

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.
WOMENCOUNT PAC

ADDRESS (number and street)
 Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER** **CITY** **STATE** **ZIP CODE**
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 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 / / through / /

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 Stacy Mason

Signature of Treasurer Stacy Mason [Electronically Filed] Date / /

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)

Page 2

Write or Type Committee Name

WOMENCOUNT PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="3658.53"/>	<input type="text" value="3658.53"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="2897.72"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="32275.85"/>	<input type="text" value="50972.64"/>
(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="35173.57"/>	<input type="text" value="54631.17"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="31849.50"/>	<input type="text" value="51307.10"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="3324.07"/>	<input type="text" value="3324.07"/>
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="3705.98"/>	

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)

Page 3

Write or Type Committee Name
WOMENCOUNT PAC

Report Covering the Period: From: M M / D D / Y Y Y Y 03 / 01 / 2016 To: M M / D D / Y Y Y Y 03 / 31 / 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).....	31045.00	48997.51
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	31045.00	48997.51
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	1230.85	1926.83
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	32275.85	50924.34
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	48.30
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))..... ▶	32275.85	50972.64
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	32275.85	50972.64

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	1078.25	3503.35
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1078.25	3503.35
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	30771.25	47803.75
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)) ..	31849.50	51307.10
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	31849.50	51307.10

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)	32275.85	50924.34
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	32275.85	50924.34
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1078.25	3503.35
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1078.25	3503.35

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA

Transaction ID :

Update earmarked contribution notation

Form/Schedule:

Transaction ID:

**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 143
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. JOYCE THIBODEAUX
 Full Name (Last, First, Middle Initial)
 Mailing Address 113 OAKDALE LOOP
 City HOUMA State LA Zip Code 70360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation NOT EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 70.00

Date of Receipt
 03 / 01 / 2016
Transaction ID : INCA3674
 Amount of Each Receipt this Period 8.75
 Memo Item
 ERMK: CAIN FOR CONGRESS

B. JOYCE THIBODEAUX
 Full Name (Last, First, Middle Initial)
 Mailing Address 113 OAKDALE LOOP
 City HOUMA State LA Zip Code 70360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation NOT EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 70.00

Date of Receipt
 03 / 01 / 2016
Transaction ID : INCA3673
 Amount of Each Receipt this Period 8.75
 Memo Item
 ERMK: DOLLY ELIZONDO FOR CONGRESS

C. JOYCE THIBODEAUX
 Full Name (Last, First, Middle Initial)
 Mailing Address 113 OAKDALE LOOP
 City HOUMA State LA Zip Code 70360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation NOT EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 70.00

Date of Receipt
 03 / 01 / 2016
Transaction ID : INCA3672
 Amount of Each Receipt this Period 8.75
 Memo Item
 ERMK: CARROLL FOR COLORADO

SUBTOTAL of Receipts This Page (optional).....▶	26.25
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 143
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. JOYCE THIBODEAUX
 Full Name (Last, First, Middle Initial)
 Mailing Address 113 OAKDALE LOOP
 City HOUMA State LA Zip Code 70360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation NOT EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 70.00

Date of Receipt
 03 / 01 / 2016
Transaction ID : INCA3678
 Amount of Each Receipt this Period 8.75
 Memo Item

B. JOYCE THIBODEAUX
 Full Name (Last, First, Middle Initial)
 Mailing Address 113 OAKDALE LOOP
 City HOUMA State LA Zip Code 70360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation NOT EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 70.00

Date of Receipt
 03 / 01 / 2016
Transaction ID : INCA3675
 Amount of Each Receipt this Period 8.75
 Memo Item
 ERMK: VAL DEMINGS FOR CONGRESS

C. JOYCE THIBODEAUX
 Full Name (Last, First, Middle Initial)
 Mailing Address 113 OAKDALE LOOP
 City HOUMA State LA Zip Code 70360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation NOT EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 70.00

Date of Receipt
 03 / 01 / 2016
Transaction ID : INCA3671
 Amount of Each Receipt this Period 8.75
 Memo Item
 ERMK: ANGIE CRAIG FOR CONGRESS

SUBTOTAL of Receipts This Page (optional).....▶	26.25
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 143
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. JOYCE THIBODEAUX
Full Name (Last, First, Middle Initial)

Mailing Address 113 OAKDALE LOOP

City HOUMA State LA Zip Code 70360

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

Name of Employer NONE Occupation NOT EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **70.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 01 / 2016

Transaction ID : INCA3676

Amount of Each Receipt this Period
8.75

Memo Item
 ERMK: NANCY ROTERING FOR CONGRESS

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

Mailing Address 113 OAKDALE LOOP

City HOUMA State LA Zip Code 70360

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

Name of Employer NONE Occupation NOT EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **70.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 01 / 2016

Transaction ID : INCA3677

Amount of Each Receipt this Period
8.75

Memo Item
 ERMK: DEBORAH ROSS FOR SENATE

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

Mailing Address 720 YORK ST UNIT 201

City SAN FRANCISCO State CA Zip Code 94110

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

Name of Employer APPLE INC Occupation ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **45.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 02 / 2016

Transaction ID : INCA3668

Amount of Each Receipt this Period
15.00

Memo Item
 ERMK: LORETTA SANCHEZ FOR SENATE

SUBTOTAL of Receipts This Page (optional).....	32.50
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 143
	<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)
WOMENCOUNT PAC

A. ANDREW KONTRA
 Full Name (Last, First, Middle Initial)
 Mailing Address 720 YORK ST UNIT 201
 City SAN FRANCISCO State CA Zip Code 94110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer APPLE INC Occupation ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 45.00

Date of Receipt 03 / 02 / 2016
Transaction ID : INCA3667
 Amount of Each Receipt this Period 15.00
 Memo Item
 ERMK: LOFGREN FOR CONGRESS

B. ANDREW KONTRA
 Full Name (Last, First, Middle Initial)
 Mailing Address 720 YORK ST UNIT 201
 City SAN FRANCISCO State CA Zip Code 94110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer APPLE INC Occupation ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 45.00

Date of Receipt 03 / 02 / 2016
Transaction ID : INCA3669
 Amount of Each Receipt this Period 15.00
 Memo Item
 ERMK: ANNA ESHOO FOR CONGRESS

C. GARY LAUDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 88 MERCEDES LANE
 City ATHERTON State CA Zip Code 94027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LAUDER PARTNERS, LLC Occupation VENTURE CAPITALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10800.00

Date of Receipt 03 / 02 / 2016
Transaction ID : INCA3670
 Amount of Each Receipt this Period 2700.00
 Memo Item
 ERMK: KATIE MCGINTY FOR SENATE

SUBTOTAL of Receipts This Page (optional).....▶	2730.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 143
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. JENNIFER BLAKELY
Full Name (Last, First, Middle Initial)

Mailing Address 2 QUAIL MEADOW DR

City WOODSIDE State CA Zip Code 94062

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 ▼
1700.00

Date of Receipt
03 / 03 / 2016

Transaction ID : INCA3666

Amount of Each Receipt this Period
500.00

Memo Item
ERMK: DONNA EDWARDS FOR SENATE

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

Mailing Address 839 MELVILLE AVENUE

City PALO ALTO State CA Zip Code 94301

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

Name of Employer STUBHUB Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
03 / 04 / 2016

Transaction ID : INCA3875

Amount of Each Receipt this Period
1000.00

Memo Item
ERMK: DONNA EDWARDS FOR SENATE

C. ELEANOR PHIPPS PRICE
Full Name (Last, First, Middle Initial)

Mailing Address 14 MAYBRIDGE RD

City BELVEDERE State CA Zip Code 94920

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

Name of Employer SELF-EMPLOYED, SAME NAME Occupation INVESTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
03 / 04 / 2016

Transaction ID : INCA3873

Amount of Each Receipt this Period
1000.00

Memo Item
ERMK: TAMMY FOR ILLINOIS

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00

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 143
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. ELEANOR PHIPPS PRICE
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 MAYBRIDGE RD
 City State Zip Code
 BELVEDERE CA 94920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF-EMPLOYED, SAME NAME INVESTOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 04 / 2016
Transaction ID : INCA3874
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 ERMK: KAMALA HARRIS FOR SENATE

B. SUSIE HWANG
 Full Name (Last, First, Middle Initial)
 Mailing Address 159 MELVILLE AVE
 City State Zip Code
 PALO ALTO CA 94301
 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 ▼
 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 05 / 2016
Transaction ID : INCA3872
 Amount of Each Receipt this Period
 1500.00
 Memo Item
 ERMK: DONNA EDWARDS FOR SENATE

C. HARRY PLANT
 Full Name (Last, First, Middle Initial)
 Mailing Address 228 SEALE AVE.
 City State Zip Code
 PALO ALTO CA 94301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AERIS COMMUNICATIONS VP
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 05 / 2016
Transaction ID : INCA3871
 Amount of Each Receipt this Period
 2700.00
 Memo Item
 ERMK: DONNA EDWARDS FOR SENATE

SUBTOTAL of Receipts This Page (optional).....	5200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 143
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. JENNIFER BLAKELY
Full Name (Last, First, Middle Initial)

Mailing Address 2 QUAIL MEADOW DR

City WOODSIDE State CA Zip Code 94062

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 ▼
1700.00

Date of Receipt
03 / 06 / 2016

Transaction ID : INCA3870

Amount of Each Receipt this Period
1200.00

Memo Item
ERMK: DONNA EDWARDS FOR SENATE

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

Mailing Address 433 MELVILLE AVE

City PALO ALTO State CA Zip Code 94301

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

Name of Employer NONE Occupation NOT EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 09 / 2016

Transaction ID : INCA3869

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 433 MELVILLE AVE

City PALO ALTO State CA Zip Code 94301

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

Name of Employer NONE Occupation NOT EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 09 / 2016

Transaction ID : INCA3868

Amount of Each Receipt this Period
250.00

Memo Item
ERMK: DONNA EDWARDS FOR SENATE

SUBTOTAL of Receipts This Page (optional).....	1700.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 143
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. LESLIE DOROSIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 3810 MAGNOLIA DR
 City PALO ALTO State CA Zip Code 94306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GROVE FOUNDATION Occupation NON-PROFIT MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 10 / 2016
Transaction ID : INCA3866
 Amount of Each Receipt this Period 250.00
 Memo Item
 ERMK: HILLARY FOR AMERICA

B. LESLIE DOROSIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 3810 MAGNOLIA DR
 City PALO ALTO State CA Zip Code 94306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GROVE FOUNDATION Occupation NON-PROFIT MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 10 / 2016
Transaction ID : INCA3867
 Amount of Each Receipt this Period 5.00
 Memo Item

