

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 393 7TH AVENUE, SUITE 301
 Check if different than previously reported. (ACC) SAN FRANCISCO CA 94118

2. **FEC IDENTIFICATION NUMBER** C C00450098 **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 M M / D D / Y Y Y Y Y Y in the State of
(d) 30-Day **POST-Election** Report for the: General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y Y Y 07 / 01 / 2016 through M M / D D / Y Y Y Y Y Y 07 / 31 / 2016

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

Type or Print Name of Treasurer Stacy Mason

Signature of Treasurer Stacy Mason *[Electronically Filed]* Date M M / D D / Y Y Y Y Y Y 09 / 20 / 2016

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="4544.32"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="30142.74"/>	<input type="text" value="150388.10"/>
(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="34687.06"/>	<input type="text" value="154046.63"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="24402.44"/>	<input type="text" value="143762.01"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="10284.62"/>	<input type="text" value="10284.62"/>
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="8298.70"/>	

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: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	29197.16	144483.67
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	29197.16	144483.67
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	945.58	5356.13
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	30142.74	149839.80
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	548.30
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))..... ▶	30142.74	150388.10
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	30142.74	150388.10

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	762.28	9618.85
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	762.28	9618.85
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	23640.16	133536.91
24. Independent Expenditures (use Schedule E)	0.00	106.25
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	500.00
(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	500.00
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)) ..	24402.44	143762.01
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	24402.44	143762.01

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)	30142.74	149839.80
34. Total Contribution Refunds (from Line 28(d))	0.00	500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	30142.74	149339.80
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	762.28	9618.85
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	762.28	9618.85

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

Form/Schedule: F3XA
Transaction ID :

UPDATED DEBTS AND OBLIGATIONS

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 293
	<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

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. MARCIA ADDY
Full Name (Last, First, Middle Initial)
Mailing Address 3425 NE 67TH AVE

City PORTLAND	State OR	Zip Code 97213
------------------	-------------	-------------------

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

Name of Employer BEAVERTON SCHOOL DISTRICT	Occupation TEACHER
---	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
75.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2016

Transaction ID : INCA5217

Amount of Each Receipt this Period
15.00

Memo Item
ERMK: CARROLL FOR COLORADO

B. MARCIA ADDY
Full Name (Last, First, Middle Initial)
Mailing Address 3425 NE 67TH AVE

City PORTLAND	State OR	Zip Code 97213
------------------	-------------	-------------------

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

Name of Employer BEAVERTON SCHOOL DISTRICT	Occupation TEACHER
---	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
75.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2016

Transaction ID : INCA5259

Amount of Each Receipt this Period
30.00

Memo Item
ERMK: TAMMY FOR ILLINOIS

C. MARCIA ADDY
Full Name (Last, First, Middle Initial)
Mailing Address 3425 NE 67TH AVE

City PORTLAND	State OR	Zip Code 97213
------------------	-------------	-------------------

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

Name of Employer BEAVERTON SCHOOL DISTRICT	Occupation TEACHER
---	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
75.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2016

Transaction ID : INCA5219

Amount of Each Receipt this Period
15.00

Memo Item
ERMK: CAROL SHEA-PORTER FOR CONGRESS

SUBTOTAL of Receipts This Page (optional).....	60.00
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 8 OF 293
	<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. MARCIA ADDY
 Full Name (Last, First, Middle Initial)
 Mailing Address 3425 NE 67TH AVE
 City PORTLAND State OR Zip Code 97213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BEAVERTON SCHOOL DISTRICT Occupation TEACHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **75.00**

Date of Receipt **07 / 01 / 2016**
Transaction ID : INCA5218
 Amount of Each Receipt this Period **15.00**
 Memo Item
 ERMK: CAIN FOR CONGRESS

B. JUANITA CARRILLO
 Full Name (Last, First, Middle Initial)
 Mailing Address 1407 ARIZONA DRIVE
 City EL PASO State TX Zip Code 79902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DAVITA, INC Occupation ADMINISTRATOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **10.00**

Date of Receipt **07 / 01 / 2016**
Transaction ID : INCA5233
 Amount of Each Receipt this Period **5.00**
 Memo Item

C. JUANITA CARRILLO
 Full Name (Last, First, Middle Initial)
 Mailing Address 1407 ARIZONA DRIVE
 City EL PASO State TX Zip Code 79902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DAVITA, INC Occupation ADMINISTRATOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **10.00**

Date of Receipt **07 / 01 / 2016**
Transaction ID : INCA5232
 Amount of Each Receipt this Period **5.00**
 Memo Item
 ERMK: KIRKPATRICK FOR SENATE

SUBTOTAL of Receipts This Page (optional).....	25.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 9 OF 293
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)
A. BARBARA CASE

Mailing Address P.O.BOX 87

City State Zip Code
CORVALLIS OR 97330

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

Name of Employer Occupation
FIRST CHURCH OF CHRIST, SCIENTIST MUSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **60.00**

Date of Receipt
MM / DD / YYYY
07 / 01 / 2016

Transaction ID : INCA5240

Amount of Each Receipt this Period
10.00

Memo Item
ERMK: KIRKPATRICK FOR SENATE

Full Name (Last, First, Middle Initial)
B. BARBARA CASE

Mailing Address P.O.BOX 87

City State Zip Code
CORVALLIS OR 97330

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

Name of Employer Occupation
FIRST CHURCH OF CHRIST, SCIENTIST MUSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **60.00**

Date of Receipt
MM / DD / YYYY
07 / 01 / 2016

Transaction ID : INCA5241

Amount of Each Receipt this Period
10.00

Memo Item
ERMK: TAMMY FOR ILLINOIS

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

Mailing Address P.O.BOX 87

City State Zip Code
CORVALLIS OR 97330

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

Name of Employer Occupation
FIRST CHURCH OF CHRIST, SCIENTIST MUSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **60.00**

Date of Receipt
MM / DD / YYYY
07 / 01 / 2016

Transaction ID : INCA5242

Amount of Each Receipt this Period
10.00

Memo Item
ERMK: KATIE MCGINTY FOR SENATE

SUBTOTAL of Receipts This Page (optional)..... ▶ **30.00**

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 10 OF 293
	<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. BARBARA CASE
Full Name (Last, First, Middle Initial)
Mailing Address P.O.BOX 87

City CORVALLIS	State OR	Zip Code 97330
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FEC ID number of contributing federal political committee. **C**

Name of Employer FIRST CHURCH OF CHRIST, SCIENTIST	Occupation MUSICIAN
---	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
60.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : INCA5244

Amount of Each Receipt this Period
 10.00

Memo Item
 ERMK: DEBORAH ROSS FOR SENATE

B. BARBARA CASE
Full Name (Last, First, Middle Initial)
Mailing Address P.O.BOX 87

City CORVALLIS	State OR	Zip Code 97330
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FEC ID number of contributing federal political committee. **C**

Name of Employer FIRST CHURCH OF CHRIST, SCIENTIST	Occupation MUSICIAN
---	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
60.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : INCA5245

Amount of Each Receipt this Period
 10.00

Memo Item
 ERMK: PATTY JUDGE FOR IOWA

C. BARBARA CASE
Full Name (Last, First, Middle Initial)
Mailing Address P.O.BOX 87

City CORVALLIS	State OR	Zip Code 97330
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FEC ID number of contributing federal political committee. **C**

Name of Employer FIRST CHURCH OF CHRIST, SCIENTIST	Occupation MUSICIAN
---	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
60.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : INCA5243

Amount of Each Receipt this Period
 10.00

Memo Item
 ERMK: MAGGIE FOR NH

SUBTOTAL of Receipts This Page (optional).....	30.00
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 293
	<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. GERRY JENNINGS
Full Name (Last, First, Middle Initial)
Mailing Address 317 FOX DRIVE

City GREAT FALLS	State MT	Zip Code 59404
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 60.00	

Date of Receipt
07 / 01 / 2016
Transaction ID : INCA5221

Amount of Each Receipt this Period
10.00

Memo Item
ERMK: TAMMY FOR ILLINOIS

B. GERRY JENNINGS
Full Name (Last, First, Middle Initial)
Mailing Address 317 FOX DRIVE

City GREAT FALLS	State MT	Zip Code 59404
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 60.00	

Date of Receipt
07 / 01 / 2016
Transaction ID : INCA5223

Amount of Each Receipt this Period
10.00

Memo Item
ERMK: MAGGIE FOR NH

C. GERRY JENNINGS
Full Name (Last, First, Middle Initial)
Mailing Address 317 FOX DRIVE

City GREAT FALLS	State MT	Zip Code 59404
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 60.00	

Date of Receipt
07 / 01 / 2016
Transaction ID : INCA5225

Amount of Each Receipt this Period
10.00

Memo Item
ERMK: PATTY JUDGE FOR IOWA

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 293
<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. GERRY JENNINGS
Full Name (Last, First, Middle Initial)
Mailing Address 317 FOX DRIVE

City GREAT FALLS	State MT	Zip Code 59404
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 60.00	

Date of Receipt
07 / 01 / 2016
Transaction ID : INCA5224

Amount of Each Receipt this Period
10.00

Memo Item
ERMK: DEBORAH ROSS FOR SENATE

B. GERRY JENNINGS
Full Name (Last, First, Middle Initial)
Mailing Address 317 FOX DRIVE

City GREAT FALLS	State MT	Zip Code 59404
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 60.00	

Date of Receipt
07 / 01 / 2016
Transaction ID : INCA5220

Amount of Each Receipt this Period
10.00

Memo Item
ERMK: KIRKPATRICK FOR SENATE

C. GERRY JENNINGS
Full Name (Last, First, Middle Initial)
Mailing Address 317 FOX DRIVE

City GREAT FALLS	State MT	Zip Code 59404
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 60.00	

Date of Receipt
07 / 01 / 2016
Transaction ID : INCA5222

Amount of Each Receipt this Period
10.00

Memo Item
ERMK: KATIE MCGINTY FOR SENATE

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 293
	<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. DEBORAH LOPEZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 116A DAY STREET
 City SAN FRANCISCO State CA Zip Code 94131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED, SAME NAME Occupation REALTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **60.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : INCA5226
 Amount of Each Receipt this Period **10.00**
 Memo Item
 ERMK: KIRKPATRICK FOR SENATE

