

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

Check if different than previously reported. (ACC) MARIETTA GA 30007

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

C C00616912

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

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

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

Termination Report (TER)

(b) Monthly Report Due On:

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

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

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

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

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

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
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Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y Y Y 11 / 27 / 2018 through M M / D D / Y Y Y Y Y Y 12 / 31 / 2018

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 Krason, Patrick, ,

Signature of Treasurer Krason, Patrick, , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 02 / 15 / 2019

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="2018"/>	<input type="text" value="2418.65"/>	<input type="text" value="2418.65"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="144.46"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="19761.35"/>	<input type="text" value="161868.15"/>
(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="19905.81"/>	<input type="text" value="164286.80"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="17624.27"/>	<input type="text" value="162005.26"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2281.54"/>	<input type="text" value="2281.54"/>
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="87408.86"/>	

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).....	8375.58	8375.58
(ii) Unitemized	3885.77	4216.77
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	12261.35	12592.35
(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)	12261.35	12592.35
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	18623.37
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.).....	7500.00	130652.43
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)).....▶	19761.35	161868.15
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	19761.35	161868.15

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	11234.83	67467.78
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	11234.83	67467.78
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	50400.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	18623.37
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).....	6389.44	25514.11
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)) ..	17624.27	162005.26
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	17624.27	162005.26

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	12261.35	12592.35
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12261.35	12592.35
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	11234.83	67467.78
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	11234.83	67467.78

**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 23
	<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)
WOMEN VOTE SMART

A. Cummings, Debra, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 171
 13800 E 87th Ct. N.
 City Owasso State OK Zip Code 74055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Info Requested Per Best Efforts
 Occupation (for Individual) Info Requested Per Best Efforts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1483.41

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2018
Transaction ID : SA11AI.5554
 Amount of Each Receipt this Period
 475.00
 Memo Item Contribution

B. Cummings, Gordon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 171
 13800 E. 87th Ct. N.
 City Owasso State OK Zip Code 74055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Info Request Per Best Efforts
 Occupation (for Individual) Info Request Per Best Efforts
 Receipt For: 2018 Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1330.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2018
Transaction ID : SA11AI.5518
 Amount of Each Receipt this Period
 1330.98
 Memo Item Contribution

C. Dixon, Tudor, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Info Request Per Best Efforts
 Info Request Per Best Efforts
 City MUSKEGON State MI Zip Code 49444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Info Request Per Best Efforts
 Occupation (for Individual) Info Request Per Best Efforts
 Receipt For: 2018 Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 268.48

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2018
Transaction ID : SA11AI.5503
 Amount of Each Receipt this Period
 268.48
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	2074.46
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 23
	<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)
WOMEN VOTE SMART

A. Downing, Candice, , ,

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

Mailing Address Info Request Per Best Efforts
Info Request Per Best Efforts

City GRAND JUNCTION State CO Zip Code 81506

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 ▼

Date of Receipt
12 / 14 / 2018

Transaction ID : SA11AI.5447

Amount of Each Receipt this Period
268.48

Memo Item Contribution

B. Drake, Debra, , ,

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

Mailing Address

City DALLAS State TX Zip Code 75201

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

Name of Employer (for Individual) Info Requested Per Best Efforts Occupation (for Individual) Info Requested Per Best Efforts

Receipt For: 2018
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
12 / 07 / 2018

Transaction ID : SA11AI.5513

Amount of Each Receipt this Period
402.72

Memo Item Contribution

C. Engelstad, Cjaye, , ,

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

Mailing Address Info Request Per Best Efforts
Info Request Per Best Efforts

City SPRING State TX Zip Code 77381

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

Name of Employer (for Individual) Info Request Per Best Efforts Occupation (for Individual) Info Request Per Best Efforts

Receipt For: 2018
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
12 / 09 / 2018

Transaction ID : SA11AI.5497

Amount of Each Receipt this Period
268.48

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 939.68

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 23
	<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)
WOMEN VOTE SMART