C. LISA LINDELEF
 Full Name (Last, First, Middle Initial)
 Mailing Address 3187 CLAY ST
 City SAN FRANCISCO State CA Zip Code 94115
 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 ▼ 2000.00

Date of Receipt 03 / 10 / 2016
Transaction ID : INCA3975
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ERMK: KAMALA HARRIS FOR SENATE

SUBTOTAL of Receipts This Page (optional).....▶	1255.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 143
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. LISA LINDELEF
 Full Name (Last, First, Middle Initial)
 Mailing Address 3187 CLAY ST
 City SAN FRANCISCO State CA Zip Code 94115
 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 ▼ 2000.00

Date of Receipt 03 / 10 / 2016
Transaction ID : INCA3974
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ERMK: TAMMY FOR ILLINOIS

B. SHANNON CASSIDY
 Full Name (Last, First, Middle Initial)
 Mailing Address 2323B 21ST AVENUE
 City SAN FRANCISCO State CA Zip Code 94116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer WOMENCOUNT Occupation FUNDRAISER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.00

Date of Receipt 03 / 11 / 2016
Transaction ID : INCA3971
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: KAMALA HARRIS FOR SENATE

C. MEGAN CLAYTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 60 DINSMORE AVE.
 City FRAMINGHAM State MA Zip Code 1702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED, SAME NAME Occupation DIGITAL CONSULTING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10.00

Date of Receipt 03 / 11 / 2016
Transaction ID : INCA3972
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: HILLARY FOR AMERICA

SUBTOTAL of Receipts This Page (optional).....	1010.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 143
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. MEGAN CLAYTON
Full Name (Last, First, Middle Initial)

Mailing Address 60 DINSMORE AVE.

City State Zip Code
FRAMINGHAM MA 1702

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

Name of Employer Occupation
SELF-EMPLOYED, SAME NAME DIGITAL CONSULTING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10.00

Date of Receipt
03 / 11 / 2016
Transaction ID : **INCA3973**

Amount of Each Receipt this Period
5.00

Memo Item

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

Mailing Address 505 MONTGOMERY STREET SUITE 2000

City State Zip Code
SAN FRANCISCO CA 94111

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

Name of Employer Occupation
LATHAM & WATKINS ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
03 / 15 / 2016
Transaction ID : **INCA3970**

Amount of Each Receipt this Period
1000.00

Memo Item
ERMK: KAMALA HARRIS FOR SENATE

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

Mailing Address 225 BUSH STREET

City State Zip Code
SAN FRANCISCO CA 94104

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

Name of Employer Occupation
SELF-EMPLOYED, SAME NAME ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
03 / 17 / 2016
Transaction ID : **INCA4046**

Amount of Each Receipt this Period
1000.00

Memo Item
ERMK: KAMALA HARRIS FOR SENATE

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 143
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. CATHERINE CRYSTAL FOSTER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1636 CHANNING AVENUE
 City PALO ALTO State CA Zip Code 94303-2804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer WESTLY FOUNDATION Occupation EXECUTIVE DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 19 / 2016
Transaction ID : INCA4045
 Amount of Each Receipt this Period 500.00
 Memo Item

B. SARAH HABIB
 Full Name (Last, First, Middle Initial)
 Mailing Address 7740 GIVEN ROAD
 City CINCINNATI State OH Zip Code 45243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED, SAME NAME Occupation CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt 03 / 22 / 2016
Transaction ID : INCA4035
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: NORMA TORRES FOR CONGRESS

C. SARAH HABIB
 Full Name (Last, First, Middle Initial)
 Mailing Address 7740 GIVEN ROAD
 City CINCINNATI State OH Zip Code 45243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED, SAME NAME Occupation CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt 03 / 22 / 2016
Transaction ID : INCA4029
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: JUDY CHU FOR CONGRESS

SUBTOTAL of Receipts This Page (optional).....▶	510.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 143
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. SARAH HABIB
Full Name (Last, First, Middle Initial)
Mailing Address 7740 GIVEN ROAD

City CINCINNATI	State OH	Zip Code 45243
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FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED, SAME NAME	Occupation CONSULTANT
--	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2016
Transaction ID : INCA4030

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: KAREN BASS FOR CONGRESS

B. SARAH HABIB
Full Name (Last, First, Middle Initial)
Mailing Address 7740 GIVEN ROAD

City CINCINNATI	State OH	Zip Code 45243
--------------------	-------------	-------------------

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

Name of Employer SELF-EMPLOYED, SAME NAME	Occupation CONSULTANT
--	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2016
Transaction ID : INCA4028

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: JACKIE SPEIER FOR CONGRESS

C. SARAH HABIB
Full Name (Last, First, Middle Initial)
Mailing Address 7740 GIVEN ROAD

City CINCINNATI	State OH	Zip Code 45243
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FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED, SAME NAME	Occupation CONSULTANT
--	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2016
Transaction ID : INCA4031

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: LUCILLE ROYBAL-ALLARD FOR CONGRESS

SUBTOTAL of Receipts This Page (optional).....▶	15.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 143
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. SARAH HABIB
Full Name (Last, First, Middle Initial)
Mailing Address 7740 GIVEN ROAD

City CINCINNATI	State OH	Zip Code 45243
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FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED, SAME NAME	Occupation CONSULTANT
--	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50.00

Date of Receipt
 03 / 22 / 2016
Transaction ID : INCA4033

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: NAPOLITANO FOR CONGRESS

B. SARAH HABIB
Full Name (Last, First, Middle Initial)
Mailing Address 7740 GIVEN ROAD

City CINCINNATI	State OH	Zip Code 45243
--------------------	-------------	-------------------

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

Name of Employer SELF-EMPLOYED, SAME NAME	Occupation CONSULTANT
--	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50.00

Date of Receipt
 03 / 22 / 2016
Transaction ID : INCA4034

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: SUSAN DAVIS FOR CONGRESS

C. SARAH HABIB
Full Name (Last, First, Middle Initial)
Mailing Address 7740 GIVEN ROAD

City CINCINNATI	State OH	Zip Code 45243
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FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED, SAME NAME	Occupation CONSULTANT
--	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50.00

Date of Receipt
 03 / 22 / 2016
Transaction ID : INCA4032

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: CITIZENS FOR WATERS

SUBTOTAL of Receipts This Page (optional).....	15.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 143
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. SARAH HABIB
Full Name (Last, First, Middle Initial)
Mailing Address 7740 GIVEN ROAD

City CINCINNATI	State OH	Zip Code 45243
--------------------	-------------	-------------------

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

Name of Employer SELF-EMPLOYED, SAME NAME	Occupation CONSULTANT
--	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50.00

Date of Receipt
03 / 22 / 2016
Transaction ID : INCA4027

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: BARBARA LEE FOR CONGRESS

B. SARAH HABIB
Full Name (Last, First, Middle Initial)
Mailing Address 7740 GIVEN ROAD

City CINCINNATI	State OH	Zip Code 45243
--------------------	-------------	-------------------

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

Name of Employer SELF-EMPLOYED, SAME NAME	Occupation CONSULTANT
--	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50.00

Date of Receipt
03 / 22 / 2016
Transaction ID : INCA4036

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: JULIA BROWNLEY FOR CONGRESS

C. LAURA LAUDER
Full Name (Last, First, Middle Initial)
Mailing Address 88 MERCEDES LANE

City ATHERTON	State CA	Zip Code 94027
------------------	-------------	-------------------

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

Name of Employer LAUDER PARTNERS, LLC	Occupation VENTURE CAPITALIST
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
13500.00

Date of Receipt
03 / 22 / 2016
Transaction ID : INCA4037

Amount of Each Receipt this Period
5400.00

Memo Item
ERMK: CATHERINE CORTEZ MASTO FOR SENATE

SUBTOTAL of Receipts This Page (optional).....	5410.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 143
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. LOIS TOEVS
Full Name (Last, First, Middle Initial)

Mailing Address 68-3549 AWAMOA PLACE

City WAIKOLOA State HI Zip Code 96738

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 ▼
35.00

Date of Receipt
03 / 22 / 2016
Transaction ID : INCA4039

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: VAL DEMINGS FOR CONGRESS

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

Mailing Address 68-3549 AWAMOA PLACE

City WAIKOLOA State HI Zip Code 96738

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 ▼
35.00

Date of Receipt
03 / 22 / 2016
Transaction ID : INCA4040

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: CAIN FOR CONGRESS

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

Mailing Address 68-3549 AWAMOA PLACE

City WAIKOLOA State HI Zip Code 96738

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 ▼
35.00

Date of Receipt
03 / 22 / 2016
Transaction ID : INCA4041

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: CAROL SHEA-PORTER FOR CONGRESS

SUBTOTAL of Receipts This Page (optional).....▶	15.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 143
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. LOIS TOEVS
 Full Name (Last, First, Middle Initial)
 Mailing Address 68-3549 AWAMOA PLACE
 City WAIKOLOA State HI Zip Code 96738
 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 ▼ 35.00

Date of Receipt 03 / 22 / 2016
Transaction ID : INCA4038
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: CARROLL FOR COLORADO

B. LOIS TOEVS
 Full Name (Last, First, Middle Initial)
 Mailing Address 68-3549 AWAMOA PLACE
 City WAIKOLOA State HI Zip Code 96738
 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 ▼ 35.00

Date of Receipt 03 / 22 / 2016
Transaction ID : INCA4042
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: MONICA VERNON FOR CONGRESS

C. LOIS TOEVS
 Full Name (Last, First, Middle Initial)
 Mailing Address 68-3549 AWAMOA PLACE
 City WAIKOLOA State HI Zip Code 96738
 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 ▼ 35.00

Date of Receipt 03 / 22 / 2016
Transaction ID : INCA4044
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	15.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 143
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. LOIS TOEVS
Full Name (Last, First, Middle Initial)
Mailing Address 68-3549 AWAMOA PLACE
City WAIKOLOA State HI Zip Code 96738
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 35.00

Date of Receipt 03 / 22 / 2016
Transaction ID : INCA4043
Amount of Each Receipt this Period 5.00
 Memo Item
ERMK: TADDEO FOR CONGRESS

B. GARY LAUDER
Full Name (Last, First, Middle Initial)
Mailing Address 88 MERCEDES LANE
City ATHERTON State CA Zip Code 94027
FEC ID number of contributing federal political committee. **C**
Name of Employer LAUDER PARTNERS, LLC Occupation VENTURE CAPITALIST
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 10800.00

Date of Receipt 03 / 23 / 2016
Transaction ID : INCA4025
Amount of Each Receipt this Period 2700.00
 Memo Item
ERMK: ANNA ESHOO FOR CONGRESS