B. DEBORAH LOPEZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 116A DAY STREET
 City SAN FRANCISCO State CA Zip Code 94131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED, SAME NAME Occupation REALTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **60.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : INCA5229
 Amount of Each Receipt this Period **10.00**
 Memo Item
 ERMK: MAGGIE FOR NH

C. DEBORAH LOPEZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 116A DAY STREET
 City SAN FRANCISCO State CA Zip Code 94131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED, SAME NAME Occupation REALTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **60.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : INCA5228
 Amount of Each Receipt this Period **10.00**
 Memo Item
 ERMK: KATIE MCGINTY FOR SENATE

SUBTOTAL of Receipts This Page (optional).....	30.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 14 OF 293
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)
A. DEBORAH LOPEZ

Mailing Address 116A DAY STREET

City State Zip Code
SAN FRANCISCO CA 94131

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

Name of Employer Occupation
SELF-EMPLOYED, SAME NAME REALTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **60.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 01 / 2016

Transaction ID : INCA5227

Amount of Each Receipt this Period
10.00

Memo Item
ERMK: TAMMY FOR ILLINOIS

Full Name (Last, First, Middle Initial)
B. DEBORAH LOPEZ

Mailing Address 116A DAY STREET

City State Zip Code
SAN FRANCISCO CA 94131

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

Name of Employer Occupation
SELF-EMPLOYED, SAME NAME REALTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **60.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 01 / 2016

Transaction ID : INCA5231

Amount of Each Receipt this Period
10.00

Memo Item
ERMK: PATTY JUDGE FOR IOWA

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

Mailing Address 116A DAY STREET

City State Zip Code
SAN FRANCISCO CA 94131

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

Name of Employer Occupation
SELF-EMPLOYED, SAME NAME REALTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **60.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 01 / 2016

Transaction ID : INCA5230

Amount of Each Receipt this Period
10.00

Memo Item
ERMK: DEBORAH ROSS FOR SENATE

SUBTOTAL of Receipts This Page (optional)..... ▶ **30.00**

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

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

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

FOR LINE NUMBER: PAGE 15 OF 293
(check only one)

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

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. CATHERINE SPAULDING
Full Name (Last, First, Middle Initial)
Mailing Address 135 TRACY LANE

City SHELBURNE	State VT	Zip Code 05482
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 30.00	

Date of Receipt
07 / 01 / 2016
Transaction ID : INCA5258

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: KIRKPATRICK FOR SENATE

B. CATHERINE SPAULDING
Full Name (Last, First, Middle Initial)
Mailing Address 135 TRACY LANE

City SHELBURNE	State VT	Zip Code 05482
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 30.00	

Date of Receipt
07 / 01 / 2016
Transaction ID : INCA5253

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: PATTY JUDGE FOR IOWA

C. CATHERINE SPAULDING
Full Name (Last, First, Middle Initial)
Mailing Address 135 TRACY LANE

City SHELBURNE	State VT	Zip Code 05482
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 30.00	

Date of Receipt
07 / 01 / 2016
Transaction ID : INCA5256

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: KATIE MCGINTY FOR SENATE

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: PAGE 16 OF 293
(check only one)

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

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. CATHERINE SPAULDING
Full Name (Last, First, Middle Initial)
Mailing Address 135 TRACY LANE

City SHELBURNE	State VT	Zip Code 05482
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 30.00	

Date of Receipt
MM / DD / YYYY
07 / 01 / 2016
Transaction ID : INCA5254

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: DEBORAH ROSS FOR SENATE

B. CATHERINE SPAULDING
Full Name (Last, First, Middle Initial)
Mailing Address 135 TRACY LANE

City SHELBURNE	State VT	Zip Code 05482
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 30.00	

Date of Receipt
MM / DD / YYYY
07 / 01 / 2016
Transaction ID : INCA5257

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: TAMMY FOR ILLINOIS

C. CATHERINE SPAULDING
Full Name (Last, First, Middle Initial)
Mailing Address 135 TRACY LANE

City SHELBURNE	State VT	Zip Code 05482
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 30.00	

Date of Receipt
MM / DD / YYYY
07 / 01 / 2016
Transaction ID : INCA5255

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: MAGGIE FOR NH

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 17 OF 293
	<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. JEANNE STILLMAN
Full Name (Last, First, Middle Initial)

Mailing Address 166 EDGARS LANE

City HASTINGS-ON-H State NY Zip Code 10706

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30.00

Date of Receipt 07 / 01 / 2016
Transaction ID : INCA5239

Amount of Each Receipt this Period 5.00

Memo Item
ERMK: PATTY JUDGE FOR IOWA

B. JEANNE STILLMAN
Full Name (Last, First, Middle Initial)

Mailing Address 166 EDGARS LANE

City HASTINGS-ON-H State NY Zip Code 10706

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30.00

Date of Receipt 07 / 01 / 2016
Transaction ID : INCA5238

Amount of Each Receipt this Period 5.00

Memo Item
ERMK: DEBORAH ROSS FOR SENATE

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

Mailing Address 166 EDGARS LANE

City HASTINGS-ON-H State NY Zip Code 10706

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30.00

Date of Receipt 07 / 01 / 2016
Transaction ID : INCA5237

Amount of Each Receipt this Period 5.00

Memo Item
ERMK: MAGGIE FOR NH

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 18 OF 293
	<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. JEANNE STILLMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 166 EDGARS LANE
 City HASTINGS-ON-H State NY Zip Code 10706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED, SAME NAME Occupation PUBLIC HEALTH CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **30.00**

Date of Receipt **07 / 01 / 2016**
Transaction ID : INCA5236
 Amount of Each Receipt this Period **5.00**
 Memo Item
 ERMK: KATIE MCGINTY FOR SENATE

B. JEANNE STILLMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 166 EDGARS LANE
 City HASTINGS-ON-H State NY Zip Code 10706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED, SAME NAME Occupation PUBLIC HEALTH CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **30.00**

Date of Receipt **07 / 01 / 2016**
Transaction ID : INCA5235
 Amount of Each Receipt this Period **5.00**
 Memo Item
 ERMK: TAMMY FOR ILLINOIS

C. JEANNE STILLMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 166 EDGARS LANE
 City HASTINGS-ON-H State NY Zip Code 10706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED, SAME NAME Occupation PUBLIC HEALTH CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **30.00**

Date of Receipt **07 / 01 / 2016**
Transaction ID : INCA5234
 Amount of Each Receipt this Period **5.00**
 Memo Item
 ERMK: KIRKPATRICK FOR SENATE

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 293
	<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. CHARLES STIMSON
Full Name (Last, First, Middle Initial)

Mailing Address 909 WARREN ST

City HUDSON State NY Zip Code 12534

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

Name of Employer BOARD OF ELECTIONS IN THE CITY OF NY Occupation TRAINER ASSISTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30.00

Date of Receipt 07 / 01 / 2016

Transaction ID : INCA5248

Amount of Each Receipt this Period 5.00

Memo Item

ERMK: KATIE MCGINTY FOR SENATE

B. CHARLES STIMSON
Full Name (Last, First, Middle Initial)

Mailing Address 909 WARREN ST

City HUDSON State NY Zip Code 12534

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

Name of Employer BOARD OF ELECTIONS IN THE CITY OF NY Occupation TRAINER ASSISTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30.00

Date of Receipt 07 / 01 / 2016

Transaction ID : INCA5249

Amount of Each Receipt this Period 5.00

Memo Item

ERMK: MAGGIE FOR NH

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

Mailing Address 909 WARREN ST

City HUDSON State NY Zip Code 12534

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

Name of Employer BOARD OF ELECTIONS IN THE CITY OF NY Occupation TRAINER ASSISTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30.00

Date of Receipt 07 / 01 / 2016

Transaction ID : INCA5250

Amount of Each Receipt this Period 5.00

Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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 293
	<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. CHARLES STIMSON
Full Name (Last, First, Middle Initial)

Mailing Address 909 WARREN ST

City HUDSON State NY Zip Code 12534

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

Name of Employer BOARD OF ELECTIONS IN THE CITY OF NY Occupation TRAINER ASSISTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30.00

Date of Receipt 07 / 01 / 2016

Transaction ID : INCA5246

Amount of Each Receipt this Period 5.00

Memo Item
ERMK: KIRKPATRICK FOR SENATE

B. CHARLES STIMSON
Full Name (Last, First, Middle Initial)

Mailing Address 909 WARREN ST

City HUDSON State NY Zip Code 12534

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

Name of Employer BOARD OF ELECTIONS IN THE CITY OF NY Occupation TRAINER ASSISTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30.00

Date of Receipt 07 / 01 / 2016

Transaction ID : INCA5247

Amount of Each Receipt this Period 5.00

Memo Item
ERMK: TAMMY FOR ILLINOIS

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

Mailing Address 909 WARREN ST

City HUDSON State NY Zip Code 12534

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

Name of Employer BOARD OF ELECTIONS IN THE CITY OF NY Occupation TRAINER ASSISTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30.00

Date of Receipt 07 / 01 / 2016

Transaction ID : INCA5251

Amount of Each Receipt this Period 5.00

Memo Item
ERMK: PATTY JUDGE FOR IOWA

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 21 OF 293
	<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. TERESA YOUNG
Full Name (Last, First, Middle Initial)

Mailing Address 1014 N BROADWAY

City COUNCIL BLUFFS State IA Zip Code 51503

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

Name of Employer CRAYON PLAYHOUSE IN-HOME CHILDCARE Occupation CHILDCARE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 01 / 2016

Transaction ID : INCA5252

Amount of Each Receipt this Period
 5.00

Memo Item
 ERMK: PATTY JUDGE FOR IOWA

B. LAURA HELFMAN
Full Name (Last, First, Middle Initial)

Mailing Address 297 SUNSET VISTA

City COALMONT State TN Zip Code 37313

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

Name of Employer SELF-EMPLOYED, SAME NAME Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 135.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 03 / 2016

Transaction ID : INCA5215

Amount of Each Receipt this Period
 10.00

Memo Item
 ERMK: KATIE MCGINTY FOR SENATE

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

Mailing Address 297 SUNSET VISTA

City COALMONT State TN Zip Code 37313

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

Name of Employer SELF-EMPLOYED, SAME NAME Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 135.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 03 / 2016

Transaction ID : INCA5211

Amount of Each Receipt this Period
 10.00

Memo Item
 ERMK: DEBORAH ROSS FOR SENATE

SUBTOTAL of Receipts This Page (optional)..... ▶ 25.00

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 293
<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. LAURA HELFMAN
Full Name (Last, First, Middle Initial)
Mailing Address 297 SUNSET VISTA