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Fabian, Teri, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 05 / 2018
Mailing Address Info Request Per Best Efforts Info Request Per Best Efforts		Transaction ID : SA11AI.5550
City Info Request Per Best Efforts	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 268.48
Name of Employer (for Individual) Info Request Per Best Efforts	Occupation (for Individual) Info Request Per Best Efforts	<input type="checkbox"/> Memo Item Contribution
Receipt For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 268.48	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Galloway, David, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2018
Mailing Address Info Request Per Best Efforts Info Request Per Best Efforts		Transaction ID : SA11AI.5495
City	State	Zip Code
ARLINGTON	VA	22202
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 268.48
Name of Employer (for Individual) Info Request Per Best Efforts	Occupation (for Individual) Info Request Per Best Efforts	<input type="checkbox"/> Memo Item Contribution
Receipt For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 268.48	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Geiger, Rebecca, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 07 / 2018
Mailing Address 2030 N. Adams Street Apt. 510		Transaction ID : SA11AI.5512
City	State	Zip Code
Arlington	VA	22201
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 134.24
Name of Employer (for Individual) Info Requested Per Best Efforts	Occupation (for Individual) Info Requested Per Best Efforts	<input type="checkbox"/> Memo Item Contribution
Receipt For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1142.65	

SUBTOTAL of Receipts This Page (optional).....▶	671.20
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 23
	<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)
WOMEN VOTE SMART

A. Goode, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2288 Seaboard Road
 Info Request Per Best Efforts
 City Virginia Beach State VA Zip Code 23456
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Info Request Per Best Efforts Occupation (for Individual) Info Request Per Best Efforts
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 536.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2018
Transaction ID : SA11AI.5473
 Amount of Each Receipt this Period
 536.96
 Memo Item
 Contribution

B. Hill, Barbara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4204 Churchill Downs Dr.
 Info Request Per Best Efforts
 City Austin State TX Zip Code 78746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Info Request Per Best Efforts Occupation (for Individual) Info Request Per Best Efforts
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 241.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2018
Transaction ID : SA11AI.5469
 Amount of Each Receipt this Period
 241.96
 Memo Item
 Contribution

C. Hill, Barbara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4204 Churchill Downs Dr.
 Info Request Per Best Efforts
 City Austin State TX Zip Code 78746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Info Request Per Best Efforts Occupation (for Individual) Info Request Per Best Efforts
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 741.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2018
Transaction ID : SA11AI.5524
 Amount of Each Receipt this Period
 500.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....	1278.92
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 23
	<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)
WOMEN VOTE SMART

A. Kouznetsov, Anjelika, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City JUPITER	State FL	Zip Code 33469
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Info Requested Per Best Efforts	Occupation (for Individual) Info Requested Per Best Efforts
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Receipt For: 2018
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1142.65

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2018

Transaction ID : SA11AI.5480

Amount of Each Receipt this Period
134.24

Memo Item Contribution

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

Mailing Address 668 Bradley Road
 Info Request Per Best Efforts

City Fuquay-Varina	State NC	Zip Code 27526
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Info Request Per Best Efforts	Occupation (for Individual) Info Request Per Best Efforts
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Receipt For: 2018
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
268.48

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2018

Transaction ID : SA11AI.5479

Amount of Each Receipt this Period
268.48

Memo Item Contribution

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

Mailing Address 3075 Veterans Highway
 suite 131

City ronkonkoma	State NY	Zip Code 11779
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Info Request Per Best Efforts	Occupation (for Individual) Info Request Per Best Efforts
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Receipt For: 2018
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
268.48

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2018

Transaction ID : SA11AI.5454

Amount of Each Receipt this Period
134.24

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶	536.96
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 23
	<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)
WOMEN VOTE SMART

