: 44

Memo Item

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

3,000.00

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

3,000.00

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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)

PAGE 17 OF 19

<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)

FEMINIST MAJORITY PAC

Full Name (Last, First, Middle Initial)

A. ROSEN FOR NV
Mailing Address
1000 N. GREEN VALLEY PKWY, #440-177

Date of Disbursement

09 / 30 / 2016

City HENDERSON State NV Zip Code 89074

FEC Identification Number

C00606939

Purpose of Disbursement

CONTRIBUTION

0.11
Category/
Type

Amount of Each Disbursement this Period

1,000.00

Candidate Name

JACKY ROSEN

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: NV

District: 03

Memo Item

Full Name (Last, First, Middle Initial)

B. CAROL SHEA-PORTER FOR CONGRESS
Mailing Address
18 N. MAIN ST., #2

Date of Disbursement

09 / 30 / 2016

City ROCHESTER State NH Zip Code 03867

FEC Identification Number

C00719978

Purpose of Disbursement

CONTRIBUTION

0.11
Category/
Type

Amount of Each Disbursement this Period

1,000.00

Candidate Name

CAROL SHEA-PORTER

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: NH

District: 01

Memo Item

Full Name (Last, First, Middle Initial)

C. CARROLL FOR CO
Mailing Address
PO BOX 470783

Date of Disbursement

09 / 30 / 2016

City AURORA State CO Zip Code 80047

FEC Identification Number

C00580647

Purpose of Disbursement

CONTRIBUTION

0.11
Category/
Type

Amount of Each Disbursement this Period

1,000.00

Candidate Name

MORGAN CARROLL

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: CO

District: 06

Memo Item

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

3,000.00

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

2016-10-27 00:11:44.28

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE 18 OF 19
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NAME OF COMMITTEE (In Full)
FEMINIST MATURITY PAC

A.

Full Name (Last, First, Middle Initial): **STEPHANIE MURPHY FOR CONGRESS**

Date of Disbursement: **09 / 30 / 2016**

Mailing Address: **PO BOX 205**

City: **WINTER PARK** State: **FL** Zip Code: **32790**

Purpose of Disbursement: **CONTRIBUTION** Category/Type: **O.I.I.**

Candidate Name: **STEPHANIE MURPHY**

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

State: **FL** District: **07**

FEC Identification Number: **C000620443**

Amount of Each Disbursement this Period: **1,000.00**

Memo Item

B.

Full Name (Last, First, Middle Initial): **ZEPHYR TEACHOUT FOR CONGRESS**

Date of Disbursement: **09 / 30 / 2016**

Mailing Address: **PO BOX 491**

City: **ROSENDALE** State: **NY** Zip Code: **12472**

Purpose of Disbursement: **CONTRIBUTION** Category/Type: **O.I.I.**

Candidate Name: **ZEPHYR TEACHOUT**

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

State: **NY** District: **19**

FEC Identification Number: **C000608174**

Amount of Each Disbursement this Period: **1,000.00**

Memo Item

C.

Full Name (Last, First, Middle Initial): **LUANN BENNETT FOR CONGRESS**

Date of Disbursement: **09 / 30 / 2016**

Mailing Address: **PO BOX 446**

City: **MCLEAN** State: **VA** Zip Code: **22101**

Purpose of Disbursement: **CONTRIBUTION** Category/Type: **O.I.I.**

Candidate Name: **LUANN BENNETT**

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

State: **VA** District: **10**

FEC Identification Number: **C000595116**

Amount of Each Disbursement this Period: **1,000.00**

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ **3,000.00**

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

2016-10-27 09:00:14

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE 19 OF 19		
	<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

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NAME OF COMMITTEE (In Full)
FEMINIST MATURITY PAC

A.

Full Name (Last, First, Middle Initial): **FRIENDS OF ANNA THRONE-HOLST**

Date of Disbursement: **09/30/2016**

Mailing Address: **PO BOX 6**

City: **SOUTHAMPTON** State: **NY** Zip Code: **11969**

Purpose of Disbursement: **CONTRIBUTION** Category/Type: **011**

Candidate Name: **ANNA THRONE-HOLST**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **▼**

State: **NY** District: **01**

FEC Identification Number: **C00578401**

Amount of Each Disbursement this Period: **1,000.00**

Memo Item

B.

Full Name (Last, First, Middle Initial): **MONICA VERNON FOR CONGRESS**

Date of Disbursement: **09/30/2016**

Mailing Address: **2706 1ST AVENUE, NE**

City: **CEDAR RAPIDS** State: **IA** Zip Code: **52402**

Purpose of Disbursement: **CONTRIBUTION** Category/Type: **011**

Candidate Name: **MONICA VERNON**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **▼**

State: **IA** District: **01**

FEC Identification Number: **C00571562**

Amount of Each Disbursement this Period: **1,000.00**

Memo Item

C.

Full Name (Last, First, Middle Initial): **ANGIE CRAIG FOR CONGRESS**

Date of Disbursement: **09/30/2016**

Mailing Address: **PO BOX 22116**

City: **EAGAN** State: **MN** Zip Code: **55122**

Purpose of Disbursement: **CONTRIBUTION** Category/Type: **011**

Candidate Name: **ANGELA CRAIG**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **▼**

State: **MN** District: **02**

FEC Identification Number: **C00575209**

Amount of Each Disbursement this Period: **1,000.00**

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ **3,000.00**

TOTAL This Period (last page this line number only).....▶ **29,000.00**

2016-10-27 09:00:14 AM

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2. C a t
3. R b
4. A t

Page 1 of 2

ORIGIN/DZ/FOA (703) 522-2214
DIANE CUTRI
FEMINIST MAJORITY
1600 WILSON BLVD
SUITE 801
ARLINGTON VA 22209
UNITED STATES US

SHIP DATE: 26OCT16
ACTWGT: 0.50 LB
CAD: 149432/MET3790

BILL SENDER

TO **FEC**

FEDERAL ELECTION COMMISSION
999 E STREET, NW

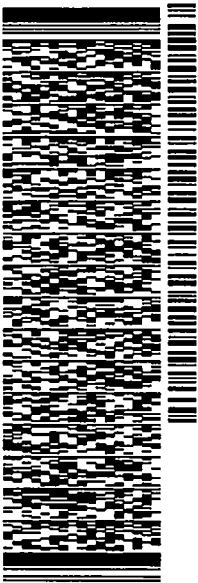
WASHINGTON DC 20463

(202) 694-1100

REF: FMPAC70

PO.

DEPT:



416281610129111

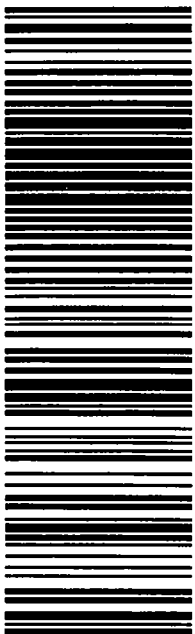
RT 677
FZ 6
10:30
5039
10:27

TRK# 7775 6535 5039
0201

THU - 27 OCT 10:30A
PRIORITY OVERNIGHT

19 RDVA

20463
DC-US IAD




2019-10-27 11:42:11



544.J3/FB42/14E9

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

20161027 09:00:14 AM

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Date of Receipt
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): FEDEX	Shipping Date 10-26-16
	Next Business Day Delivery <input checked="" type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
 PREPARER	10-27-2016 DATE PREPARED