City COALMONT	State TN	Zip Code 37313
FEC ID number of contributing federal political committee. C		
Name of Employer SELF-EMPLOYED, SAME NAME	Occupation PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 135.00	

Date of Receipt
07 / 03 / 2016
Transaction ID : INCA5216

Amount of Each Receipt this Period
10.00

Memo Item
ERMK: MAGGIE FOR NH

B. LAURA HELFMAN
Full Name (Last, First, Middle Initial)
Mailing Address 297 SUNSET VISTA

City COALMONT	State TN	Zip Code 37313
FEC ID number of contributing federal political committee. C		
Name of Employer SELF-EMPLOYED, SAME NAME	Occupation PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 135.00	

Date of Receipt
07 / 03 / 2016
Transaction ID : INCA5214

Amount of Each Receipt this Period
10.00

Memo Item
ERMK: PATTY JUDGE FOR IOWA

C. LAURA HELFMAN
Full Name (Last, First, Middle Initial)
Mailing Address 297 SUNSET VISTA

City COALMONT	State TN	Zip Code 37313
FEC ID number of contributing federal political committee. C		
Name of Employer SELF-EMPLOYED, SAME NAME	Occupation PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 135.00	

Date of Receipt
07 / 03 / 2016
Transaction ID : INCA5213

Amount of Each Receipt this Period
10.00

Memo Item
ERMK: TAMMY FOR ILLINOIS

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 293
	<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. LAURA HELFMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 297 SUNSET VISTA
 City COALMONT State TN Zip Code 37313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED, SAME NAME Occupation PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **135.00**

Date of Receipt **07 / 03 / 2016**
Transaction ID : INCA5212
 Amount of Each Receipt this Period **10.00**
 Memo Item
 ERMK: KIRKPATRICK FOR SENATE

B. SUZANNE LEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1016 E. HIGHLAND AVE
 City PHOENIX State AZ Zip Code 85014
 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 **30.00**

Date of Receipt **07 / 03 / 2016**
Transaction ID : INCA5205
 Amount of Each Receipt this Period **5.00**
 Memo Item
 ERMK: KIRKPATRICK FOR SENATE

C. SUZANNE LEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1016 E. HIGHLAND AVE
 City PHOENIX State AZ Zip Code 85014
 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 **30.00**

Date of Receipt **07 / 03 / 2016**
Transaction ID : INCA5208
 Amount of Each Receipt this Period **5.00**
 Memo Item
 ERMK: MAGGIE FOR NH

SUBTOTAL of Receipts This Page (optional).....	20.00
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 293
	<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. SUZANNE LEE
Full Name (Last, First, Middle Initial)

Mailing Address 1016 E. HIGHLAND AVE

City PHOENIX State AZ Zip Code 85014

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 ▼ 30.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 03 / 2016

Transaction ID : INCA5210

Amount of Each Receipt this Period
 5.00

Memo Item
 ERMK: PATTY JUDGE FOR IOWA

B. SUZANNE LEE
Full Name (Last, First, Middle Initial)

Mailing Address 1016 E. HIGHLAND AVE

City PHOENIX State AZ Zip Code 85014

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 ▼ 30.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 03 / 2016

Transaction ID : INCA5207

Amount of Each Receipt this Period
 5.00

Memo Item
 ERMK: KATIE MCGINTY FOR SENATE

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

Mailing Address 1016 E. HIGHLAND AVE

City PHOENIX State AZ Zip Code 85014

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 ▼ 30.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 03 / 2016

Transaction ID : INCA5209

Amount of Each Receipt this Period
 5.00

Memo Item
 ERMK: DEBORAH ROSS FOR SENATE

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 25 OF 293
	<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. SUZANNE LEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1016 E. HIGHLAND AVE
 City PHOENIX State AZ Zip Code 85014
 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 ▼ 30.00

Date of Receipt 07 / 03 / 2016
Transaction ID : INCA5206
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: TAMMY FOR ILLINOIS

B. KAREN SILVERMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 505 MONTGOMERY STREET SUITE 2000
 City SAN FRANCISCO State CA Zip Code 94111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LATHAM & WATKINS Occupation ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 07 / 05 / 2016
Transaction ID : INCA5204
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ERMK: KIRKPATRICK FOR SENATE

C. ROBERT FUNK
 Full Name (Last, First, Middle Initial)
 Mailing Address 1013 E BROADWAY
 City HELENA State MT Zip Code 59601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MONTANA AFL-CIO Occupation COMMUNICATIONS DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 30.00

Date of Receipt 07 / 07 / 2016
Transaction ID : INCA5725
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: KIRKPATRICK FOR SENATE

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 26 OF 293
	<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. ROBERT FUNK
 Full Name (Last, First, Middle Initial)
 Mailing Address 1013 E BROADWAY
 City HELENA State MT Zip Code 59601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MONTANA AFL-CIO Occupation COMMUNICATIONS DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 30.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 07 / 2016
Transaction ID : INCA5727
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: KATIE MCGINTY FOR SENATE

B. ROBERT FUNK
 Full Name (Last, First, Middle Initial)
 Mailing Address 1013 E BROADWAY
 City HELENA State MT Zip Code 59601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MONTANA AFL-CIO Occupation COMMUNICATIONS DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 30.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 07 / 2016
Transaction ID : INCA5728
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: MAGGIE FOR NH

C. ROBERT FUNK
 Full Name (Last, First, Middle Initial)
 Mailing Address 1013 E BROADWAY
 City HELENA State MT Zip Code 59601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MONTANA AFL-CIO Occupation COMMUNICATIONS DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 30.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 07 / 2016
Transaction ID : INCA5729
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: DEBORAH ROSS FOR SENATE

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 27 OF 293
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)
A. ROBERT FUNK

Mailing Address 1013 E BROADWAY

City HELENA	State MT	Zip Code 59601
----------------	-------------	-------------------

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

Name of Employer MONTANA AFL-CIO	Occupation COMMUNICATIONS DIRECTOR
-------------------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
30.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		07		2016

Transaction ID : INCA5730

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: PATTY JUDGE FOR IOWA

Full Name (Last, First, Middle Initial)
B. ROBERT FUNK

Mailing Address 1013 E BROADWAY

City HELENA	State MT	Zip Code 59601
----------------	-------------	-------------------

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

Name of Employer MONTANA AFL-CIO	Occupation COMMUNICATIONS DIRECTOR
-------------------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
30.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		07		2016

Transaction ID : INCA5726

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: TAMMY FOR ILLINOIS

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

Mailing Address 240 3RD STREET, APT. 314

City OAKLAND	State CA	Zip Code 94607
-----------------	-------------	-------------------

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

Name of Employer TULCHIN RESEARCH	Occupation CONSULTANT
--------------------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
60.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		07		2016

Transaction ID : INCA5731

Amount of Each Receipt this Period
10.00

Memo Item
ERMK: KIRKPATRICK FOR SENATE

SUBTOTAL of Receipts This Page (optional).....▶	20.00
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 28 OF 293
	<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. BEN KROMPAK
Full Name (Last, First, Middle Initial)

Mailing Address 240 3RD STREET, APT. 314

City OAKLAND	State CA	Zip Code 94607
-----------------	-------------	-------------------

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

Name of Employer TULCHIN RESEARCH	Occupation CONSULTANT
--------------------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **60.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		07		2016

Transaction ID : INCA5733

Amount of Each Receipt this Period

10.00

 Memo Item
 ERMK: KATIE MCGINTY FOR SENATE

B. BEN KROMPAK
Full Name (Last, First, Middle Initial)

Mailing Address 240 3RD STREET, APT. 314

City OAKLAND	State CA	Zip Code 94607
-----------------	-------------	-------------------

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

Name of Employer TULCHIN RESEARCH	Occupation CONSULTANT
--------------------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **60.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		07		2016

Transaction ID : INCA5734

Amount of Each Receipt this Period

10.00

 Memo Item
 ERMK: MAGGIE FOR NH

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

Mailing Address 240 3RD STREET, APT. 314

City OAKLAND	State CA	Zip Code 94607
-----------------	-------------	-------------------

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

Name of Employer TULCHIN RESEARCH	Occupation CONSULTANT
--------------------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **60.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		07		2016

Transaction ID : INCA5732

Amount of Each Receipt this Period

10.00

 Memo Item
 ERMK: TAMMY FOR ILLINOIS

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 29 OF 293
	<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. BEN KROMPAK
Full Name (Last, First, Middle Initial)

Mailing Address 240 3RD STREET, APT. 314

City	State	Zip Code
OAKLAND	CA	94607

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

Name of Employer	Occupation
TULCHIN RESEARCH	CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **60.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		07		2016

Transaction ID : INCA5735

Amount of Each Receipt this Period

10.00

 Memo Item
 ERMK: DEBORAH ROSS FOR SENATE

B. BEN KROMPAK
Full Name (Last, First, Middle Initial)

Mailing Address 240 3RD STREET, APT. 314

City	State	Zip Code
OAKLAND	CA	94607

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

Name of Employer	Occupation
TULCHIN RESEARCH	CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **60.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		07		2016

Transaction ID : INCA5736

Amount of Each Receipt this Period

10.00

 Memo Item
 ERMK: PATTY JUDGE FOR IOWA

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

Mailing Address 1301 FELL STREET #1

City	State	Zip Code
SAN FRANCISCO	CA	94117

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

Name of Employer	Occupation
LEADERSHIP FOR A CLEAN ECONOMY	DIRECTOR OF OPERATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **60.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		07		2016

Transaction ID : INCA5739

Amount of Each Receipt this Period

10.00

 Memo Item
 ERMK: KATIE MCGINTY FOR SENATE

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 30 OF 293
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. DANIELLE OLIVETO
 Full Name (Last, First, Middle Initial)
 Mailing Address 1301 FELL STREET #1
 City State Zip Code
 SAN FRANCISCO CA 94117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 LEADERSHIP FOR A CLEAN ECONOMY DIRECTOR OF OPERATIONS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 60.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 07 / 2016
Transaction ID : INCA5741
 Amount of Each Receipt this Period
 10.00
 Memo Item
 ERMK: DEBORAH ROSS FOR SENATE