A. Pastor, Hope, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 365 Yeoman Road
Info Request Per Best Efforts

City Manahawkin	State NJ	Zip Code 08050
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Info Request Per Best Efforts	Occupation (for Individual) Info Request Per Best Efforts
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Receipt For: 2018
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
434.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2018

Transaction ID : SA11AI.5529

Amount of Each Receipt this Period
300.00

Memo Item Contribution

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

Mailing Address Info Request Per Best Efforts
Info Request Per Best Efforts

City PALM CITY	State FL	Zip Code 34990
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Info Request Per Best Efforts	Occupation (for Individual) Info Request Per Best Efforts
--	--

Receipt For: 2018
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
329.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2018

Transaction ID : SA11AI.5528

Amount of Each Receipt this Period
195.00

Memo Item Contribution

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

Mailing Address 1844 Aloha Lane

City Gladwyne	State PA	Zip Code 19035
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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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		13		2018

Transaction ID : SA11AI.5532

Amount of Each Receipt this Period
500.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶	995.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 23
	<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)
WOMEN VOTE SMART

A. Reber, Deborah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City RANCHO MIRAGE	State CA	Zip Code 92270
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Info Requested Per Best Efforts	Occupation (for Individual) Info Requested Per Best Efforts
--	--

Receipt For: 2018
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1142.65

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2018

Transaction ID : SA11AI.5516

Amount of Each Receipt this Period
134.24

Memo Item
Contribution

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

Mailing Address 4839 Marsh Hammock Dr

City Jacksonville	State FL	Zip Code 32224
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Info Requested Per Best Efforts	Occupation (for Individual) Info Requested Per Best Efforts
--	--

Receipt For: 2018
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2285.30

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2018

Transaction ID : SA11AI.5467

Amount of Each Receipt this Period
268.48

Memo Item
Contribution

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

Mailing Address Info Request Per Best Efforts
 Info Request Per Best Efforts

City Info Request Per Best Efforts	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Info Request Per Best Efforts	Occupation (for Individual) Info Request Per Best Efforts
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Receipt For: 2018
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
268.48

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2018

Transaction ID : SA11AI.5548

Amount of Each Receipt this Period
268.48

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶	671.20
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 23
	<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)
WOMEN VOTE SMART

A. Utley, Derek, , ,

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

Mailing Address Info Request Per Best Efforts
Info Request Per Best Efforts

City MILWAUKEE State WI Zip Code 53202

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

Name of Employer (for Individual) Info Request Per Best Efforts Occupation (for Individual) Info Request Per Best Efforts

Receipt For: 2018
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
268.48

Date of Receipt
12 / 10 / 2018
Transaction ID : SA11AI.5475

Amount of Each Receipt this Period
268.48

Memo Item Contribution

B. Viviano, Bettina, , ,

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

Mailing Address 8336 Garnet Canyon Lane Info Request Per Best Efforts

City Las Vegas State NV Zip Code 89129

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

Name of Employer (for Individual) Info Request Per Best Efforts Occupation (for Individual) Info Request Per Best Efforts

Receipt For: 2018
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
268.48

Date of Receipt
12 / 13 / 2018
Transaction ID : SA11AI.5453

Amount of Each Receipt this Period
268.48

Memo Item Contribution

C. Voyles, Suzi, , ,

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

Mailing Address Info Request Per Best Efforts Info Request Per Best Efforts

City ATLANTA State GA Zip Code 30328

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

Name of Employer (for Individual) Info Request Per Best Efforts Occupation (for Individual) Info Request Per Best Efforts

Receipt For: 2018
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
268.48

Date of Receipt
12 / 13 / 2018
Transaction ID : SA11AI.5451

Amount of Each Receipt this Period
268.48

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 805.44

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 23
(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. Wong, Sunn, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 N Smead CT
Info Request Per Best Efforts

City Roswell	State DC	Zip Code 30076
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Info Request Per Best Efforts	Occupation (for Individual) Info Request Per Best Efforts
--	--