C. LAURA LAUDER
Full Name (Last, First, Middle Initial)
Mailing Address 88 MERCEDES LANE
City ATHERTON State CA Zip Code 94027
FEC ID number of contributing federal political committee. **C**
Name of Employer LAUDER PARTNERS, LLC Occupation VENTURE CAPITALIST
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 13500.00

Date of Receipt 03 / 23 / 2016
Transaction ID : INCA4026
Amount of Each Receipt this Period 2700.00
 Memo Item
ERMK: ANNA ESHOO FOR CONGRESS

SUBTOTAL of Receipts This Page (optional)..... 5405.00
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 143
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. NATASHA INNOCENTI
 Full Name (Last, First, Middle Initial)
 Mailing Address 145 CRESCENT ROAD
 City SAN ANSELMO State CA Zip Code 94960
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MAJOR, LINDSEY & AFRICA Occupation PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **03 / 24 / 2016**
Transaction ID : INCA4054
 Amount of Each Receipt this Period **1000.00**
 Memo Item
 ERMK: KAMALA HARRIS FOR SENATE

B. SAMUEL GOLDMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 268 CHATTANOOGA STREET
 City SAN FRANCISCO State CA Zip Code 94114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CONSERVATION LANDS FOUNDATION Occupation CONSERVATION DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **175.00**

Date of Receipt **03 / 29 / 2016**
Transaction ID : INCA4052
 Amount of Each Receipt this Period **100.00**
 Memo Item
 ERMK: HILLARY FOR AMERICA

C. SAMUEL GOLDMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 268 CHATTANOOGA STREET
 City SAN FRANCISCO State CA Zip Code 94114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CONSERVATION LANDS FOUNDATION Occupation CONSERVATION DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **175.00**

Date of Receipt **03 / 29 / 2016**
Transaction ID : INCA4053
 Amount of Each Receipt this Period **25.00**
 Memo Item
 ERMK: DONNA EDWARDS FOR SENATE

SUBTOTAL of Receipts This Page (optional).....	1125.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 143
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. SAMUEL GOLDMAN
Full Name (Last, First, Middle Initial)

Mailing Address 268 CHATTANOOGA STREET

City	State	Zip Code
SAN FRANCISCO	CA	94114

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

Name of Employer	Occupation
CONSERVATION LANDS FOUNDATION	CONSERVATION DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
175.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	29	/	2016

Transaction ID : INCA4051

Amount of Each Receipt this Period
50.00

Memo Item
ERMK: KAMALA HARRIS FOR SENATE

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

Mailing Address 2500 STEINER STREET, #10

City	State	Zip Code
SAN FRANCISCO	CA	94115

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

Name of Employer	Occupation
SELF-EMPLOYED, SAME NAME	INFORMATION REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	31	/	2016

Transaction ID : INCA4050

Amount of Each Receipt this Period
1000.00

Memo Item
ERMK: KIRKPATRICK FOR SENATE

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

Mailing Address 2500 STEINER STREET, #10

City	State	Zip Code
SAN FRANCISCO	CA	94115

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

Name of Employer	Occupation
SELF-EMPLOYED, SAME NAME	INFORMATION REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	31	/	2016

Transaction ID : INCA4049

Amount of Each Receipt this Period
1000.00

Memo Item
ERMK: TAMMY FOR ILLINOIS

SUBTOTAL of Receipts This Page (optional).....	2050.00
TOTAL This Period (last page this line number only).....	31045.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 26 OF 143
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)
A. ANGIE CRAIG FOR CONGRESS

Mailing Address **PO BOX 22116**

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

FEC ID number of contributing federal political committee. **C C00575209**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3.35**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 03 / 2016

Transaction ID : INCA3909

Amount of Each Receipt this Period
3.35

Memo Item

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

Mailing Address **555 CAPITOL MALL, SUITE 1425**

City **SACRAMENTO** State **CA** Zip Code **95814**

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **216.80**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 03 / 2016

Transaction ID : INCA3856

Amount of Each Receipt this Period
0.80

Memo Item

Full Name (Last, First, Middle Initial)
C. CAIN FOR CONGRESS

Mailing Address **PO BOX 1523**

City **Bangor** State **ME** Zip Code **04402**

FEC ID number of contributing federal political committee. **C C00546077**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3.25**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 03 / 2016

Transaction ID : INCA3912

Amount of Each Receipt this Period
2.35

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	6.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 27 OF 143
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. CARROLL FOR COLORADO
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 470783
 City AURORA State CO Zip Code 80047
 FEC ID number of contributing federal political committee. **C** C00580647
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 4.60

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 03 / 2016
Transaction ID : INCA3910
 Amount of Each Receipt this Period 3.35
 Memo Item

B. DEBORAH ROSS FOR SENATE
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 28258
 City RALEIGH State NC Zip Code 27611
 FEC ID number of contributing federal political committee. **C** C00589820
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 4.55

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 03 / 2016
Transaction ID : INCA3862
 Amount of Each Receipt this Period 2.35
 Memo Item

C. DOLLY ELIZONDO FOR CONGRESS
 Full Name (Last, First, Middle Initial)
 Mailing Address 808 S. SHARY RD. SUITE #5BOX #362
 City MISSION State TX Zip Code 78572
 FEC ID number of contributing federal political committee. **C** C00593376
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 3.35

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 03 / 2016
Transaction ID : INCA3911
 Amount of Each Receipt this Period 3.35
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	9.05
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 28 OF 143
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. DONNA EDWARDS FOR SENATE
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 44305
 City FORT WASHINGTON State MD Zip Code 49430
 FEC ID number of contributing federal political committee. **C** C00574145
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 339.54

Date of Receipt 03 / 03 / 2016
Transaction ID : INCA3858
 Amount of Each Receipt this Period 20.00
 Memo Item

B. HILLARY FOR AMERICA
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 5256
 City NEW YORK State NY Zip Code 10185
 FEC ID number of contributing federal political committee. **C** C00575795
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 26.30

Date of Receipt 03 / 03 / 2016
Transaction ID : INCA3860
 Amount of Each Receipt this Period 1.20
 Memo Item

C. KATIE MCGINTY FOR SENATE
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 22447
 City PHILADELPHIA State PA Zip Code 19110
 FEC ID number of contributing federal political committee. **C** C00582809
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 110.20

Date of Receipt 03 / 03 / 2016
Transaction ID : INCA3859
 Amount of Each Receipt this Period 108.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 129.20
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 29 OF 143
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. LOFGREN FOR CONGRESS
 Full Name (Last, First, Middle Initial)
 Mailing Address 123 E. SAN CARLOS ST. SUITE #531
 City SAN JOSE State CA Zip Code 95112
 FEC ID number of contributing federal political committee. **C** C00289603
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1.00

Date of Receipt 03 / 03 / 2016
Transaction ID : INCA3857
 Amount of Each Receipt this Period 1.00
 Memo Item

B. LORETTA SANCHEZ FOR SENATE
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 6037
 City SANTA ANA State CA Zip Code 92706
 FEC ID number of contributing federal political committee. **C** C00578344
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4.65

Date of Receipt 03 / 03 / 2016
Transaction ID : INCA3908
 Amount of Each Receipt this Period 0.80
 Memo Item

C. NANCY ROTERING FOR CONGRESS
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 18
 City HIGHLAND PARK State IL Zip Code 60035
 FEC ID number of contributing federal political committee. **C** C00574434
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4.05

Date of Receipt 03 / 03 / 2016
Transaction ID : INCA3913
 Amount of Each Receipt this Period 3.35
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 5.15
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 30 OF 143
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. VAL DEMINGS FOR CONGRESS
Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 536926

City ORLAND	State FL	Zip Code 32853
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00590489

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
6.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2016

Transaction ID : INCA3861

Amount of Each Receipt this Period
2.35

Memo Item

B. DONNA EDWARDS FOR SENATE
Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 44305

City FORT WASHINGTON	State MD	Zip Code 49430
-------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00574145

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
339.54

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2016

Transaction ID : INCA3885

Amount of Each Receipt this Period
266.00

Memo Item

C. HILLARY FOR AMERICA
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 5256

City NEW YORK	State NY	Zip Code 10185
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00575795

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
26.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2016

Transaction ID : INCA3887

Amount of Each Receipt this Period
10.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	278.35
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 31 OF 143
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. KAMALA HARRIS FOR SENATE
 Full Name (Last, First, Middle Initial)
 Mailing Address 777 S FIGUEROA ST STE 4050

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

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 204.74

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : INCA3884

Amount of Each Receipt this Period
 40.00

Memo Item

B. TAMMY FOR ILLINOIS
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 59568

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

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 122.55

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : INCA3886

Amount of Each Receipt this Period
 40.00

Memo Item

C. HILLARY FOR AMERICA
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 5256

City NEW YORK	State NY	Zip Code 10185
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00575795

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 26.30

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 17 / 2016

Transaction ID : INCA3981

Amount of Each Receipt this Period
 0.20

Memo Item

SUBTOTAL of Receipts This Page (optional).....	80.20
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 32 OF 143
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. KAMALA HARRIS FOR SENATE
Full Name (Last, First, Middle Initial)
Mailing Address 777 S FIGUEROA ST STE 4050

City	State	Zip Code
LOS ANGELES	CA	90017

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

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
204.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2016

Transaction ID : INCA3982

Amount of Each Receipt this Period

80.20

 Memo Item

B. TAMMY FOR ILLINOIS
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 59568

City	State	Zip Code
SCHAUMBURG	IL	60159

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

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
122.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2016

Transaction ID : INCA3983

Amount of Each Receipt this Period

40.00

 Memo Item

C. ANNA ESHOO FOR CONGRESS
Full Name (Last, First, Middle Initial)
Mailing Address 555 CAPITOL MALL, SUITE 1425

City	State	Zip Code
SACRAMENTO	CA	95814

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

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
216.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2016

Transaction ID : INCA4006

Amount of Each Receipt this Period

216.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....	▶	336.20
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 33 OF 143
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. BARBARA LEE FOR CONGRESS
 Full Name (Last, First, Middle Initial)
 Mailing Address 409 13TH STREET, 17TH FLOOR

City OAKLAND	State CA	Zip Code 94612
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00331769

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 0.20

Date of Receipt
 03 / 24 / 2016
Transaction ID : INCA4010

Amount of Each Receipt this Period
 0.20

Memo Item

B. CAIN FOR CONGRESS
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 1523

City Bangor	State ME	Zip Code 04402
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00546077