B. DANIELLE OLIVETO
 Full Name (Last, First, Middle Initial)
 Mailing Address 1301 FELL STREET #1
 City State Zip Code
 SAN FRANCISCO CA 94117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 LEADERSHIP FOR A CLEAN ECONOMY DIRECTOR OF OPERATIONS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 60.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 07 / 2016
Transaction ID : INCA5740
 Amount of Each Receipt this Period
 10.00
 Memo Item
 ERMK: MAGGIE FOR NH

C. DANIELLE OLIVETO
 Full Name (Last, First, Middle Initial)
 Mailing Address 1301 FELL STREET #1
 City State Zip Code
 SAN FRANCISCO CA 94117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 LEADERSHIP FOR A CLEAN ECONOMY DIRECTOR OF OPERATIONS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 60.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 07 / 2016
Transaction ID : INCA5742
 Amount of Each Receipt this Period
 10.00
 Memo Item
 ERMK: PATTY JUDGE FOR IOWA

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00
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 31 OF 293
	<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. DANIELLE OLIVETO
 Full Name (Last, First, Middle Initial)
 Mailing Address 1301 FELL STREET #1
 City SAN FRANCISCO State CA Zip Code 94117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LEADERSHIP FOR A CLEAN ECONOMY Occupation DIRECTOR OF OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 60.00

Date of Receipt 07 / 07 / 2016
Transaction ID : INCA5737
 Amount of Each Receipt this Period 10.00
 Memo Item
 ERMK: KIRKPATRICK FOR SENATE

B. DANIELLE OLIVETO
 Full Name (Last, First, Middle Initial)
 Mailing Address 1301 FELL STREET #1
 City SAN FRANCISCO State CA Zip Code 94117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LEADERSHIP FOR A CLEAN ECONOMY Occupation DIRECTOR OF OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 60.00

Date of Receipt 07 / 07 / 2016
Transaction ID : INCA5738
 Amount of Each Receipt this Period 10.00
 Memo Item
 ERMK: TAMMY FOR ILLINOIS

C. LAURA POWELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 1121 MASONIC AVENUE, APT B
 City SAN FRANCISCO State CA Zip Code 94117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KREUZBERGER ASSOCIATES Occupation RECRUITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 07 / 2016
Transaction ID : INCA5743
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ERMK: KIRKPATRICK FOR SENATE

SUBTOTAL of Receipts This Page (optional).....	1020.00
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 32 OF 293
	<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. DOROTHY STRACHER
Full Name (Last, First, Middle Initial)

Mailing Address 49 EAST 86TH STREET, APT 17B

City NY	State NY	Zip Code 10028
------------	-------------	-------------------

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 ▼
30.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 09 / 2016

Transaction ID : INCA5722

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: MAGGIE FOR NH

B. DOROTHY STRACHER
Full Name (Last, First, Middle Initial)

Mailing Address 49 EAST 86TH STREET, APT 17B

City NY	State NY	Zip Code 10028
------------	-------------	-------------------

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 ▼
30.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 09 / 2016

Transaction ID : INCA5724

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: PATTY JUDGE FOR IOWA

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

Mailing Address 49 EAST 86TH STREET, APT 17B

City NY	State NY	Zip Code 10028
------------	-------------	-------------------

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 ▼
30.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 09 / 2016

Transaction ID : INCA5723

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: DEBORAH ROSS FOR SENATE

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 33 OF 293
	<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. DOROTHY STRACHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 49 EAST 86TH STREET, APT 17B
 City NY State NY Zip Code 10028
 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 ▼ 30.00

Date of Receipt
 07 / 09 / 2016
Transaction ID : INCA5721
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: KATIE MCGINTY FOR SENATE

B. DOROTHY STRACHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 49 EAST 86TH STREET, APT 17B
 City NY State NY Zip Code 10028
 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 ▼ 30.00

Date of Receipt
 07 / 09 / 2016
Transaction ID : INCA5720
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: TAMMY FOR ILLINOIS

C. DOROTHY STRACHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 49 EAST 86TH STREET, APT 17B
 City NY State NY Zip Code 10028
 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 ▼ 30.00

Date of Receipt
 07 / 09 / 2016
Transaction ID : INCA5719
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: KIRKPATRICK FOR SENATE

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 34 OF 293
	<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. LISA DIAZ NASH
Full Name (Last, First, Middle Initial)
Mailing Address 25 SEKI COURT

City EMERALD HILLS	State CA	Zip Code 94062
FEC ID number of contributing federal political committee. C		
Name of Employer ENTREPRENEURS FOR HILLARY	Occupation CO-FOUNDER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3010.00	

Date of Receipt
07 / 10 / 2016
Transaction ID : INCA5718

Amount of Each Receipt this Period
5.00

Memo Item

B. LISA DIAZ NASH
Full Name (Last, First, Middle Initial)
Mailing Address 25 SEKI COURT

City EMERALD HILLS	State CA	Zip Code 94062
FEC ID number of contributing federal political committee. C		
Name of Employer ENTREPRENEURS FOR HILLARY	Occupation CO-FOUNDER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3010.00	

Date of Receipt
07 / 10 / 2016
Transaction ID : INCA5717

Amount of Each Receipt this Period
1000.00

Memo Item
ERMK: KIRKPATRICK FOR SENATE

C. BARBARA GRASSESCHI
Full Name (Last, First, Middle Initial)
Mailing Address 1083 VINE ST MB249

City HEALDSBURG	State CA	Zip Code 95448
FEC ID number of contributing federal political committee. C		
Name of Employer PUMA SPRINGS VINEYARDS	Occupation FARMER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Date of Receipt
07 / 11 / 2016
Transaction ID : INCA5710

Amount of Each Receipt this Period
1000.00

Memo Item
ERMK: DEBORAH ROSS 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 35 OF 293
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. JACKIE WHISMAN
Full Name (Last, First, Middle Initial)

Mailing Address 1636 MASSACHUSETTS AVE SE

City	State	Zip Code
WASHINGTON	DC	20003

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

Name of Employer	Occupation
ITIF	DIRECTOR OF DEVELOPMENT AND OUTRE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		11		2016

Transaction ID : INCA5711

Amount of Each Receipt this Period
75.00

Memo Item
ERMK: DELBENE FOR CONGRESS

B. JACKIE WHISMAN
Full Name (Last, First, Middle Initial)

Mailing Address 1636 MASSACHUSETTS AVE SE

City	State	Zip Code
WASHINGTON	DC	20003

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

Name of Employer	Occupation
ITIF	DIRECTOR OF DEVELOPMENT AND OUTRE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		11		2016

Transaction ID : INCA5713

Amount of Each Receipt this Period
50.00

Memo Item
ERMK: SUSAN DAVIS FOR CONGRESS

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

Mailing Address 1636 MASSACHUSETTS AVE SE

City	State	Zip Code
WASHINGTON	DC	20003

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

Name of Employer	Occupation
ITIF	DIRECTOR OF DEVELOPMENT AND OUTRE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		11		2016

Transaction ID : INCA5714

Amount of Each Receipt this Period
25.00

Memo Item
ERMK: ANNA ESHOO FOR CONGRESS

SUBTOTAL of Receipts This Page (optional).....	150.00
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 36 OF 293
	<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. JACKIE WHISMAN
Full Name (Last, First, Middle Initial)

Mailing Address 1636 MASSACHUSETTS AVE SE

City WASHINGTON	State DC	Zip Code 20003
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FEC ID number of contributing federal political committee. **C**

Name of Employer ITIF	Occupation DIRECTOR OF DEVELOPMENT AND OUTRE
--------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 11 / 2016

Transaction ID : INCA5716

Amount of Each Receipt this Period
25.00

Memo Item

B. JACKIE WHISMAN
Full Name (Last, First, Middle Initial)

Mailing Address 1636 MASSACHUSETTS AVE SE

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

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

Name of Employer ITIF	Occupation DIRECTOR OF DEVELOPMENT AND OUTRE
--------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 11 / 2016

Transaction ID : INCA5712

Amount of Each Receipt this Period
25.00

Memo Item
ERMK: KYRSTEN SINEMA FOR CONGRESS

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

Mailing Address 1636 MASSACHUSETTS AVE SE

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

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

Name of Employer ITIF	Occupation DIRECTOR OF DEVELOPMENT AND OUTRE
--------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 11 / 2016

Transaction ID : INCA5715

Amount of Each Receipt this Period
50.00

Memo Item
ERMK: CAIN FOR CONGRESS

SUBTOTAL of Receipts This Page (optional).....	100.00
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 37 OF 293
<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. SUSAN HERNER
Full Name (Last, First, Middle Initial)

Mailing Address 10 UPPER SHAD RD

City POUND RIDGE State NY Zip Code 10576

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 ▼ 25.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 13 / 2016

Transaction ID : INCA5702

Amount of Each Receipt this Period
 5.00

Memo Item

B. SUSAN HERNER
Full Name (Last, First, Middle Initial)

Mailing Address 10 UPPER SHAD RD

City POUND RIDGE State NY Zip Code 10576

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 ▼ 25.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 13 / 2016

Transaction ID : INCA5701

Amount of Each Receipt this Period
 5.00

Memo Item
 ERMK: TADDEO FOR CONGRESS

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

Mailing Address 10 UPPER SHAD RD

City POUND RIDGE State NY Zip Code 10576

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 ▼ 25.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 13 / 2016

Transaction ID : INCA5700

Amount of Each Receipt this Period
 5.00

Memo Item
 ERMK: VAL DEMINGS 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 38 OF 293
<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. SUSAN HERNER
Full Name (Last, First, Middle Initial)

Mailing Address 10 UPPER SHAD RD

City POUND RIDGE State NY Zip Code 10576

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 ▼ 25.00

Date of Receipt 07 / 13 / 2016
Transaction ID : INCA5699

Amount of Each Receipt this Period 5.00

Memo Item
ERMK: SUSANNAH RANDOLPH FOR CONGRESS

B. SUSAN HERNER
Full Name (Last, First, Middle Initial)

Mailing Address 10 UPPER SHAD RD

City POUND RIDGE State NY Zip Code 10576

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 ▼ 25.00

Date of Receipt 07 / 13 / 2016
Transaction ID : INCA5698

Amount of Each Receipt this Period 5.00

Memo Item
ERMK: PRAMILA 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 ▼ 195.00

Date of Receipt 07 / 13 / 2016
Transaction ID : INCA5708

Amount of Each Receipt this Period 5.00

Memo Item
ERMK: TADDEO 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 39 OF 293
	<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 ▼
195.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	13	/	2016

Transaction ID : INCA5707

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: MONICA VERNON FOR CONGRESS