Receipt For: 2018
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
268.48

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2018

Transaction ID : SA11AI.5509

Amount of Each Receipt this Period
268.48

Memo Item Contribution

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

Mailing Address

City NEENAH	State WI	Zip Code 54956
----------------	-------------	-------------------

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

Name of Employer (for Individual) Info Requested Per Best Efforts	Occupation (for Individual) Info Requested Per Best Efforts
--	--

Receipt For: 2018
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1142.65

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 09 / 2018

Transaction ID : SA11AI.5483

Amount of Each Receipt this Period
134.24

Memo Item Contribution

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

Mailing Address

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

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	402.72
TOTAL This Period (last page this line number only).....	8375.58

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 23
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMEN VOTE SMART

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Phillips, Alex, , ,

Mailing Address

City Harrisonburg	State VA	Zip Code
----------------------	-------------	----------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		15		2018

Transaction ID : SA17.5553

Amount of Each Receipt this Period
7500.00

Memo Item
Contribution = Carey Acct

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)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	7500.00
TOTAL This Period (last page this line number only).....	7500.00

**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. 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

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2018			

FEC Identification Number

C C00616912

Transaction ID : SB21B.5571

Amount of Each Disbursement this Period

82.30

Memo Item

Full Name (Last, First, Middle Initial)

B. A Political Firm, LLC

Mailing Address 1629 K St NW
Ste 300

City
Washington

State
DC

Zip Code
20006

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

M	M	/	D	D	/	Y	Y	Y	Y
12			20			2018			

FEC Identification Number

C C00616912

Transaction ID : SB21B.5570

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Evans, Ann M., , ,

Mailing Address 2626 Patrice Lane

City
Maumee

State
OH

Zip Code
43537

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

WOMEN VOTE SMART

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2018			

FEC Identification Number

C C00616912

Transaction ID : SB21B.5572

Amount of Each Disbursement this Period

665.35

Memo Item

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

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

1747.65

**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. Trump International

Mailing Address 1100 Pennsylvania Ave NW

City Washington State DC Zip Code 20004

Purpose of Disbursement
Hotel

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 / 19 / 2018

FEC Identification Number

C C00616912

Transaction ID : SB21B.5565

Amount of Each Disbursement this Period

385.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Willard Intercontinental

Mailing Address 1401 Pennsylvania Ave NW

City Washington State DC Zip Code 20004

Purpose of Disbursement
Event Fees

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 / 19 / 2018

FEC Identification Number

C C00616912

Transaction ID : SB21B.5567

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Willard Intercontinental

Mailing Address 1401 Pennsylvania Ave NW

City Washington State DC Zip Code 20004

Purpose of Disbursement
Event Fees

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 / 20 / 2018

FEC Identification Number

C C00616912

Transaction ID : SB21B.5569

Amount of Each Disbursement this Period

3919.02

Memo Item

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

9304.02

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

11051.67

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" 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. Amtrak		Date of Disbursement MM / DD / YYYY 12 / 10 / 2018
Mailing Address 60 Massachusetts Ave NE		FEC Identification Number C 000616912 Transaction ID : SB29.5558 Amount of Each Disbursement this Period 557.00
City Washington	State DC	Zip Code 20002
Purpose of Disbursement Travel	Category/Type	
Candidate Name WOMEN VOTE SMART	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Delta Airlines		Date of Disbursement MM / DD / YYYY 12 / 05 / 2018
Mailing Address P.O. Box 20980		FEC Identification Number C 000616912 Transaction ID : SB29.5556 Amount of Each Disbursement this Period 3944.23
City Atlanta	State GA	Zip Code 30320
Purpose of Disbursement Airfare	Category/Type	
Candidate Name WOMEN VOTE SMART	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. JetBlue		Date of Disbursement MM / DD / YYYY 12 / 21 / 2018
Mailing Address 27-01 Queens Plaza N,		FEC Identification Number C 000616912 Transaction ID : SB29.5561 Amount of Each Disbursement this Period 1615.09
City Long Island City	State NY	Zip Code 11101
Purpose of Disbursement Travel	Category/Type	
Candidate Name WOMEN VOTE SMART	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		<input type="checkbox"/> Memo Item