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 3.25

Date of Receipt
 03 / 24 / 2016
Transaction ID : INCA4007

Amount of Each Receipt this Period
 0.20

Memo Item

C. CAROL SHEA-PORTER FOR CONGRESS
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 453

City ROCHESTER	State NH	Zip Code 03866
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00419978

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 0.20

Date of Receipt
 03 / 24 / 2016
Transaction ID : INCA4021

Amount of Each Receipt this Period
 0.20

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 34 OF 143
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. CARROLL FOR COLORADO
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 470783
 City State Zip Code
 AURORA CO 80047
 FEC ID number of contributing federal political committee. **C** C00580647
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 4.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 24 / 2016
Transaction ID : INCA4008
 Amount of Each Receipt this Period
 0.20
 Memo Item

B. CATHERINE CORTEZ MASTO FOR SENATE
 Full Name (Last, First, Middle Initial)
 Mailing Address 8020 SOUTH RAINBOW BLVD. SUITE 100
 City State Zip Code
 LAS VEGAS NV 89139
 FEC ID number of contributing federal political committee. **C** C00575548
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 435.85

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 24 / 2016
Transaction ID : INCA4020
 Amount of Each Receipt this Period
 216.00
 Memo Item

C. CITIZENS FOR WATERS
 Full Name (Last, First, Middle Initial)
 Mailing Address 249 E OCEAN BLVD # 685
 City State Zip Code
 LONG BEACH CA 90802
 FEC ID number of contributing federal political committee. **C** C00167585
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 0.20

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 24 / 2016
Transaction ID : INCA4015
 Amount of Each Receipt this Period
 0.20
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	216.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 35 OF 143
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. JACKIE SPEIER FOR CONGRESS
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 112
 City BURLINGAME State CA Zip Code 94011
 FEC ID number of contributing federal political committee. **C** C00443705
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.55

Date of Receipt 03 / 24 / 2016
Transaction ID : INCA4011
 Amount of Each Receipt this Period 0.20
 Memo Item

B. JUDY CHU FOR CONGRESS
 Full Name (Last, First, Middle Initial)
 Mailing Address 16633 VENTURA BLVD # 1008
 City ENCINO State CA Zip Code 91436
 FEC ID number of contributing federal political committee. **C** C00458125
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.20

Date of Receipt 03 / 24 / 2016
Transaction ID : INCA4012
 Amount of Each Receipt this Period 0.20
 Memo Item

C. JULIA BROWNLEY FOR CONGRESS
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 2018
 City THOUSAND OAKS State CA Zip Code 91358
 FEC ID number of contributing federal political committee. **C** C00513077
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.20

Date of Receipt 03 / 24 / 2016
Transaction ID : INCA4019
 Amount of Each Receipt this Period 0.20
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 36 OF 143
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

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

Mailing Address 777 S FIGUEROA ST STE 4050

City	State	Zip Code
LOS ANGELES	CA	90017

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

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
40.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2016

Transaction ID : INCA4024

Amount of Each Receipt this Period
40.00

Memo Item

Full Name (Last, First, Middle Initial)
B. KAREN BASS FOR CONGRESS

Mailing Address 777 S. FIGUEROA STREET SUITE 4050

City	State	Zip Code
LOS ANGELES	CA	90017

FEC ID number of contributing federal political committee. **C** C00476523

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
204.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2016

Transaction ID : INCA4013

Amount of Each Receipt this Period
0.20

Memo Item

Full Name (Last, First, Middle Initial)
C. LUCILLE ROYBAL-ALLARD FOR CONGRESS

Mailing Address 6 E STREET, SE

City	State	Zip Code
WASHINGTON, DC	DC	20003

FEC ID number of contributing federal political committee. **C** C00259143

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2016

Transaction ID : INCA4014

Amount of Each Receipt this Period
0.20

Memo Item

SUBTOTAL of Receipts This Page (optional).....	▶	40.40
TOTAL This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 37 OF 143
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. MONICA VERNON FOR CONGRESS
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 1635
 City CEDAR RAPIDS State IA Zip Code 52406
 FEC ID number of contributing federal political committee. **C** C00571562
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.20

Date of Receipt
 03 / 24 / 2016
Transaction ID : INCA4022
 Amount of Each Receipt this Period 0.20
 Memo Item

B. NAPOLITANO FOR CONGRESS
 Full Name (Last, First, Middle Initial)
 Mailing Address 555 CAPITOL MALL, SUITE 1425
 City SACRAMENTO State CA Zip Code 95814
 FEC ID number of contributing federal political committee. **C** C00334706
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.55

Date of Receipt
 03 / 24 / 2016
Transaction ID : INCA4016
 Amount of Each Receipt this Period 0.20
 Memo Item

C. NORMA TORRES FOR CONGRESS
 Full Name (Last, First, Middle Initial)
 Mailing Address 728 W EDNA PLACE
 City COVINA State CA Zip Code 91722
 FEC ID number of contributing federal political committee. **C** C00557652
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.20

Date of Receipt
 03 / 24 / 2016
Transaction ID : INCA4018
 Amount of Each Receipt this Period 0.20
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 38 OF 143
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. SUSAN DAVIS FOR CONGRESS
Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 84049

City SAN DIEGO	State CA	Zip Code 92138
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00344671

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 24 / 2016
Transaction ID : INCA4017

Amount of Each Receipt this Period
 0.20

Memo Item

B. TADDEO FOR CONGRESS
Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 432094

City PO BOX 432094	State FL	Zip Code 33243
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00445163

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.20

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 24 / 2016
Transaction ID : INCA4023

Amount of Each Receipt this Period
 0.20

Memo Item

C. VAL DEMINGS FOR CONGRESS
Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 536926

City ORLAND	State FL	Zip Code 32853
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00590489

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 6.14

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 24 / 2016
Transaction ID : INCA4009

Amount of Each Receipt this Period
 0.20

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 39 OF 143
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. DONNA EDWARDS FOR SENATE
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 44305
 City State Zip Code
 FORT WASHINGTON MD 49430
 FEC ID number of contributing federal political committee. **C** C00574145
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 339.54

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : INCA4061
 Amount of Each Receipt this Period
 1.00
 Memo Item

B. HILLARY FOR AMERICA
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 5256
 City State Zip Code
 NEW YORK NY 10185
 FEC ID number of contributing federal political committee. **C** C00575795
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 26.30

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : INCA4062
 Amount of Each Receipt this Period
 4.00
 Memo Item

C. KAMALA HARRIS FOR SENATE
 Full Name (Last, First, Middle Initial)
 Mailing Address 777 S FIGUEROA ST STE 4050
 City State Zip Code
 LOS ANGELES CA 90017
 FEC ID number of contributing federal political committee. **C** C00571919
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 204.74

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : INCA4063
 Amount of Each Receipt this Period
 42.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	47.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 40 OF 143
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. KIRKPATRICK FOR SENATE
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 34421
 City PHOENIX State AZ Zip Code 85067
 FEC ID number of contributing federal political committee. **C** C00578484
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.55

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : INCA4065
 Amount of Each Receipt this Period
 40.00
 Memo Item

B. TAMMY FOR ILLINOIS
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 59568
 City SCHAUMBURG State IL Zip Code 60159
 FEC ID number of contributing federal political committee. **C** C00574889
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 122.55

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : INCA4064
 Amount of Each Receipt this Period
 40.00
 Memo Item

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 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).....	80.00
TOTAL This Period (last page this line number only).....	1230.85

**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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. FIRST DATA

Mailing Address 5565 GLENRIDGE CONNECTOR NE
SUITE 2000

City ATLANTA State GA Zip Code 30342

Purpose of Disbursement CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3663

Amount of Each Disbursement this Period: 41.50

Memo Item

Full Name (Last, First, Middle Initial)

B. FIRST DATA

Mailing Address 5565 GLENRIDGE CONNECTOR NE
SUITE 2000

City ATLANTA State GA Zip Code 30342

Purpose of Disbursement CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3664

Amount of Each Disbursement this Period: 140.03

Memo Item

Full Name (Last, First, Middle Initial)

C. FIRST DATA

Mailing Address 5565 GLENRIDGE CONNECTOR NE
SUITE 2000

City ATLANTA State GA Zip Code 30342

Purpose of Disbursement CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3665

Amount of Each Disbursement this Period: 315.50

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 497.03

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. SUSAN DAVIS FOR CONGRESS

Mailing Address PO BOX 84049

City State Zip Code
SAN DIEGO CA 92138

Purpose of Disbursement
REFUND OF BANK FEES INCURRED FOR BOUNCED CHECK

001

Candidate Name

SUSAN DAVIS

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: CA District: 53

Date of Disbursement

MM / DD / YYYY
03 / 08 / 2016

Transaction ID : EXPB3864

Amount of Each Disbursement this Period

12.00

Memo Item

Full Name (Last, First, Middle Initial)

B. TERRI SEWELL FOR CONGRESS

Mailing Address P.O. BOX 1964

City State Zip Code
BIRMINGHAM AL 35201

Purpose of Disbursement
REFUND OF BANK FEES INCURRED FOR BOUNCED CHECK

001

Candidate Name

TERRI SEWELL

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: AL District: 07

Date of Disbursement

MM / DD / YYYY
03 / 08 / 2016

Transaction ID : EXPB3863

Amount of Each Disbursement this Period

12.00

Memo Item

Full Name (Last, First, Middle Initial)

C. AUTHORIZE.NET

Mailing Address P.O. BOX 8999

City State Zip Code
SAN FRANCISCO CA 94128

Purpose of Disbursement
ACCOUNT FEE

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 10 / 2016

Transaction ID : EXPB3916

Amount of Each Disbursement this Period

25.00

Memo Item

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

49.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. WELLS FARGO BANK

Mailing Address 464 CALIFORNIA STREET

City State Zip Code
SAN FRANCISCO CA 94163

Purpose of Disbursement
BANK FEE

001

Candidate Name

Category/
Type

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
03 / 11 / 2016

Transaction ID : EXPB3969

Amount of Each Disbursement this Period

32.22

Memo Item

Full Name (Last, First, Middle Initial)

B. MEGHAN HARVEY

Mailing Address 5425 CHARLOTTE WAY

City State Zip Code
LIVERMORE CA 94550

Purpose of Disbursement
WEBSITE SERVICES

001

Candidate Name

Category/
Type

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
03 / 14 / 2016

Transaction ID : EXPB3914

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

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:

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

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

532.22

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

1078.25

**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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial) A. ANGIE CRAIG FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 03 / 2016
Mailing Address PO BOX 22116		Transaction ID : EXPB3888
City EAGAN	State MN	
Purpose of Disbursement ERMK: JOYCE THIBODEAUX		Amount of Each Disbursement this Period 8.75
Candidate Name ANGIE CRAIG		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MN District: 02		