B. LOIS TOEVS
Full Name (Last, First, Middle Initial)
Mailing Address 68-3549 AWAMOA PLACE

City WAIKOLOA	State HI	Zip Code 96738
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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 ▼
195.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	13	/	2016

Transaction ID : INCA5703

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: CARROLL FOR COLORADO

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 ▼
195.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	13	/	2016

Transaction ID : INCA5704

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: VAL DEMINGS 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 40 OF 293
	<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 ▼
195.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2016

Transaction ID : INCA5705

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: CAIN 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 ▼
195.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2016

Transaction ID : INCA5709

Amount of Each Receipt this Period
5.00

Memo Item

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 ▼
195.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2016

Transaction ID : INCA5706

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 41 OF 293
	<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. TERI VERSHEL
Full Name (Last, First, Middle Initial)

Mailing Address 381 GUINDA STREET

City PALO ALTO State CA Zip Code 94301

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

Name of Employer SELF-EMPLOYED, SAME NAME Occupation PHOTOGRAPHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 13 / 2016

Transaction ID : INCA5694

Amount of Each Receipt this Period 62.50

Memo Item

ERMK: PRAMILA FOR CONGRESS

B. TERI VERSHEL
Full Name (Last, First, Middle Initial)

Mailing Address 381 GUINDA STREET

City PALO ALTO State CA Zip Code 94301

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

Name of Employer SELF-EMPLOYED, SAME NAME Occupation PHOTOGRAPHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 13 / 2016

Transaction ID : INCA5696

Amount of Each Receipt this Period 62.50

Memo Item

ERMK: VAL DEMINGS FOR CONGRESS

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

Mailing Address 381 GUINDA STREET

City PALO ALTO State CA Zip Code 94301

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

Name of Employer SELF-EMPLOYED, SAME NAME Occupation PHOTOGRAPHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 13 / 2016

Transaction ID : INCA5697

Amount of Each Receipt this Period 62.50

Memo Item

ERMK: TADDEO FOR CONGRESS

SUBTOTAL of Receipts This Page (optional)..... ▶ 187.50

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 42 OF 293
<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

Full Name (Last, First, Middle Initial)
A. TERI VERSHEL

Mailing Address **381 GUINDA STREET**

City **PALO ALTO** State **CA** Zip Code **94301**

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

Name of Employer **SELF-EMPLOYED, SAME NAME** Occupation **PHOTOGRAPHER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **07 / 13 / 2016**

Transaction ID : INCA5695

Amount of Each Receipt this Period **62.50**

Memo Item
ERMK: SUSANNAH RANDOLPH FOR CONGRESS

Full Name (Last, First, Middle Initial)
B. STACY MASON

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 **WOMENCOUNT** Occupation **EXECUTIVE DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **9740.00**

Date of Receipt **07 / 14 / 2016**

Transaction ID : INCA5530

Amount of Each Receipt this Period **5000.00**

Memo Item

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

Mailing Address **26101 EUCALYPTUS LANE**

City **LOS ALTOS** State **CA** Zip Code **94022**

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

Name of Employer **NONE** Occupation **STUDENT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **10.00**

Date of Receipt **07 / 14 / 2016**

Transaction ID : INCA5689

Amount of Each Receipt this Period **10.00**

Memo Item
ERMK: HILLARY FOR AMERICA

SUBTOTAL of Receipts This Page (optional).....	5072.50
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 43 OF 293
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. LAURE WOODS
Full Name (Last, First, Middle Initial)

Mailing Address 1240 WESTRIDGE DRIVE

City PORTOLA VALLEY State CA Zip Code 94028

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 ▼
10800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2016

Transaction ID : INCA5692

Amount of Each Receipt this Period
 2700.00

Memo Item
 ERMK: DEBORAH ROSS FOR SENATE

B. LAURE WOODS
Full Name (Last, First, Middle Initial)

Mailing Address 1240 WESTRIDGE DRIVE

City PORTOLA VALLEY State CA Zip Code 94028

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 ▼
10800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2016

Transaction ID : INCA5691

Amount of Each Receipt this Period
 2700.00

Memo Item
 ERMK: KATIE MCGINTY FOR SENATE

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

Mailing Address 1240 WESTRIDGE DRIVE

City PORTOLA VALLEY State CA Zip Code 94028

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 ▼
10800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2016

Transaction ID : INCA5693

Amount of Each Receipt this Period
 2700.00

Memo Item
 ERMK: KIRKPATRICK FOR SENATE

SUBTOTAL of Receipts This Page (optional).....	8100.00
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 44 OF 293
	<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

Full Name (Last, First, Middle Initial)
A. LAURE WOODS

Mailing Address 1240 WESTRIDGE DRIVE

City	State	Zip Code
PORTOLA VALLEY	CA	94028

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

Name of Employer	Occupation
NONE	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2016

Transaction ID : INCA5690

Amount of Each Receipt this Period
 2700.00

Memo Item
 ERMK: CATHERINE CORTEZ MASTO FOR SENATE

Full Name (Last, First, Middle Initial)
B. MARTHA EHMANN CONTE

Mailing Address 3501 CLAY STREET

City	State	Zip Code
SAN FRANCISCO	CA	94118

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

Name of Employer	Occupation
SELF-EMPLOYED, SAME NAME	CIVIC LEADER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 18 / 2016

Transaction ID : INCA5688

Amount of Each Receipt this Period
 1000.00

Memo Item
 ERMK: KIRKPATRICK FOR SENATE

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

Mailing Address 1950 TASSO STREET

City	State	Zip Code
PALO ALTO	CA	94301

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

Name of Employer	Occupation
SELF-EMPLOYED, SAME NAME	PHOTOGRAPHER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
180.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 20 / 2016

Transaction ID : INCA5663

Amount of Each Receipt this Period
 25.00

Memo Item
 ERMK: KIRKPATRICK FOR SENATE

SUBTOTAL of Receipts This Page (optional).....	3725.00
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 45 OF 293
	<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. ANNE BARRY
 Full Name (Last, First, Middle Initial)
 Mailing Address 1950 TASSO STREET
 City PALO ALTO State CA Zip Code 94301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED, SAME NAME Occupation PHOTOGRAPHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 180.00

Date of Receipt 07 / 20 / 2016
Transaction ID : INCA5662
 Amount of Each Receipt this Period 25.00
 Memo Item
 ERMK: PATTY JUDGE FOR IOWA

B. ANNE BARRY
 Full Name (Last, First, Middle Initial)
 Mailing Address 1950 TASSO STREET
 City PALO ALTO State CA Zip Code 94301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED, SAME NAME Occupation PHOTOGRAPHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 180.00

Date of Receipt 07 / 20 / 2016
Transaction ID : INCA5661
 Amount of Each Receipt this Period 25.00
 Memo Item
 ERMK: MAGGIE FOR NH

C. ANNE BARRY
 Full Name (Last, First, Middle Initial)
 Mailing Address 1950 TASSO STREET
 City PALO ALTO State CA Zip Code 94301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED, SAME NAME Occupation PHOTOGRAPHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 180.00

Date of Receipt 07 / 20 / 2016
Transaction ID : INCA5664
 Amount of Each Receipt this Period 25.00
 Memo Item
 ERMK: KATIE MCGINTY FOR SENATE

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
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 46 OF 293
	<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

Full Name (Last, First, Middle Initial)
A. ANNE BARRY

Mailing Address 1950 TASSO STREET

City PALO ALTO	State CA	Zip Code 94301
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
180.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 20 / 2016

Transaction ID : INCA5660

Amount of Each Receipt this Period
25.00

Memo Item
ERMK: TAMMY FOR ILLINOIS

Full Name (Last, First, Middle Initial)
B. ANNE BARRY

Mailing Address 1950 TASSO STREET

City PALO ALTO	State CA	Zip Code 94301
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
180.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 20 / 2016

Transaction ID : INCA5665

Amount of Each Receipt this Period
25.00

Memo Item
ERMK: DEBORAH ROSS FOR SENATE

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

Mailing Address 320 RUTLEDGE STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

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

Name of Employer SELF-EMPLOYED, SAME NAME	Occupation PROPERTY MANAGER
--	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 20 / 2016

Transaction ID : INCA5666

Amount of Each Receipt this Period
1000.00

Memo Item
ERMK: KIRKPATRICK FOR SENATE

SUBTOTAL of Receipts This Page (optional).....	1050.00
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 47 OF 293
<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. THERESA PARIS
Full Name (Last, First, Middle Initial)
Mailing Address 512 F STREET

City PETALUMA	State CA	Zip Code 94952
------------------	-------------	-------------------

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 ▼
115.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	20	/	2016

Transaction ID : INCA5653

Amount of Each Receipt this Period

10.00

 Memo Item
 ERMK: TAMMY FOR ILLINOIS

B. THERESA PARIS
Full Name (Last, First, Middle Initial)
Mailing Address 512 F STREET

City PETALUMA	State CA	Zip Code 94952
------------------	-------------	-------------------

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 ▼
115.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	20	/	2016

Transaction ID : INCA5659

Amount of Each Receipt this Period

10.00

 Memo Item

C. THERESA PARIS
Full Name (Last, First, Middle Initial)
Mailing Address 512 F STREET

City PETALUMA	State CA	Zip Code 94952
------------------	-------------	-------------------

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 ▼
115.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	20	/	2016

Transaction ID : INCA5658

Amount of Each Receipt this Period

10.00

 Memo Item
 ERMK: DEBORAH ROSS FOR SENATE

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 48 OF 293
	<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	

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. THERESA PARIS
Full Name (Last, First, Middle Initial)

Mailing Address 512 F STREET

City State Zip Code
PETALUMA CA 94952

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

Name of Employer Occupation
NONE RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
115.00

Date of Receipt
07 / 20 / 2016
Transaction ID : INCA5657

Amount of Each Receipt this Period
10.00

Memo Item
ERMK: KATIE MCGINTY FOR SENATE

B. THERESA PARIS
Full Name (Last, First, Middle Initial)

Mailing Address 512 F STREET

City State Zip Code
PETALUMA CA 94952

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

Name of Employer Occupation
NONE RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
115.00

Date of Receipt
07 / 20 / 2016
Transaction ID : INCA5656

Amount of Each Receipt this Period
10.00

Memo Item
ERMK: KIRKPATRICK FOR SENATE

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

Mailing Address 512 F STREET

City State Zip Code
PETALUMA CA 94952

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

Name of Employer Occupation
NONE RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
115.00

