

**FEC
FORM 3X**

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

RECEIVED
FEC MAIL CENTER
2011 AUG -1 AM 10:17

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

FEMINIST MAJORITY PAC

ADDRESS (number and street)

1600 WILSON BLVD.

SUITE 801

ARLINGTON

VA

22209

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00377168

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

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

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

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

Election on

MM / DD / YYYY

in the State of

CA

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

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

Election on

MM / DD / YYYY

in the State of

CA

5. Covering Period

01 / 01 / 2011

through

06 / 30 / 2011

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

Type or Print Name of Treasurer ELEANOR SIMEAL, ASSISTANT TREASURER

Signature of Treasurer

Elean Smeal

Date

07 / 29 / 2011

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

Office Use Only

FEC FORM 3X
Rev. 12/2004

11030642702

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

FEMINIST MAJORITY PAC

Report Covering the Period: From: To:

11030642703

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2011"/>		<input type="text" value="3,624.67"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="3,624.67"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="2,068.50"/>	<input type="text" value="2,068.50"/>
(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="5,693.17"/>	<input type="text" value="5,693.17"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="4,837.75"/>	<input type="text" value="4,837.75"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="855.42"/>	<input type="text" value="855.42"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0"/>	

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

FEMINIST MAJORITY PAC

Report Covering the Period: From: **01** ' **01** ' **2011** To: **06** ' **30** ' **2011**

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1,250.00	1,250.00
(ii) Unitemized.....	818.50	818.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2,068.50	2,068.50
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	2,068.50	2,068.50
12. Transfers From Affiliated/Other Party Committees.....	0	0
13. All Loans Received.....	0	0
14. Loan Repayments Received.....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0	0
17. Other Federal Receipts (Dividends, Interest, etc.).....	0	0
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0	0
(b) Levin Funds (from Schedule H5).....	0	0
(c) Total Transfers (add 18(a) and 18(b))..	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	2,068.50	2,068.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	2,068.50	2,068.50

11030642704

DETAILED SUMMARY PAGE
of Disbursements

11030642705

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures	587.75	587.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	587.75	587.75
22. Transfers to Affiliated/Other Party Committees.....	0	0
28. Contributions to Federal Candidates/Committees and Other Political Committees.....	3250.00	3250.00
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	0
29. Other Disbursements	1000.00	1000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	4837.75	4837.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4837.75	4837.75

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)	206850	206850
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	206850	206850
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	58775	58775
37. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	58775	58775

11030642705

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

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

FOR LINE NUMBER: PAGE 6 OF 11
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
FEMINIST MAJORITY PAC

A. Full Name (Last, First, Middle Initial)
MAXEY, JOHN

Mailing Address
355 OLD SHENANDOAH TRAIL

City
HARPERS FERRY State
WV Zip Code
25425

FEC ID number of contributing federal political committee.
C

Name of Employer
DATA DIRECT Occupation
OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
04 / 25 / 2011

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
SMEAL, ELEANOR M.

Mailing Address
900 N. STAFFORD ST.

City
ARLINGTON State
VA Zip Code
22203

FEC ID number of contributing federal political committee.
C

Name of Employer
FEMINIST MAJORITY FDN. Occupation
PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1,000.00

Date of Receipt
06 / 22 / 2011

Amount of Each Receipt this Period
1,000.00

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ▶ **1,250.00**

TOTAL This Period (last page this line number only)..... ▶ **1,250.00**

11030642707

**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)

21b 22 23 24 25 26
 27 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)
FEMINIST MAJORITY PAC

A. Full Name (Last, First, Middle Initial) **PAYPAL, INC** Date of Disbursement **01 / 13 / 2011**

Mailing Address **4100 SOLUTIONS CENTER**

City **CHICAGO IL** State **IL** Zip Code **99210**

Purpose of Disbursement **MO. TRANSACTION FEE** Category/Type **003**

Candidate Name _____ Amount of Each Disbursement this Period **54.10**

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

State: _____ District: _____

B. Full Name (Last, First, Middle Initial) **PAYPAL, INC** Date of Disbursement **02 / 15 / 2011**

Mailing Address **4100 SOLUTIONS CENTER**

City **CHICAGO IL** State **IL** Zip Code **99210**

Purpose of Disbursement **MO. TRANSACTION FEE** Category/Type **003**

Candidate Name _____ Amount of Each Disbursement this Period **54.10**

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

State: _____ District: _____

C. Full Name (Last, First, Middle Initial) **PAYPAL, INC** Date of Disbursement **03 / 15 / 2011**

Mailing Address **4100 SOLUTIONS CENTER**

City **CHICAGO IL** State **IL** Zip Code **99210**

Purpose of Disbursement **MO. TRANSACTION FEE** Category/Type **003**

Candidate Name _____ Amount of Each Disbursement this Period **54.10**

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

State: _____ District: _____

SUBTOTAL of Disbursements This Page (optional)..... **162.30**

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

11030642708

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE 8 OF 11	
	<input checked="" type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