Full Name (Last, First, Middle Initial) B. ANGIE CRAIG FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 03 / 2016
Mailing Address PO BOX 22116		Transaction ID : EXPB3889
City EAGAN	State MN	
Purpose of Disbursement ERMK: MARGARET HERZ HARLOR		Amount of Each Disbursement this Period 5.00
Candidate Name ANGIE CRAIG		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MN District: 02		

Full Name (Last, First, Middle Initial) C. ANGIE CRAIG FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 03 / 2016
Mailing Address PO BOX 22116		Transaction ID : EXPB3890
City EAGAN	State MN	
Purpose of Disbursement ERMK: STACY MASON		Amount of Each Disbursement this Period 25.00
Candidate Name ANGIE CRAIG		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MN District: 02		

SUBTOTAL of Disbursements This Page (optional).....▶	38.75
TOTAL This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3888

ERMK: JOYCE THIBODEAUX-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB3889

ERMK: MARGARET HERZ HARLOR-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3890

ERMK: STACY MASON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. ANGIE CRAIG FOR CONGRESS

Mailing Address PO BOX 22116

City EAGAN State MN Zip Code 55122

Purpose of Disbursement
ERMK: LENA HENRY

Candidate Name
ANGIE CRAIG

Office Sought: House
 Senate
 President
State: MN District: 02

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3891

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

B. ANGIE CRAIG FOR CONGRESS

Mailing Address PO BOX 22116

City EAGAN State MN Zip Code 55122

Purpose of Disbursement
ERMK: KATHERINE GALLO-PODESTA

Candidate Name
ANGIE CRAIG

Office Sought: House
 Senate
 President
State: MN District: 02

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3892

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ANGIE CRAIG FOR CONGRESS

Mailing Address PO BOX 22116

City EAGAN State MN Zip Code 55122

Purpose of Disbursement
ERMK: RENEE COLOMBO

Candidate Name
ANGIE CRAIG

Office Sought: House
 Senate
 President
State: MN District: 02

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3893

Amount of Each Disbursement this Period

25.00

Memo Item

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

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

40.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3891

ERMK: LENA HENRY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB3892

ERMK: KATHERINE GALLO-PODESTA-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3893

ERMK: RENEE COLOMBO-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. ANGIE CRAIG FOR CONGRESS

Mailing Address PO BOX 22116

City EAGAN State MN Zip Code 55122

Purpose of Disbursement
ERMK: PATRICIA LANGLEY

Candidate Name
ANGIE CRAIG

Office Sought: House
 Senate
 President
State: MN District: 02

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 03 / 2016

Transaction ID : EXPB3894

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

B. ANNA ESHOO FOR CONGRESS

Mailing Address 555 CAPITOL MALL, SUITE 1425

City SACRAMENTO State CA Zip Code 95814

Purpose of Disbursement
ERMK: ANDREW KONTRA

Candidate Name
ANNA ESHOO

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

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 03 / 2016

Transaction ID : EXPB3799

Amount of Each Disbursement this Period

15.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ANNA ESHOO FOR CONGRESS

Mailing Address 555 CAPITOL MALL, SUITE 1425

City SACRAMENTO State CA Zip Code 95814

Purpose of Disbursement
ERMK: SHANNON CASSIDY

Candidate Name
ANNA ESHOO

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

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 03 / 2016

Transaction ID : EXPB3855

Amount of Each Disbursement this Period

5.00

Memo Item

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

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

25.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3894

ERMK: PATRICIA LANGLEY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB3799

ERMK: ANDREW KONTRA-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3855

ERMK: SHANNON CASSIDY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. CAIN FOR CONGRESS

Mailing Address PO BOX 1523

City Bangor State ME Zip Code 04402

Purpose of Disbursement
ERMK: JOYCE THIBODEAUX

Candidate Name
CAIN FOR CONGRESS

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

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3895

Amount of Each Disbursement this Period

8.75

Memo Item

Full Name (Last, First, Middle Initial)

B. CAIN FOR CONGRESS

Mailing Address PO BOX 1523

City Bangor State ME Zip Code 04402

Purpose of Disbursement
ERMK: MARGARET HERZ HARLOR

Candidate Name
CAIN FOR CONGRESS

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

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3896

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CAIN FOR CONGRESS

Mailing Address PO BOX 1523

City Bangor State ME Zip Code 04402

Purpose of Disbursement
ERMK: STACY MASON

Candidate Name
CAIN FOR CONGRESS

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

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3897

Amount of Each Disbursement this Period

25.00

Memo Item

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

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

38.75

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3895

ERMK: JOYCE THIBODEAUX-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB3896

ERMK: MARGARET HERZ HARLOR-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3897

ERMK: STACY MASON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. CAIN FOR CONGRESS

Mailing Address PO BOX 1523

City Bangor State ME Zip Code 04402

Purpose of Disbursement
ERMK: LENA HENRY

Candidate Name
CAIN FOR CONGRESS

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

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : **EXPB3898**

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CAIN FOR CONGRESS

Mailing Address PO BOX 1523

City Bangor State ME Zip Code 04402

Purpose of Disbursement
ERMK: KATHERINE GALLO-PODESTA

Candidate Name
CAIN FOR CONGRESS

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

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : **EXPB3899**

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CAIN FOR CONGRESS

Mailing Address PO BOX 1523

City Bangor State ME Zip Code 04402

Purpose of Disbursement
ERMK: PATRICIA LANGLEY

Candidate Name
CAIN FOR CONGRESS

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

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : **EXPB3900**

Amount of Each Disbursement this Period

5.00

Memo Item

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

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

20.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3898

ERMK: LENA HENRY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB3899

ERMK: KATHERINE GALLO-PODESTA-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3900

ERMK: PATRICIA LANGLEY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. CARROLL FOR COLORADO

Mailing Address PO BOX 470783

City State Zip Code
AURORA CO 80047

Purpose of Disbursement
ERMK: JOYCE THIBODEAUX

Candidate Name
MORGAN CARROLL

Office Sought: House
 Senate
 President
State: CO District: 06

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 03 / 2016

Transaction ID : EXPB3802

Amount of Each Disbursement this Period

8.75

Memo Item

Full Name (Last, First, Middle Initial)

B. CARROLL FOR COLORADO

Mailing Address PO BOX 470783

City State Zip Code
AURORA CO 80047

Purpose of Disbursement
ERMK: MARGARET HERZ HARLOR

Candidate Name
MORGAN CARROLL

Office Sought: House
 Senate
 President
State: CO District: 06

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 03 / 2016

Transaction ID : EXPB3809

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CARROLL FOR COLORADO

Mailing Address PO BOX 470783

City State Zip Code
AURORA CO 80047

Purpose of Disbursement
ERMK: STACY MASON

Candidate Name
MORGAN CARROLL

Office Sought: House
 Senate
 President
State: CO District: 06

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 03 / 2016

Transaction ID : EXPB3817

Amount of Each Disbursement this Period

25.00

Memo Item

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

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

38.75

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3802

ERMK: JOYCE THIBODEAUX-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB3809

ERMK: MARGARET HERZ HARLOR-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3817

ERMK: STACY MASON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. CARROLL FOR COLORADO

Mailing Address PO BOX 470783

City State Zip Code
AURORA CO 80047

Purpose of Disbursement
ERMK: LENA HENRY

Candidate Name
MORGAN CARROLL

Office Sought: House
 Senate
 President
State: CO District: 06

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3824

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CARROLL FOR COLORADO

Mailing Address PO BOX 470783

City State Zip Code
AURORA CO 80047

Purpose of Disbursement
ERMK: KATHERINE GALLO-PODESTA

Candidate Name
MORGAN CARROLL

Office Sought: House
 Senate
 President
State: CO District: 06

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3832

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CARROLL FOR COLORADO

Mailing Address PO BOX 470783

City State Zip Code
AURORA CO 80047

Purpose of Disbursement
ERMK: RENEE COLOMBO

Candidate Name
MORGAN CARROLL

Office Sought: House
 Senate
 President
State: CO District: 06

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3840

Amount of Each Disbursement this Period

25.00

Memo Item

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

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

40.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3824

ERMK: LENA HENRY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB3832

ERMK: KATHERINE GALLO-PODESTA-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3840

ERMK: RENEE COLOMBO-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. CARROLL FOR COLORADO

Mailing Address PO BOX 470783

City State Zip Code
AURORA CO 80047

Purpose of Disbursement
ERMK: PATRICIA LANGLEY

Candidate Name
MORGAN CARROLL

Office Sought: House
 Senate
 President
State: CO District: 06

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	3			2	0	1	6		

Transaction ID : EXPB3844

Amount of Each Disbursement this Period

5	.	0	0
---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

B. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City State Zip Code
RALEIGH NC 27611

Purpose of Disbursement
ERMK: JOYCE THIBODEAUX

Candidate Name
DEBORAH ROSS

Office Sought: House
 Senate
 President
State: NC District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	3			2	0	1	6		

Transaction ID : EXPB3807

Amount of Each Disbursement this Period

8	.	7	5
---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

C. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City State Zip Code
RALEIGH NC 27611

Purpose of Disbursement
ERMK: MARGARET HERZ HARLOR

Candidate Name
DEBORAH ROSS

Office Sought: House
 Senate
 President
State: NC District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	3			2	0	1	6		

Transaction ID : EXPB3814

Amount of Each Disbursement this Period

5	.	0	0
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Memo Item

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

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

1	8	.	7	5
---	---	---	---	---

5	.	0	0
---	---	---	---

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3844

ERMK: PATRICIA LANGLEY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB3807

ERMK: JOYCE THIBODEAUX-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3814

ERMK: MARGARET HERZ HARLOR-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City RALEIGH State NC Zip Code 27611

Purpose of Disbursement
ERMK: STACY MASON

Candidate Name
DEBORAH ROSS

Office Sought: House
 Senate
 President
State: NC District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3822

Amount of Each Disbursement this Period

25.00

Memo Item

Full Name (Last, First, Middle Initial)

B. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City RALEIGH State NC Zip Code 27611

Purpose of Disbursement
ERMK: LENA HENRY

Candidate Name
DEBORAH ROSS

Office Sought: House
 Senate
 President
State: NC District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3829

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

C. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City RALEIGH State NC Zip Code 27611

Purpose of Disbursement
ERMK: KATHERINE GALLO-PODESTA

Candidate Name
DEBORAH ROSS

Office Sought: House
 Senate
 President
State: NC District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3837

Amount of Each Disbursement this Period

5.00

Memo Item

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

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

40.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3822

ERMK: STACY MASON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB3829

ERMK: LENA HENRY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3837

ERMK: KATHERINE GALLO-PODESTA-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City RALEIGH State NC Zip Code 27611