Date of Receipt
07 / 20 / 2016
Transaction ID : INCA5654

Amount of Each Receipt this Period
10.00

Memo Item
ERMK: MAGGIE FOR NH

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00

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 49 OF 293
	<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. THERESA PARIS
Full Name (Last, First, Middle Initial)
Mailing Address 512 F STREET
City PETALUMA State CA Zip Code 94952
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 **115.00**

Date of Receipt **07 / 20 / 2016**
Transaction ID : INCA5655
Amount of Each Receipt this Period **10.00**
 Memo Item
ERMK: PATTY JUDGE FOR IOWA

B. THERESA RADER-WILSON
Full Name (Last, First, Middle Initial)
Mailing Address 8175 HENDERSON RIDGE DR
City MOORESVILLE State IN Zip Code 46158
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF EMPLOYED, SAME NAME Occupation PSYCHOLOGIST
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **420.00**

Date of Receipt **07 / 20 / 2016**
Transaction ID : INCA5671
Amount of Each Receipt this Period **20.00**
 Memo Item
ERMK: KATIE MCGINTY FOR SENATE

C. THERESA RADER-WILSON
Full Name (Last, First, Middle Initial)
Mailing Address 8175 HENDERSON RIDGE DR
City MOORESVILLE State IN Zip Code 46158
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF EMPLOYED, SAME NAME Occupation PSYCHOLOGIST
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **420.00**

Date of Receipt **07 / 20 / 2016**
Transaction ID : INCA5668
Amount of Each Receipt this Period **20.00**
 Memo Item
ERMK: MAGGIE FOR NH

SUBTOTAL of Receipts This Page (optional)..... **50.00**
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 50 OF 293
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. THERESA RADER-WILSON
Full Name (Last, First, Middle Initial)

Mailing Address 8175 HENDERSON RIDGE DR

City	State	Zip Code
MOORESVILLE	IN	46158

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

Name of Employer	Occupation
SELF EMPLOYED, SAME NAME	PSYCHOLOGIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : INCA5672

Amount of Each Receipt this Period

20.00

 Memo Item
 ERMK: DEBORAH ROSS FOR SENATE

B. THERESA RADER-WILSON
Full Name (Last, First, Middle Initial)

Mailing Address 8175 HENDERSON RIDGE DR

City	State	Zip Code
MOORESVILLE	IN	46158

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

Name of Employer	Occupation
SELF EMPLOYED, SAME NAME	PSYCHOLOGIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : INCA5669

Amount of Each Receipt this Period

20.00

 Memo Item
 ERMK: PATTY JUDGE FOR IOWA

C. THERESA RADER-WILSON
Full Name (Last, First, Middle Initial)

Mailing Address 8175 HENDERSON RIDGE DR

City	State	Zip Code
MOORESVILLE	IN	46158

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

Name of Employer	Occupation
SELF EMPLOYED, SAME NAME	PSYCHOLOGIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : INCA5670

Amount of Each Receipt this Period

20.00

 Memo Item
 ERMK: KIRKPATRICK FOR SENATE

SUBTOTAL of Receipts This Page (optional).....▶	60.00
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 51 OF 293
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. THERESA RADER-WILSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 8175 HENDERSON RIDGE DR
 City MOORESVILLE State IN Zip Code 46158
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED, SAME NAME Occupation PSYCHOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 07 / 20 / 2016
Transaction ID : INCA5673
 Amount of Each Receipt this Period 100.00
 Memo Item
 ERMK: HILLARY FOR AMERICA

B. THERESA RADER-WILSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 8175 HENDERSON RIDGE DR
 City MOORESVILLE State IN Zip Code 46158
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED, SAME NAME Occupation PSYCHOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 07 / 20 / 2016
Transaction ID : INCA5667
 Amount of Each Receipt this Period 20.00
 Memo Item
 ERMK: TAMMY FOR ILLINOIS

C. DALE SCHROEDEL
 Full Name (Last, First, Middle Initial)
 Mailing Address 320 RUTLEDGE STREET
 City SAN FRANCISCO State CA Zip Code 94110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED, SAME NAME Occupation POLITICAL ORGANIZER; PRIVATE INVESTIG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 07 / 20 / 2016
Transaction ID : INCA5687
 Amount of Each Receipt this Period 1000.00
 Memo Item
 ERMK: KIRKPATRICK FOR SENATE

SUBTOTAL of Receipts This Page (optional).....▶	1120.00
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 52 OF 293
<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. ALISSA WARNER
Full Name (Last, First, Middle Initial)
Mailing Address 113 DIANE DRIVE

City BROOMALL	State PA	Zip Code 19008
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 30.00	

Date of Receipt
07 / 20 / 2016
Transaction ID : INCA5679

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: DEBORAH ROSS FOR SENATE

B. ALISSA WARNER
Full Name (Last, First, Middle Initial)
Mailing Address 113 DIANE DRIVE

City BROOMALL	State PA	Zip Code 19008
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 30.00	

Date of Receipt
07 / 20 / 2016
Transaction ID : INCA5676

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: PATTY JUDGE FOR IOWA

C. ALISSA WARNER
Full Name (Last, First, Middle Initial)
Mailing Address 113 DIANE DRIVE

City BROOMALL	State PA	Zip Code 19008
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 30.00	

Date of Receipt
07 / 20 / 2016
Transaction ID : INCA5678

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: KATIE MCGINTY FOR SENATE

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: PAGE 53 OF 293
(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)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)
A. ALISSA WARNER

Mailing Address 113 DIANE DRIVE

City State Zip Code
BROOMALL PA 19008

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
30.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 20 / 2016

Transaction ID : INCA5675

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: MAGGIE FOR NH

Full Name (Last, First, Middle Initial)
B. ALISSA WARNER

Mailing Address 113 DIANE DRIVE

City State Zip Code
BROOMALL PA 19008

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
30.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 20 / 2016

Transaction ID : INCA5674

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: TAMMY FOR ILLINOIS

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

Mailing Address 113 DIANE DRIVE

City State Zip Code
BROOMALL PA 19008

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
30.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 20 / 2016

Transaction ID : INCA5677

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: KIRKPATRICK FOR SENATE

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 54 OF 293
	<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. MELANIE WYLER
Full Name (Last, First, Middle Initial)

Mailing Address 104 LYONS PLAIN ROAD

City WESTON State CT Zip Code 06883

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 ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016

Transaction ID : INCA5686

Amount of Each Receipt this Period
 17.84

Memo Item

B. MELANIE WYLER
Full Name (Last, First, Middle Initial)

Mailing Address 104 LYONS PLAIN ROAD

City WESTON State CT Zip Code 06883

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 ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016

Transaction ID : INCA5684

Amount of Each Receipt this Period
 17.86

Memo Item
 ERMK: KATIE MCGINTY FOR SENATE

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

Mailing Address 104 LYONS PLAIN ROAD

City WESTON State CT Zip Code 06883

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 ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016

Transaction ID : INCA5681

Amount of Each Receipt this Period
 17.86

Memo Item
 ERMK: MAGGIE FOR NH

SUBTOTAL of Receipts This Page (optional).....▶	53.56
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 55 OF 293
(check only one)

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

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. MELANIE WYLER

Mailing Address 104 LYONS PLAIN ROAD

City WESTON State CT Zip Code 06883

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 ▼
125.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 20 / 2016

Transaction ID : INCA5680

Amount of Each Receipt this Period
17.86

Memo Item
ERMK: TAMMY FOR ILLINOIS

Full Name (Last, First, Middle Initial)
B. MELANIE WYLER

Mailing Address 104 LYONS PLAIN ROAD

City WESTON State CT Zip Code 06883

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 ▼
125.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 20 / 2016

Transaction ID : INCA5683

Amount of Each Receipt this Period
17.86

Memo Item
ERMK: KIRKPATRICK FOR SENATE

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

Mailing Address 104 LYONS PLAIN ROAD

City WESTON State CT Zip Code 06883

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 ▼
125.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 20 / 2016

Transaction ID : INCA5685

Amount of Each Receipt this Period
17.86

Memo Item
ERMK: DEBORAH ROSS FOR SENATE

SUBTOTAL of Receipts This Page (optional)..... ▶ 53.58

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 56 OF 293
	<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. MELANIE WYLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 104 LYONS PLAIN ROAD
 City WESTON State CT Zip Code 06883
 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 ▼ 125.00

Date of Receipt 07 / 20 / 2016
Transaction ID : INCA5682
 Amount of Each Receipt this Period 17.86
 Memo Item
 ERMK: PATTY JUDGE FOR IOWA

B. LYNETTE POIRIER
 Full Name (Last, First, Middle Initial)
 Mailing Address 308 N ELMWOOD AVE
 City OAK PARK State IL Zip Code 60302
 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 ▼ 60.00

Date of Receipt 07 / 21 / 2016
Transaction ID : INCA5652
 Amount of Each Receipt this Period 10.00
 Memo Item
 ERMK: DEBORAH ROSS FOR SENATE

C. LYNETTE POIRIER
 Full Name (Last, First, Middle Initial)
 Mailing Address 308 N ELMWOOD AVE
 City OAK PARK State IL Zip Code 60302
 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 ▼ 60.00

Date of Receipt 07 / 21 / 2016
Transaction ID : INCA5647
 Amount of Each Receipt this Period 10.00
 Memo Item
 ERMK: TAMMY FOR ILLINOIS

SUBTOTAL of Receipts This Page (optional).....▶	37.86
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57 OF 293 (check only one)
<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. LYNETTE POIRIER
Full Name (Last, First, Middle Initial)

Mailing Address 308 N ELMWOOD AVE

City OAK PARK State IL Zip Code 60302

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 ▼ 60.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 21 / 2016

Transaction ID : INCA5649

Amount of Each Receipt this Period
 10.00

Memo Item
 ERMK: PATTY JUDGE FOR IOWA

B. LYNETTE POIRIER
Full Name (Last, First, Middle Initial)

Mailing Address 308 N ELMWOOD AVE

City OAK PARK State IL Zip Code 60302

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 ▼ 60.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 21 / 2016

Transaction ID : INCA5648

Amount of Each Receipt this Period
 10.00

Memo Item
 ERMK: MAGGIE FOR NH

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

Mailing Address 308 N ELMWOOD AVE

City OAK PARK State IL Zip Code 60302

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 ▼ 60.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 21 / 2016