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

6116.32

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
WOMEN VOTE SMART

A. Verizon Wireless

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 4846

City Trenton State NJ Zip Code 08650

Purpose of Disbursement
Cell Service

Candidate Name
WOMEN VOTE SMART

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

State: District:

Date of Disbursement
M M / D D / Y Y Y Y Y Y
12 / 03 / 2018

FEC Identification Number
C C00616912
Transaction ID : SB29.5557
Amount of Each Disbursement this Period
228.12

Memo Item

B.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

Date of Disbursement
M M / D D / Y Y Y Y Y Y

FEC Identification Number
C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

Date of Disbursement
M M / 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).....▶	228.12
TOTAL This Period (last page this line number only).....▶	6344.44

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 20 OF 23
	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 A Political Firm, LLC			Nature of Debt (Purpose): FEC Compliance Consulting Services 2018
Mailing Address 1629 K St NW Ste 300			
City Washington	State DC	Zip Code 20006	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.5573	
Amount Incurred This Period 3000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Breakpont Books and Games			Nature of Debt (Purpose): Bulk Book Purchase
Mailing Address 3747 Lake Center Dr			
City Mt Dora	State FL	Zip Code 32757	

Outstanding Balance Beginning This Period 6138.00	Transaction ID : SD10.5443	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6138.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bright Media, LLC			Nature of Debt (Purpose): Event Services
Mailing Address Unknown			
City Alexandria	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 5000.00	Transaction ID : SD10.5436	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5000.00

1) SUBTOTALS This Period This Page (optional)..... ▶	14138.00
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 21 OF 23
	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 Campaign Compliance Group			Nature of Debt (Purpose): FEC Compliance Consulting Fees
Mailing Address 300 Spectrum Center Dr			
City Irvine	State CA	Zip Code 92618	

Outstanding Balance Beginning This Period 2250.00	Transaction ID : SD10.5417	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2250.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cook Craig & Francuzenko PLLC			Nature of Debt (Purpose): Legal Fees
Mailing Address 3050 Chain Bridge Rd			
City Fairfax	State VA	Zip Code 22030	

Outstanding Balance Beginning This Period 3673.00	Transaction ID : SD10.5419	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3673.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor EMA			Nature of Debt (Purpose): Event Services - Debt In Dispute
Mailing Address 121 Grosvenor Ave			
City Butler	State PA	Zip Code 16001	

Outstanding Balance Beginning This Period 1635.71	Transaction ID : SD10.5427	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1635.71

1) SUBTOTALS This Period This Page (optional)..... ▶	7558.71
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 22 OF 23
	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 Envision Marketing			Nature of Debt (Purpose): Email Send Fees
Mailing Address 148 Graves Mill Rd			
City Lynchburg	State VA	Zip Code 24502	

Outstanding Balance Beginning This Period 2810.41	Transaction ID : SD10.5421	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2810.41

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Right Turn Strategies DC			Nature of Debt (Purpose): Media Services
Mailing Address Right Turn Strategies DC			
City Manassas	State VA	Zip Code 20109	

Outstanding Balance Beginning This Period 5000.00	Transaction ID : SD10.5434	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Trump International			Nature of Debt (Purpose): Outstanding Balance - October 2018 Event
Mailing Address 1100 Pennsylvania Ave NW			
City Washington	State DC	Zip Code 20004	

Outstanding Balance Beginning This Period 40065.61	Transaction ID : SD10.5440	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 40065.61

1) SUBTOTALS This Period This Page (optional)..... ▶	47876.02
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 23 OF 23
	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)..... ▶	87408.86
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) ▶	87408.86