Purpose of Disbursement
ERMK: PATRICIA LANGLEY

Candidate Name
DEBORAH ROSS

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

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3849

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

B. DOLLY ELIZONDO FOR CONGRESS

Mailing Address 808 S. SHARY RD. SUITE #5BOX #362

City MISSION State TX Zip Code 78572

Purpose of Disbursement
ERMK: JOYCE THIBODEAUX

Candidate Name
DOLLY ELIZONDO

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: TX District: 15

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3901

Amount of Each Disbursement this Period

8.75

Memo Item

Full Name (Last, First, Middle Initial)

C. DOLLY ELIZONDO FOR CONGRESS

Mailing Address 808 S. SHARY RD. SUITE #5BOX #362

City MISSION State TX Zip Code 78572

Purpose of Disbursement
ERMK: MARGARET HERZ HARLOR

Candidate Name
DOLLY ELIZONDO

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: TX District: 15

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3902

Amount of Each Disbursement this Period

5.00

Memo Item

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

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

18.75

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3849

ERMK: PATRICIA LANGLEY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB3901

ERMK: JOYCE THIBODEAUX-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3902

ERMK: MARGARET HERZ HARLOR-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. DOLLY ELIZONDO FOR CONGRESS

Mailing Address 808 S. SHARY RD. SUITE #5BOX #362

City MISSION State TX Zip Code 78572

Purpose of Disbursement
ERMK: STACY MASON

Candidate Name

DOLLY ELIZONDO

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: TX District: 15

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3903

Amount of Each Disbursement this Period

25.00

Memo Item

Full Name (Last, First, Middle Initial)

B. DOLLY ELIZONDO FOR CONGRESS

Mailing Address 808 S. SHARY RD. SUITE #5BOX #362

City MISSION State TX Zip Code 78572

Purpose of Disbursement
ERMK: LENA HENRY

Candidate Name

DOLLY ELIZONDO

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: TX District: 15

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3904

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

C. DOLLY ELIZONDO FOR CONGRESS

Mailing Address 808 S. SHARY RD. SUITE #5BOX #362

City MISSION State TX Zip Code 78572

Purpose of Disbursement
ERMK: KATHERINE GALLO-PODESTA

Candidate Name

DOLLY ELIZONDO

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: TX District: 15

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3905

Amount of Each Disbursement this Period

5.00

Memo Item

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

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

40.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3903

ERMK: STACY MASON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB3904

ERMK: LENA HENRY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3905

ERMK: KATHERINE GALLO-PODESTA-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. DOLLY ELIZONDO FOR CONGRESS

Mailing Address 808 S. SHARY RD. SUITE #5BOX #362

City MISSION State TX Zip Code 78572

Purpose of Disbursement
ERMK: RENEE COLOMBO

Candidate Name
DOLLY ELIZONDO

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: TX District: 15

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3906

Amount of Each Disbursement this Period

25.00

Memo Item

Full Name (Last, First, Middle Initial)

B. DOLLY ELIZONDO FOR CONGRESS

Mailing Address 808 S. SHARY RD. SUITE #5BOX #362

City MISSION State TX Zip Code 78572

Purpose of Disbursement
ERMK: PATRICIA LANGLEY

Candidate Name
DOLLY ELIZONDO

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: TX District: 15

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3907

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

C. DONNA EDWARDS FOR SENATE

Mailing Address PO BOX 44305

City FORT WASHINGTON State MD Zip Code 49430

Purpose of Disbursement
ERMK: JENNIFER BLAKELY

Candidate Name
DONNA EDWARDS

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

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3796

Amount of Each Disbursement this Period

500.00

Memo Item

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

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

530.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3906

ERMK: RENEE COLOMBO-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB3907

ERMK: PATRICIA LANGLEY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3796

ERMK: JENNIFER BLAKELY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial) A. HILLARY FOR AMERICA		Date of Disbursement MM / DD / YYYY 03 / 03 / 2016	
Mailing Address P.O. BOX 5256		Transaction ID : EXPB3815 Amount of Each Disbursement this Period 5.00 <input type="checkbox"/> Memo Item	
City NEW YORK	State NY		Zip Code 10185
Purpose of Disbursement ERMK: MARGARET HERZ HARLOR			Category/ Type
Candidate Name HILLARY RODHAM CLINTON			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. HILLARY FOR AMERICA		Date of Disbursement MM / DD / YYYY 03 / 03 / 2016	
Mailing Address P.O. BOX 5256		Transaction ID : EXPB3830 Amount of Each Disbursement this Period 10.00 <input type="checkbox"/> Memo Item	
City NEW YORK	State NY		Zip Code 10185
Purpose of Disbursement ERMK: LENA HENRY			Category/ Type
Candidate Name HILLARY RODHAM CLINTON			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. HILLARY FOR AMERICA		Date of Disbursement MM / DD / YYYY 03 / 03 / 2016	
Mailing Address P.O. BOX 5256		Transaction ID : EXPB3838 Amount of Each Disbursement this Period 5.00 <input type="checkbox"/> Memo Item	
City NEW YORK	State NY		Zip Code 10185
Purpose of Disbursement ERMK: KATHERINE GALLO-PODESTA			Category/ Type
Candidate Name HILLARY RODHAM CLINTON			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

SUBTOTAL of Disbursements This Page (optional).....▶	20.00
TOTAL This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3815

ERMK: MARGARET HERZ HARLOR-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB3830

ERMK: LENA HENRY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3838

ERMK: KATHERINE GALLO-PODESTA-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City State Zip Code
NEW YORK NY 10185

Purpose of Disbursement
ERMK: PATRICIA LANGLEY

Candidate Name
HILLARY RODHAM CLINTON

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

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3850

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

B. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City State Zip Code
NEW YORK NY 10185

Purpose of Disbursement
ERMK: MAUREEN DILLON

Candidate Name
HILLARY RODHAM CLINTON

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

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3852

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

C. LOFGREN FOR CONGRESS

Mailing Address 123 E. SAN CARLOS ST. SUITE #531

City State Zip Code
SAN JOSE CA 95112

Purpose of Disbursement
ERMK: ANDREW KONTRA

Candidate Name
ZOE LOFGREN

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: CA District: 19

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3797

Amount of Each Disbursement this Period

15.00

Memo Item

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

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

25.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3850

ERMK: PATRICIA LANGLEY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB3852

ERMK: MAUREEN DILLON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3797

ERMK: ANDREW KONTRA-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. LOFGREN FOR CONGRESS

Mailing Address 123 E. SAN CARLOS ST. SUITE #531

City SAN JOSE State CA Zip Code 95112

Purpose of Disbursement
ERMK: MAUREEN DILLON

Candidate Name
ZOE LOFGREN

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: CA District: 19

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3851

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

B. LOFGREN FOR CONGRESS

Mailing Address 123 E. SAN CARLOS ST. SUITE #531

City SAN JOSE State CA Zip Code 95112

Purpose of Disbursement
ERMK: SHANNON CASSIDY

Candidate Name
ZOE LOFGREN

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: CA District: 19

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3853

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

C. LORETTA SANCHEZ FOR SENATE

Mailing Address PO BOX 6037

City SANTA ANA State CA Zip Code 92706

Purpose of Disbursement
ERMK: ANDREW KONTRA

Candidate Name
LORETTA SANCHEZ

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

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3798

Amount of Each Disbursement this Period

15.00

Memo Item

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

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

25.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3851

ERMK: MAUREEN DILLON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB3853

ERMK: SHANNON CASSIDY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3798

ERMK: ANDREW KONTRA-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. LORETTA SANCHEZ FOR SENATE

Mailing Address PO BOX 6037

City SANTA ANA State CA Zip Code 92706

Purpose of Disbursement
ERMK: SHANNON CASSIDY

Candidate Name
LORETTA SANCHEZ

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: CA District:

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3854

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

B. NANCY ROTERING FOR CONGRESS

Mailing Address PO BOX 18

City HIGHLAND PARK State IL Zip Code 60035

Purpose of Disbursement
ERMK: JOYCE THIBODEAUX

Candidate Name
NANCY RODKIN ROTERING

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: IL District: 10

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3806

Amount of Each Disbursement this Period

8.75

Memo Item

Full Name (Last, First, Middle Initial)

C. NANCY ROTERING FOR CONGRESS

Mailing Address PO BOX 18

City HIGHLAND PARK State IL Zip Code 60035

Purpose of Disbursement
ERMK: MARGARET HERZ HARLOR

Candidate Name
NANCY RODKIN ROTERING

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: IL District: 10

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3813

Amount of Each Disbursement this Period

5.00

Memo Item

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

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

18.75

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3854

ERMK: SHANNON CASSIDY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB3806

ERMK: JOYCE THIBODEAUX-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3813

ERMK: MARGARET HERZ HARLOR-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)
A. NANCY ROTERING FOR CONGRESS

Mailing Address PO BOX 18

City: HIGHLAND PARK State: IL Zip Code: 60035

Purpose of Disbursement
ERMK: STACY MASON

Candidate Name
NANCY RODKIN ROTERING

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

State: IL District: 10

Date of Disbursement: 03 / 03 / 2016

Transaction ID : **EXPB3821**

Amount of Each Disbursement this Period: 25.00

Memo Item

Full Name (Last, First, Middle Initial)
B. NANCY ROTERING FOR CONGRESS

Mailing Address PO BOX 18

City: HIGHLAND PARK State: IL Zip Code: 60035

Purpose of Disbursement
ERMK: LENA HENRY

Candidate Name
NANCY RODKIN ROTERING

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

State: IL District: 10

Date of Disbursement: 03 / 03 / 2016

Transaction ID : **EXPB3828**

Amount of Each Disbursement this Period: 10.00

Memo Item

Full Name (Last, First, Middle Initial)
C. NANCY ROTERING FOR CONGRESS

Mailing Address PO BOX 18

City: HIGHLAND PARK State: IL Zip Code: 60035

Purpose of Disbursement
ERMK: KATHERINE GALLO-PODESTA

Candidate Name
NANCY RODKIN ROTERING

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

State: IL District: 10

Date of Disbursement: 03 / 03 / 2016

Transaction ID : **EXPB3836**

Amount of Each Disbursement this Period: 5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 40.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3821

ERMK: STACY MASON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB3828

ERMK: LENA HENRY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3836

ERMK: KATHERINE GALLO-PODESTA-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. NANCY ROTERING FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		03		2016

Mailing Address PO BOX 18

Transaction ID : EXPB3842

City State Zip Code
HIGHLAND PARK IL 60035

Amount of Each Disbursement this Period

25.00

Purpose of Disbursement
ERMK: RENEE COLOMBO

Category/ Type

Candidate Name

NANCY RODKIN ROTERING

Memo Item

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: IL District: 10

Full Name (Last, First, Middle Initial)