Transaction ID : INCA5651

Amount of Each Receipt this Period
 10.00

Memo Item
 ERMK: KATIE MCGINTY FOR SENATE

SUBTOTAL of Receipts This Page (optional).....	30.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 58 OF 293
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. LYNETTE POIRIER
Full Name (Last, First, Middle Initial)

Mailing Address 308 N ELMWOOD AVE

City OAK PARK State IL Zip Code 60302

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 ▼ 60.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 21 / 2016

Transaction ID : INCA5650

Amount of Each Receipt this Period
 10.00

Memo Item
 ERMK: KIRKPATRICK FOR SENATE

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 ▼ 195.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 22 / 2016

Transaction ID : INCA5642

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 ▼ 195.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 22 / 2016

Transaction ID : INCA5643

Amount of Each Receipt this Period
 5.00

Memo Item
 ERMK: CAROL SHEA-PORTER FOR CONGRESS

SUBTOTAL of Receipts This Page (optional).....	20.00
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 59 OF 293
<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 ▼
195.00

Date of Receipt
07 / 22 / 2016
Transaction ID : INCA5644

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: MONICA VERNON 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 ▼
195.00

Date of Receipt
07 / 22 / 2016
Transaction ID : INCA5640

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: CARROLL FOR COLORADO

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 ▼
195.00

Date of Receipt
07 / 22 / 2016
Transaction ID : INCA5645

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: TADDEO 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 60 OF 293
	<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 ▼ 195.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 22 / 2016

Transaction ID : INCA5646

Amount of Each Receipt this Period
 5.00

Memo Item

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 ▼ 195.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 22 / 2016

Transaction ID : INCA5641

Amount of Each Receipt this Period
 5.00

Memo Item
 ERMK: VAL DEMINGS FOR CONGRESS

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

Mailing Address PO BOX 370213

City MONTARA State CA Zip Code 94037

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

Name of Employer OLIVE GROVE CONSULTING Occupation DIRECTOR OF OPERATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 432.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2016

Transaction ID : INCA5637

Amount of Each Receipt this Period
 54.00

Memo Item
 ERMK: PATTY JUDGE FOR IOWA

SUBTOTAL of Receipts This Page (optional)..... ▶ 64.00

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 61 OF 293
	<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. MARILYN WACKS
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 370213

City	State	Zip Code
MONTARA	CA	94037

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

Name of Employer	Occupation
OLIVE GROVE CONSULTING	DIRECTOR OF OPERATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
432.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2016

Transaction ID : INCA5633

Amount of Each Receipt this Period
 54.00

Memo Item
 ERMK: TAMMY FOR ILLINOIS

B. MARILYN WACKS
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 370213

City	State	Zip Code
MONTARA	CA	94037

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

Name of Employer	Occupation
OLIVE GROVE CONSULTING	DIRECTOR OF OPERATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
432.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2016

Transaction ID : INCA5632

Amount of Each Receipt this Period
 54.00

Memo Item
 ERMK: KIRKPATRICK FOR SENATE

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

Mailing Address PO BOX 370213

City	State	Zip Code
MONTARA	CA	94037

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

Name of Employer	Occupation
OLIVE GROVE CONSULTING	DIRECTOR OF OPERATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
432.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2016

Transaction ID : INCA5636

Amount of Each Receipt this Period
 54.00

Memo Item
 ERMK: DEBORAH ROSS FOR SENATE

SUBTOTAL of Receipts This Page (optional).....	162.00
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 62 OF 293
	<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. MARILYN WACKS
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 370213

City MONTARA State CA Zip Code 94037

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

Name of Employer OLIVE GROVE CONSULTING Occupation DIRECTOR OF OPERATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 432.00

Date of Receipt 07 / 23 / 2016

Transaction ID : INCA5634

Amount of Each Receipt this Period 54.00

Memo Item
ERMK: KATIE MCGINTY FOR SENATE

B. MARILYN WACKS
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 370213

City MONTARA State CA Zip Code 94037

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

Name of Employer OLIVE GROVE CONSULTING Occupation DIRECTOR OF OPERATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 432.00

Date of Receipt 07 / 23 / 2016

Transaction ID : INCA5635

Amount of Each Receipt this Period 54.00

Memo Item
ERMK: MAGGIE FOR NH

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

Mailing Address PO BOX 370213

City MONTARA State CA Zip Code 94037

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

Name of Employer OLIVE GROVE CONSULTING Occupation DIRECTOR OF OPERATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 432.00

Date of Receipt 07 / 23 / 2016

Transaction ID : INCA5639

Amount of Each Receipt this Period 54.00

Memo Item
ERMK: HILLARY FOR AMERICA

SUBTOTAL of Receipts This Page (optional).....▶	162.00
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 63 OF 293
	<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

Full Name (Last, First, Middle Initial)
A. MARILYN WACKS

Mailing Address **PO BOX 370213**

City MONTARA	State CA	Zip Code 94037
------------------------	--------------------	--------------------------

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

Name of Employer OLIVE GROVE CONSULTING	Occupation DIRECTOR OF OPERATIONS
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **432.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07	/	23	/	2016

Transaction ID : INCA5638

Amount of Each Receipt this Period

54.00

 Memo Item

Full Name (Last, First, Middle Initial)
B. DEBORAH WEXLER

Mailing Address **1078 FOREST AVE**

City PALO ALTO	State CA	Zip Code 94301
--------------------------	--------------------	--------------------------

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

Name of Employer NONE	Occupation HOMEMAKER
---------------------------------	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07	/	26	/	2016

Transaction ID : INCA5625

Amount of Each Receipt this Period

100.00

 Memo Item
ERMK: TAMMY FOR ILLINOIS

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

Mailing Address **1078 FOREST AVE**

City PALO ALTO	State CA	Zip Code 94301
--------------------------	--------------------	--------------------------

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

Name of Employer NONE	Occupation HOMEMAKER
---------------------------------	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07	/	26	/	2016

Transaction ID : INCA5626

Amount of Each Receipt this Period

100.00

 Memo Item
ERMK: MAGGIE FOR NH

SUBTOTAL of Receipts This Page (optional).....	254.00
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 64 OF 293
	<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. DEBORAH WEXLER
Full Name (Last, First, Middle Initial)
Mailing Address 1078 FOREST AVE

City PALO ALTO	State CA	Zip Code 94301
-------------------	-------------	-------------------

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

Name of Employer NONE	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 26 / 2016

Transaction ID : INCA5630

Amount of Each Receipt this Period
100.00

Memo Item
ERMK: DEBORAH ROSS FOR SENATE

B. DEBORAH WEXLER
Full Name (Last, First, Middle Initial)
Mailing Address 1078 FOREST AVE

City PALO ALTO	State CA	Zip Code 94301
-------------------	-------------	-------------------

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

Name of Employer NONE	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 26 / 2016

Transaction ID : INCA5627

Amount of Each Receipt this Period
100.00

Memo Item
ERMK: PATTY JUDGE FOR IOWA

C. DEBORAH WEXLER
Full Name (Last, First, Middle Initial)
Mailing Address 1078 FOREST AVE

City PALO ALTO	State CA	Zip Code 94301
-------------------	-------------	-------------------

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

Name of Employer NONE	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 26 / 2016

Transaction ID : INCA5629

Amount of Each Receipt this Period
100.00

Memo Item
ERMK: KATIE MCGINTY FOR SENATE

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 65 OF 293
	<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. DEBORAH WEXLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1078 FOREST AVE
 City PALO ALTO State CA Zip Code 94301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : INCA5628
 Amount of Each Receipt this Period
 100.00
 Memo Item
 ERMK: KIRKPATRICK FOR SENATE

B. DEBORAH WEXLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1078 FOREST AVE
 City PALO ALTO State CA Zip Code 94301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : INCA5631
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. RACHELLE ANNECHINO
 Full Name (Last, First, Middle Initial)
 Mailing Address 641 18TH ST. #3
 City OAKLAND State CA Zip Code 94612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PRC Occupation RESEARCH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : INCA5578
 Amount of Each Receipt this Period
 15.00
 Memo Item
 ERMK: TAMMY FOR ILLINOIS

SUBTOTAL of Receipts This Page (optional).....▶	215.00
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 66 OF 293
	<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. RACHELLE ANNECHINO
Full Name (Last, First, Middle Initial)
Mailing Address 641 18TH ST. #3

City OAKLAND	State CA	Zip Code 94612
FEC ID number of contributing federal political committee. C		
Name of Employer PRC	Occupation RESEARCH	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 120.00	

Date of Receipt
07 / 29 / 2016
Transaction ID : INCA5585

Amount of Each Receipt this Period
15.00

Memo Item

B. RACHELLE ANNECHINO
Full Name (Last, First, Middle Initial)
Mailing Address 641 18TH ST. #3

City OAKLAND	State CA	Zip Code 94612
FEC ID number of contributing federal political committee. C		
Name of Employer PRC	Occupation RESEARCH	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 120.00	

Date of Receipt
07 / 29 / 2016
Transaction ID : INCA5584

Amount of Each Receipt this Period
15.00

Memo Item
ERMK: HILLARY FOR AMERICA

C. RACHELLE ANNECHINO
Full Name (Last, First, Middle Initial)
Mailing Address 641 18TH ST. #3

City OAKLAND	State CA	Zip Code 94612
FEC ID number of contributing federal political committee. C		
Name of Employer PRC	Occupation RESEARCH	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 120.00	

Date of Receipt
07 / 29 / 2016
Transaction ID : INCA5582

Amount of Each Receipt this Period
15.00

Memo Item
ERMK: KATIE MCGINTY FOR SENATE

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 67 OF 293
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. RACHELLE ANNECHINO
 Full Name (Last, First, Middle Initial)
 Mailing Address 641 18TH ST. #3
 City OAKLAND State CA Zip Code 94612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PRC Occupation RESEARCH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt 07 / 29 / 2016
Transaction ID : INCA5583
 Amount of Each Receipt this Period 15.00
 Memo Item
 ERMK: DEBORAH ROSS FOR SENATE

B. RACHELLE ANNECHINO
 Full Name (Last, First, Middle Initial)
 Mailing Address 641 18TH ST. #3
 City OAKLAND State CA Zip Code 94612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PRC Occupation RESEARCH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt 07 / 29 / 2016
Transaction ID : INCA5580
 Amount of Each Receipt this Period 15.00
 Memo Item
 ERMK: PATTY JUDGE FOR IOWA