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NAME OF COMMITTEE (In Full)
FEMINIST MAJORITY PAC

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

Mailing Address **4100 SOLUTIONS CENTER**

City **CHICAGO** IL State **IL** Zip Code **99210**

Purpose of Disbursement **MO. TRANSACTION FEE** Category/Type **003**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement **04 / 14 / 2011**

Amount of Each Disbursement this Period **5410**

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

Mailing Address **4100 SOLUTIONS CENTER**

City **CHICAGO** IL State **IL** Zip Code **99210**

Purpose of Disbursement **MO. TRANSACTION FEE** Category/Type **003**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement **05 / 12 / 2011**

Amount of Each Disbursement this Period **5410**

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

Mailing Address **4100 SOLUTIONS CENTER**

City **CHICAGO** IL State **IL** Zip Code **99210**

Purpose of Disbursement **MO. TRANSACTION FEE** Category/Type **003**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement **06 / 19 / 2011**

Amount of Each Disbursement this Period **5410**

SUBTOTAL of Disbursements This Page (optional).....▶ **16230**

TOTAL This Period (last page this line number only).....▶ **32460**

11030642709

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

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

FOR LINE NUMBER:
(check only one)

PAGE **9** OF **11**

<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)

FEMINIST MAJORITY PAC

Full Name (Last, First, Middle Initial)

A. DONNA EDWARDS FOR CONGRESS

Mailing Address

P.O. BOX 441153

City

FT. WASHINGTON, MD 20749

Purpose of Disbursement

CONTRIBUTION

Candidate Name

DONNA EDWARDS

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: **MD**

District: **4**

Date of Disbursement

01 / 21 / 2011

Amount of Each Disbursement this Period

500.00

B. KATHY HOCHULL FOR US CONGRESS

Mailing Address

4927 TRANSIT ROAD

City

BUFFALO, NY 14221

Purpose of Disbursement

CONTRIBUTION

Candidate Name

KATHY HOCHULL

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼ **SPECIAL**

State: **NY**

District: **26**

Date of Disbursement

05 / 12 / 2011

Amount of Each Disbursement this Period

1,000.00

C. GIFFORDS FOR CONGRESS

Mailing Address

P.O. BOX 12886

City

TUCSON, AZ 85732

Purpose of Disbursement

CONTRIBUTION

Candidate Name

GABRIELLE GIFFORDS

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: **AZ**

District: **8**

Date of Disbursement

05 / 24 / 2011

Amount of Each Disbursement this Period

250.00

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

1,750.00

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

1103064710

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE <u>10</u> OF <u>11</u>
	<input type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input checked="" type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full)
FEMINIST MAJORITY PAC

Full Name (Last, First, Middle Initial) A. JANICE HAHN FOR CONGRESS		Date of Disbursement 06 / 10 / 2011
Mailing Address 31912 SUNSET AVENUE		Amount of Each Disbursement this Period 1,000.00
City LAGUNA BEACH, CA	State Zip Code 92651	
Purpose of Disbursement CONTRIBUTION		Category/Type 011
Candidate Name JANICE HAHN		
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 checked="" type="checkbox"/> Other (specify) SPECIAL	
State: CA	District: 36	

Full Name (Last, First, Middle Initial) B. KUSTER FOR CONGRESS		Date of Disbursement 06 / 28 / 2011
Mailing Address P.O. BOX 1498		Amount of Each Disbursement this Period 500.00
City CONCORD, NH	State Zip Code 03302	
Purpose of Disbursement CONTRIBUTION		Category/Type 011
Candidate Name ANN MCLANE KUSTER		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NH	District: 02	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement
Mailing Address		
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		
Office Sought: <input 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:	District:	

SUBTOTAL of Disbursements This Page (optional).....▶	1,500.00
TOTAL This Period (last page this line number only).....▶	3,250.00

11030642711

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FEMINIST MAJORITY PAC

A.

Full Name (Last, First, Middle Initial)
NATALIE TENNANT FOR GOVERNOR

Date of Disbursement
05 / 06 / 2011

Mailing Address
303 WASHINGTON ST. WEST

City **CHARLESTON** State **WV** Zip Code **25302**

Purpose of Disbursement
CONTRIBUTION

Candidate Name
NATALIE TENNANT

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

State: **WV** District: _____

Category/Type
011

Amount of Each Disbursement this Period
1,000.00

B.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: _____ District: _____

Category/Type

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: _____ District: _____

Category/Type

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....▶ **1,000.00**

TOTAL This Period (last page this line number only).....▶ **1,000.00**

11030642712

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

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *FedEx* Shipping Date
7/21/11
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

[Signature]
 PREPARER

8/1/11
 DATE PREPARED

11030642713