B. NANCY ROTERING FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		03		2016

Mailing Address PO BOX 18

Transaction ID : EXPB3848

City State Zip Code
HIGHLAND PARK IL 60035

Amount of Each Disbursement this Period

5.00

Purpose of Disbursement
ERMK: PATRICIA LANGLEY

Category/ Type

Candidate Name

NANCY RODKIN ROTERING

Memo Item

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: IL District: 10

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		03		2016

Mailing Address PO BOX 536926

Transaction ID : EXPB3805

City State Zip Code
ORLAND FL 32853

Amount of Each Disbursement this Period

8.75

Purpose of Disbursement
ERMK: JOYCE THIBODEAUX

Category/ Type

Candidate Name

VAL DEMINGS

Memo Item

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: FL District: 10

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

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

38.75

--

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3842

ERMK: RENEE COLOMBO-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB3848

ERMK: PATRICIA LANGLEY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3805

ERMK: JOYCE THIBODEAUX-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address PO BOX 536926

City ORLAND State FL Zip Code 32853

Purpose of Disbursement
ERMK: MARGARET HERZ HARLOR

Candidate Name
VAL DEMINGS

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: FL District: 10

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3812

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address PO BOX 536926

City ORLAND State FL Zip Code 32853

Purpose of Disbursement
ERMK: STACY MASON

Candidate Name
VAL DEMINGS

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: FL District: 10

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3820

Amount of Each Disbursement this Period

25.00

Memo Item

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address PO BOX 536926

City ORLAND State FL Zip Code 32853

Purpose of Disbursement
ERMK: LENA HENRY

Candidate Name
VAL DEMINGS

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: FL District: 10

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3827

Amount of Each Disbursement this Period

10.00

Memo Item

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

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

40.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3812

ERMK: MARGARET HERZ HARLOR-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB3820

ERMK: STACY MASON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3827

ERMK: LENA HENRY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address PO BOX 536926

City ORLAND State FL Zip Code 32853

Purpose of Disbursement
ERMK: KATHERINE GALLO-PODESTA

Candidate Name
VAL DEMINGS

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: FL District: 10

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3835

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address PO BOX 536926

City ORLAND State FL Zip Code 32853

Purpose of Disbursement
ERMK: PATRICIA LANGLEY

Candidate Name
VAL DEMINGS

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: FL District: 10

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : EXPB3847

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

C. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City PHILADELPHIA State PA Zip Code 19110

Purpose of Disbursement
ERMK: GARY LAUDER

Candidate Name
KATHLEEN 'KATIE' MCGINTY

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

Date of Disbursement

MM / DD / YYYY
03 / 04 / 2016

Transaction ID : EXPB3800

Amount of Each Disbursement this Period

2700.00

Memo Item

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

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

2710.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3835

ERMK: KATHERINE GALLO-PODESTA-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB3847

ERMK: PATRICIA LANGLEY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3800

ERMK: GARY LAUDER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. DONNA EDWARDS FOR SENATE

Mailing Address PO BOX 44305

City State Zip Code
FORT WASHINGTON MD 49430

Purpose of Disbursement
ERMK: MARA WALLACE

Candidate Name
DONNA EDWARDS

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: MD District:

Date of Disbursement

MM / DD / YYYY
03 / 10 / 2016

Transaction ID : EXPB3877

Amount of Each Disbursement this Period

250.00

Memo Item

Full Name (Last, First, Middle Initial)

B. DONNA EDWARDS FOR SENATE

Mailing Address PO BOX 44305

City State Zip Code
FORT WASHINGTON MD 49430

Purpose of Disbursement
ERMK: JENNIFER BLAKELY

Candidate Name
DONNA EDWARDS

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: MD District:

Date of Disbursement

MM / DD / YYYY
03 / 10 / 2016

Transaction ID : EXPB3878

Amount of Each Disbursement this Period

1200.00

Memo Item

Full Name (Last, First, Middle Initial)

C. DONNA EDWARDS FOR SENATE

Mailing Address PO BOX 44305

City State Zip Code
FORT WASHINGTON MD 49430

Purpose of Disbursement
ERMK: HARRY PLANT

Candidate Name
DONNA EDWARDS

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: MD District:

Date of Disbursement

MM / DD / YYYY
03 / 10 / 2016

Transaction ID : EXPB3879

Amount of Each Disbursement this Period

2700.00

Memo Item

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

4150.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3877

ERMK: MARA WALLACE-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB3878

ERMK: JENNIFER BLAKELY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3879

ERMK: HARRY PLANT-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. DONNA EDWARDS FOR SENATE

Mailing Address PO BOX 44305

City State Zip Code
FORT WASHINGTON MD 49430

Purpose of Disbursement
ERMK: SUSIE HWANG

Candidate Name
DONNA EDWARDS

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: MD District:

Date of Disbursement

MM / DD / YYYY
03 / 10 / 2016

Transaction ID : EXPB3880

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. DONNA EDWARDS FOR SENATE

Mailing Address PO BOX 44305

City State Zip Code
FORT WASHINGTON MD 49430

Purpose of Disbursement
ERMK: TOD COHEN

Candidate Name
DONNA EDWARDS

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: MD District:

Date of Disbursement

MM / DD / YYYY
03 / 10 / 2016

Transaction ID : EXPB3883

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City State Zip Code
NEW YORK NY 10185

Purpose of Disbursement
ERMK: LESLIE DOROSIN

Candidate Name
HILLARY RODHAM CLINTON

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 10 / 2016

Transaction ID : EXPB3876

Amount of Each Disbursement this Period

250.00

Memo Item

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

2750.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3880

ERMK: SUSIE HWANG-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB3883

ERMK: TOD COHEN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3876

ERMK: LESLIE DOROSIN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KAMALA HARRIS FOR SENATE

Mailing Address 777 S FIGUEROA ST STE 4050

City LOS ANGELES State CA Zip Code 90017

Purpose of Disbursement
ERMK: ELEANOR PHIPPS PRICE

Candidate Name
KAMALA HARRIS

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: CA District:

Date of Disbursement

MM / DD / YYYY
03 / 10 / 2016

Transaction ID : EXPB3882

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City SCHAUMBURG State IL Zip Code 60159

Purpose of Disbursement
ERMK: ELEANOR PHIPPS PRICE

Candidate Name
TAMMY DUCKWORTH

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: IL District:

Date of Disbursement

MM / DD / YYYY
03 / 10 / 2016

Transaction ID : EXPB3881

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City NEW YORK State NY Zip Code 10185

Purpose of Disbursement
ERMK: MEGAN CLAYTON

Candidate Name
HILLARY RODHAM CLINTON

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 17 / 2016

Transaction ID : EXPB3978

Amount of Each Disbursement this Period

5.00

Memo Item

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

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

2005.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3882

ERMK: ELEANOR PHIPPS PRICE-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB3881

ERMK: ELEANOR PHIPPS PRICE-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3978

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

Form/Schedule:

Transaction ID:

**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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KAMALA HARRIS FOR SENATE

Mailing Address 777 S FIGUEROA ST STE 4050

City LOS ANGELES State CA Zip Code 90017

Purpose of Disbursement
ERMK: KAREN SILVERMAN

Candidate Name
KAMALA HARRIS

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

Date of Disbursement

MM / DD / YYYY
03 / 17 / 2016

Transaction ID : EXPB3976

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. KAMALA HARRIS FOR SENATE

Mailing Address 777 S FIGUEROA ST STE 4050

City LOS ANGELES State CA Zip Code 90017

Purpose of Disbursement
ERMK: SHANNON CASSIDY

Candidate Name
KAMALA HARRIS

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

Date of Disbursement

MM / DD / YYYY
03 / 17 / 2016

Transaction ID : EXPB3977

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

C. KAMALA HARRIS FOR SENATE

Mailing Address 777 S FIGUEROA ST STE 4050

City LOS ANGELES State CA Zip Code 90017

Purpose of Disbursement
ERMK: LISA LINDELEF

Candidate Name
KAMALA HARRIS

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

Date of Disbursement

MM / DD / YYYY
03 / 17 / 2016

Transaction ID : EXPB3980

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

2005.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3976

ERMK: KAREN SILVERMAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB3977

ERMK: SHANNON CASSIDY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3980

ERMK: LISA LINDELEF-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City State Zip Code
SCHAUMBURG IL 60159

Purpose of Disbursement
ERMK: LISA LINDELEF

Candidate Name
TAMMY DUCKWORTH

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

Date of Disbursement

MM / DD / YYYY
03 / 17 / 2016

Transaction ID : **EXPB3979**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. ANNA ESHOO FOR CONGRESS

Mailing Address 555 CAPITOL MALL, SUITE 1425

City State Zip Code
SACRAMENTO CA 95814

Purpose of Disbursement
ERMK: GARY LAUDER

Candidate Name
ANNA ESHOO

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: CA District: 18

Date of Disbursement

MM / DD / YYYY
03 / 24 / 2016

Transaction ID : **EXPB3984**

Amount of Each Disbursement this Period

2700.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ANNA ESHOO FOR CONGRESS

Mailing Address 555 CAPITOL MALL, SUITE 1425

City State Zip Code
SACRAMENTO CA 95814

Purpose of Disbursement
ERMK: LAURA LAUDER

Candidate Name
ANNA ESHOO

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: CA District: 18

Date of Disbursement

MM / DD / YYYY
03 / 24 / 2016

Transaction ID : **EXPB3985**

Amount of Each Disbursement this Period

2700.00

Memo Item

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

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

6400.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3979

ERMK: LISA LINDELEF-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB3984

ERMK: GARY LAUDER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3985

ERMK: LAURA LAUDER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. BARBARA LEE FOR CONGRESS

Mailing Address 409 13TH STREET, 17TH FLOOR

City OAKLAND State CA Zip Code 94612

Purpose of Disbursement
ERMK: SARAH HABIB

Candidate Name
BARBARA LEE

Office Sought: House
 Senate
 President
State: CA District: 13

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : EXPB3986

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CAIN FOR CONGRESS

Mailing Address PO BOX 1523

City Bangor State ME Zip Code 04402

Purpose of Disbursement
ERMK: LOIS TOEVS

Candidate Name
CAIN FOR CONGRESS

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : EXPB3999

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CAROL SHEA-PORTER FOR CONGRESS

Mailing Address P.O. BOX 453

City ROCHESTER State NH Zip Code 03866

Purpose of Disbursement
ERMK: LOIS TOEVS

Candidate Name
CAROL SHEA-PORTER FOR CONGRESS

Office Sought: House
 Senate
 President
State: NH District: 01

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : EXPB4004

Amount of Each Disbursement this Period

5.00

Memo Item

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

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

15.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3986

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

Form/Schedule: SB23

Transaction ID: EXPB3999

ERMK: LOIS TOEVS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB4004

ERMK: LOIS TOEVS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. CARROLL FOR COLORADO

Mailing Address PO BOX 470783

City State Zip Code
AURORA CO 80047

Purpose of Disbursement
ERMK: LOIS TOEVS

Candidate Name
MORGAN CARROLL

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: CO District: 06

Date of Disbursement

MM / DD / YYYY
03 / 24 / 2016

Transaction ID : EXPB3997

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CATHERINE CORTEZ MASTO FOR SENATE

Mailing Address 8020 SOUTH RAINBOW BLVD. SUITE 100

City State Zip Code
LAS VEGAS NV 89139

Purpose of Disbursement
ERMK: LAURA LAUDER

Candidate Name
CATHERINE CORTEZ MASTO

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

Date of Disbursement

MM / DD / YYYY
03 / 24 / 2016

Transaction ID : EXPB3996

Amount of Each Disbursement this Period

5400.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CITIZENS FOR WATERS

Mailing Address 249 E OCEAN BLVD # 685

City State Zip Code
LONG BEACH CA 90802

Purpose of Disbursement
ERMK: SARAH HABIB

Candidate Name
MAXINE WATERS

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: CA District: 43

Date of Disbursement

MM / DD / YYYY
03 / 24 / 2016

Transaction ID : EXPB3991

Amount of Each Disbursement this Period

5.00

Memo Item

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

5410.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3997

ERMK: LOIS TOEVS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB3996

ERMK: LAURA LAUDER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3991

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

Form/Schedule:

Transaction ID:

**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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. JACKIE SPEIER FOR CONGRESS

Mailing Address P.O. BOX 112

City State Zip Code
BURLINGAME CA 94011

Purpose of Disbursement
ERMK: SARAH HABIB

Candidate Name
JACKIE SPEIER

Office Sought: House
 Senate
 President
State: CA District: 14

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 24 / 2016

Transaction ID : **EXPB3987**

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

B. JUDY CHU FOR CONGRESS

Mailing Address 16633 VENTURA BLVD # 1008

City State Zip Code
ENCINO CA 91436

Purpose of Disbursement
ERMK: SARAH HABIB

Candidate Name
JUDY CHU

Office Sought: House
 Senate
 President
State: CA District: 27

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 24 / 2016

Transaction ID : **EXPB3988**

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

C. JULIA BROWNLEY FOR CONGRESS

Mailing Address PO BOX 2018

City State Zip Code
THOUSAND OAKS CA 91358

Purpose of Disbursement
ERMK: SARAH HABIB

Candidate Name
JULIA BROWNLEY

Office Sought: House
 Senate
 President
State: CA District: 26

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 24 / 2016

Transaction ID : **EXPB3995**

Amount of Each Disbursement this Period

5.00

Memo Item

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

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

15.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3987

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

Form/Schedule: SB23

Transaction ID: EXPB3988

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3995

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

Form/Schedule:

Transaction ID:

**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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KAMALA HARRIS FOR SENATE

Mailing Address 777 S FIGUEROA ST STE 4050

City State Zip Code
LOS ANGELES CA 90017

Purpose of Disbursement
ERMK: JULIE FLYNN

Candidate Name
KAMALA HARRIS

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: CA District:

Date of Disbursement

MM / DD / YYYY
03 / 24 / 2016

Transaction ID : EXPB4003

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. KAREN BASS FOR CONGRESS

Mailing Address 777 S. FIGUEROA STREET SUITE 4050

City State Zip Code
LOS ANGELES CA 90017

Purpose of Disbursement
ERMK: SARAH HABIB

Candidate Name
KAREN BASS

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: CA District: 37

Date of Disbursement

MM / DD / YYYY
03 / 24 / 2016

Transaction ID : EXPB3989

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

C. LUCILLE ROYBAL-ALLARD FOR CONGRESS

Mailing Address 6 E STREET, SE

City State Zip Code
WASHINGTON, DC DC 20003

Purpose of Disbursement
ERMK: SARAH HABIB

Candidate Name
LUCILLE ROYBAL ALLARD

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: CA District: 40

Date of Disbursement

MM / DD / YYYY
03 / 24 / 2016

Transaction ID : EXPB3990

Amount of Each Disbursement this Period

5.00

Memo Item

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

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

1010.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB4003

ERMK: JULIE FLYNN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB3989

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3990

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

Form/Schedule:

Transaction ID:

**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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. MONICA VERNON FOR CONGRESS

Mailing Address PO BOX 1635

City CEDAR RAPIDS State IA Zip Code 52406

Purpose of Disbursement
ERMK: LOIS TOEVS

Candidate Name
MONICA VERNON

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

Date of Disbursement

MM / DD / YYYY
03 / 24 / 2016

Transaction ID : EXPB4005

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

B. NAPOLITANO FOR CONGRESS

Mailing Address 555 CAPITOL MALL, SUITE 1425

City SACRAMENTO State CA Zip Code 95814

Purpose of Disbursement
ERMK: SARAH HABIB

Candidate Name
GRACE NAPOLITANO

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: CA District: 32

Date of Disbursement

MM / DD / YYYY
03 / 24 / 2016

Transaction ID : EXPB3992

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

C. NORMA TORRES FOR CONGRESS

Mailing Address 728 W EDNA PLACE

City COVINA State CA Zip Code 91722

Purpose of Disbursement
ERMK: SARAH HABIB

Candidate Name
NORMA TORRES

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: CA District: 35

Date of Disbursement

MM / DD / YYYY
03 / 24 / 2016

Transaction ID : EXPB3994

Amount of Each Disbursement this Period

5.00

Memo Item

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

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

15.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB4005

ERMK: LOIS TOEVS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB3992

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3994

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

Form/Schedule:

Transaction ID:

**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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. SUSAN DAVIS FOR CONGRESS

Mailing Address PO BOX 84049

City SAN DIEGO State CA Zip Code 92138

Purpose of Disbursement
ERMK: SARAH HABIB

Candidate Name
SUSAN DAVIS

Office Sought: House
 Senate
 President
State: CA District: 53

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 24 / 2016

Transaction ID : EXPB3993

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

B. TADDEO FOR CONGRESS

Mailing Address PO BOX 432094

City PO BOX 432094 State FL Zip Code 33243

Purpose of Disbursement
ERMK: LOIS TOEVS

Candidate Name
ANNETTE TADDEO

Office Sought: House
 Senate
 President
State: FL District: 26

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 24 / 2016

Transaction ID : EXPB4002

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address PO BOX 536926

City ORLAND State FL Zip Code 32853

Purpose of Disbursement
ERMK: LOIS TOEVS

Candidate Name
VAL DEMINGS

Office Sought: House
 Senate
 President
State: FL District: 10

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 24 / 2016

Transaction ID : EXPB3998

Amount of Each Disbursement this Period

5.00

Memo Item

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

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

15.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3993

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

Form/Schedule: SB23

Transaction ID: EXPB4002

ERMK: LOIS TOEVS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB3998

ERMK: LOIS TOEVS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. DONNA EDWARDS FOR SENATE

Mailing Address PO BOX 44305

City State Zip Code
FORT WASHINGTON MD 49430

Purpose of Disbursement
ERMK: SAMUEL GOLDMAN

Candidate Name
DONNA EDWARDS

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: MD District:

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2016

Transaction ID : EXPB4070

Amount of Each Disbursement this Period

25.00

Memo Item

Full Name (Last, First, Middle Initial)

B. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City State Zip Code
NEW YORK NY 10185

Purpose of Disbursement
ERMK: SAMUEL GOLDMAN

Candidate Name
HILLARY RODHAM CLINTON

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2016

Transaction ID : EXPB4069

Amount of Each Disbursement this Period

100.00

Memo Item

Full Name (Last, First, Middle Initial)

C. KAMALA HARRIS FOR SENATE

Mailing Address 777 S FIGUEROA ST STE 4050

City State Zip Code
LOS ANGELES CA 90017

Purpose of Disbursement
ERMK: SAMUEL GOLDMAN

Candidate Name
KAMALA HARRIS

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: CA District:

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2016

Transaction ID : EXPB4068

Amount of Each Disbursement this Period

50.00

Memo Item

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

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

175.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB4070

ERMK: SAMUEL GOLDMAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB4069

ERMK: SAMUEL GOLDMAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB4068

ERMK: SAMUEL GOLDMAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**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

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

NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KAMALA HARRIS FOR SENATE

Mailing Address 777 S FIGUEROA ST STE 4050

City LOS ANGELES State CA Zip Code 90017

Purpose of Disbursement
ERMK: NATASHA INNOCENTI

Candidate Name
KAMALA HARRIS

Office Sought: House
 Senate
 President
State: CA District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2016

Transaction ID : EXPB4071

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City PHOENIX State AZ Zip Code 85067

Purpose of Disbursement
ERMK: MICHELLE MERCER

Candidate Name
ANN KIRKPATRICK

Office Sought: House
 Senate
 President
State: AZ District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2016

Transaction ID : EXPB4067

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City SCHAUMBURG State IL Zip Code 60159

Purpose of Disbursement
ERMK: MICHELLE MERCER

Candidate Name
TAMMY DUCKWORTH

Office Sought: House
 Senate
 President
State: IL District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2016

Transaction ID : EXPB4066

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

3000.00

30771.25

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB4071

ERMK: NATASHA INNOCENTI-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB4067

ERMK: MICHELLE MERCER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB4066

ERMK: MICHELLE MERCER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 143 OF 143
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor HANSON BRIDGETT LLP	Nature of Debt (Purpose): LEGAL AND COMPLIANCE
Mailing Address 425 MARKET STREET, 26TH FLOOR	
City State Zip Code SAN FRANCISCO CA 94105	

Outstanding Balance Beginning This Period 1305.00	Transaction ID : PAYD3367	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1305.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor VIEW AVENUE GROUP	Nature of Debt (Purpose): COMPLIANCE/REPORTING
Mailing Address 393 7TH AVENUE, SUITE 301	
City State Zip Code SAN FRANCISCO CA 94118	

Outstanding Balance Beginning This Period 0.00	Transaction ID : PAYD3915	
Amount Incurred This Period 2400.98	Payment This Period 0.00	Outstanding Balance at Close of This Period 2400.98

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)..... ▶	3705.98
2) TOTALS This Period (last page this line number only)..... ▶	3705.98
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) ▶	3705.98