C. RACHELLE ANNECHINO
 Full Name (Last, First, Middle Initial)
 Mailing Address 641 18TH ST. #3
 City OAKLAND State CA Zip Code 94612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PRC Occupation RESEARCH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt 07 / 29 / 2016
Transaction ID : INCA5579
 Amount of Each Receipt this Period 15.00
 Memo Item
 ERMK: MAGGIE FOR NH

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00
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 68 OF 293
	<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. RACHELLE ANNECHINO
 Full Name (Last, First, Middle Initial)
 Mailing Address 641 18TH ST. #3
 City OAKLAND State CA Zip Code 94612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PRC Occupation RESEARCH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt 07 / 29 / 2016
Transaction ID : INCA5581
 Amount of Each Receipt this Period 15.00
 Memo Item
 ERMK: KIRKPATRICK FOR SENATE

B. BEN BRUNNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 304 S. DELAWARE AVE.
 City MANHATTAN State KS Zip Code 66502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ENVIRONMENTAL MFG. INC. Occupation MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 175.00

Date of Receipt 07 / 29 / 2016
Transaction ID : INCA5542
 Amount of Each Receipt this Period 25.00
 Memo Item
 ERMK: MAGGIE FOR NH

C. BEN BRUNNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 304 S. DELAWARE AVE.
 City MANHATTAN State KS Zip Code 66502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ENVIRONMENTAL MFG. INC. Occupation MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 175.00

Date of Receipt 07 / 29 / 2016
Transaction ID : INCA5541
 Amount of Each Receipt this Period 25.00
 Memo Item
 ERMK: KATIE MCGINTY FOR SENATE

SUBTOTAL of Receipts This Page (optional).....▶	65.00
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 69 OF 293
	<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. BEN BRUNNER
Full Name (Last, First, Middle Initial)

Mailing Address 304 S. DELAWARE AVE.

City MANHATTAN	State KS	Zip Code 66502
-------------------	-------------	-------------------

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

Name of Employer ENVIRONMENTAL MFG. INC.	Occupation MANAGEMENT
---	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
175.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : INCA5544

Amount of Each Receipt this Period
25.00

Memo Item
ERMK: PATTY JUDGE FOR IOWA

B. BEN BRUNNER
Full Name (Last, First, Middle Initial)

Mailing Address 304 S. DELAWARE AVE.

City MANHATTAN	State KS	Zip Code 66502
-------------------	-------------	-------------------

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

Name of Employer ENVIRONMENTAL MFG. INC.	Occupation MANAGEMENT
---	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
175.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : INCA5540

Amount of Each Receipt this Period
25.00

Memo Item
ERMK: TAMMY FOR ILLINOIS

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

Mailing Address 304 S. DELAWARE AVE.

City MANHATTAN	State KS	Zip Code 66502
-------------------	-------------	-------------------

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

Name of Employer ENVIRONMENTAL MFG. INC.	Occupation MANAGEMENT
---	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
175.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : INCA5539

Amount of Each Receipt this Period
25.00

Memo Item
ERMK: KIRKPATRICK FOR SENATE

SUBTOTAL of Receipts This Page (optional).....	75.00
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 70 OF 293
	<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. BEN BRUNNER
Full Name (Last, First, Middle Initial)

Mailing Address 304 S. DELAWARE AVE.

City MANHATTAN	State KS	Zip Code 66502
-------------------	-------------	-------------------

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

Name of Employer ENVIRONMENTAL MFG. INC.	Occupation MANAGEMENT
---	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
175.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2016

Transaction ID : INCA5545

Amount of Each Receipt this Period

25.00

 Memo Item

B. BEN BRUNNER
Full Name (Last, First, Middle Initial)

Mailing Address 304 S. DELAWARE AVE.

City MANHATTAN	State KS	Zip Code 66502
-------------------	-------------	-------------------

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

Name of Employer ENVIRONMENTAL MFG. INC.	Occupation MANAGEMENT
---	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
175.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2016

Transaction ID : INCA5543

Amount of Each Receipt this Period

25.00

 Memo Item
 ERMK: DEBORAH ROSS FOR SENATE

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

Mailing Address 1301 FELL ST. APT #1

City SAN FRANCISCO	State CA	Zip Code 94117
-----------------------	-------------	-------------------

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

Name of Employer TULCHIN RESEARCH	Occupation ANALYST
--------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
60.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2016

Transaction ID : INCA5562

Amount of Each Receipt this Period

10.00

 Memo Item
 ERMK: KATIE MCGINTY FOR SENATE

SUBTOTAL of Receipts This Page (optional).....▶	60.00
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 71 OF 293
	<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. KIEL BRUNNER
Full Name (Last, First, Middle Initial)

Mailing Address 1301 FELL ST. APT #1

City SAN FRANCISCO	State CA	Zip Code 94117
-----------------------	-------------	-------------------

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

Name of Employer TULCHIN RESEARCH	Occupation ANALYST
--------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
60.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2016

Transaction ID : INCA5560

Amount of Each Receipt this Period
10.00

Memo Item
ERMK: KIRKPATRICK FOR SENATE

B. KIEL BRUNNER
Full Name (Last, First, Middle Initial)

Mailing Address 1301 FELL ST. APT #1

City SAN FRANCISCO	State CA	Zip Code 94117
-----------------------	-------------	-------------------

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

Name of Employer TULCHIN RESEARCH	Occupation ANALYST
--------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
60.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2016

Transaction ID : INCA5564

Amount of Each Receipt this Period
10.00

Memo Item
ERMK: DEBORAH ROSS FOR SENATE

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

Mailing Address 1301 FELL ST. APT #1

City SAN FRANCISCO	State CA	Zip Code 94117
-----------------------	-------------	-------------------

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

Name of Employer TULCHIN RESEARCH	Occupation ANALYST
--------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
60.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2016

Transaction ID : INCA5563

Amount of Each Receipt this Period
10.00

Memo Item
ERMK: MAGGIE FOR NH

SUBTOTAL of Receipts This Page (optional).....	30.00
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 72 OF 293
	<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. KIEL BRUNNER
Full Name (Last, First, Middle Initial)

Mailing Address 1301 FELL ST. APT #1

City SAN FRANCISCO State CA Zip Code 94117

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

Name of Employer TULCHIN RESEARCH Occupation ANALYST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 60.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : INCA5561

Amount of Each Receipt this Period
 10.00

Memo Item
 ERMK: TAMMY FOR ILLINOIS

B. KIEL BRUNNER
Full Name (Last, First, Middle Initial)

Mailing Address 1301 FELL ST. APT #1

City SAN FRANCISCO State CA Zip Code 94117

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

Name of Employer TULCHIN RESEARCH Occupation ANALYST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 60.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : INCA5565

Amount of Each Receipt this Period
 10.00

Memo Item
 ERMK: PATTY JUDGE FOR IOWA

C. MARY JEAN CONNORS
Full Name (Last, First, Middle Initial)

Mailing Address 1501 GEORGIA STREET

City KEY WEST State FL Zip Code 33040

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
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : INCA5572

Amount of Each Receipt this Period
 5.00

Memo Item
 ERMK: HILLARY FOR AMERICA

SUBTOTAL of Receipts This Page (optional)..... ▶ 25.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 73 OF 293 (check only one)
<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. MARY JEAN CONNORS
Full Name (Last, First, Middle Initial)

Mailing Address 1501 GEORGIA STREET

City KEY WEST	State FL	Zip Code 33040
------------------	-------------	-------------------

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

M M	/	D D	/	Y Y Y Y
07		29		2016

Transaction ID : INCA5566

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: TAMMY FOR ILLINOIS

B. MARY JEAN CONNORS
Full Name (Last, First, Middle Initial)

Mailing Address 1501 GEORGIA STREET

City KEY WEST	State FL	Zip Code 33040
------------------	-------------	-------------------

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

M M	/	D D	/	Y Y Y Y
07		29		2016

Transaction ID : INCA5569

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: KIRKPATRICK FOR SENATE

C. MARY JEAN CONNORS
Full Name (Last, First, Middle Initial)

Mailing Address 1501 GEORGIA STREET

City KEY WEST	State FL	Zip Code 33040
------------------	-------------	-------------------

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

M M	/	D D	/	Y Y Y Y
07		29		2016

Transaction ID : INCA5568

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: PATTY JUDGE FOR IOWA

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 74 OF 293
	<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. MARY JEAN CONNORS
Full Name (Last, First, Middle Initial)

Mailing Address 1501 GEORGIA STREET

City KEY WEST State FL Zip Code 33040

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
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : INCA5570

Amount of Each Receipt this Period
 5.00

Memo Item
 ERMK: KATIE MCGINTY FOR SENATE

B. MARY JEAN CONNORS
Full Name (Last, First, Middle Initial)

Mailing Address 1501 GEORGIA STREET

City KEY WEST State FL Zip Code 33040

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
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : INCA5571

Amount of Each Receipt this Period
 5.00

Memo Item
 ERMK: DEBORAH ROSS FOR SENATE

C. MARY JEAN CONNORS
Full Name (Last, First, Middle Initial)

Mailing Address 1501 GEORGIA STREET

City KEY WEST State FL Zip Code 33040

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
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : INCA5567

Amount of Each Receipt this Period
 5.00

Memo Item
 ERMK: MAGGIE FOR NH

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 75 OF 293
	<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. ROSEMARY GSCHWIND
Full Name (Last, First, Middle Initial)
Mailing Address 5504 W WARWICK AVE
City CHICAGO State IL Zip Code 60641
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation HOMEMAKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 40.00

Date of Receipt 07 / 29 / 2016
Transaction ID : INCA5607
Amount of Each Receipt this Period 5.00
 Memo Item

B. ROSEMARY GSCHWIND
Full Name (Last, First, Middle Initial)
Mailing Address 5504 W WARWICK AVE
City CHICAGO State IL Zip Code 60641
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation HOMEMAKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 40.00

Date of Receipt 07 / 29 / 2016
Transaction ID : INCA5606
Amount of Each Receipt this Period 5.00
 Memo Item
ERMK: HILLARY FOR AMERICA

C. ROSEMARY GSCHWIND
Full Name (Last, First, Middle Initial)
Mailing Address 5504 W WARWICK AVE
City CHICAGO State IL Zip Code 60641
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation HOMEMAKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 40.00

Date of Receipt 07 / 29 / 2016
Transaction ID : INCA5605
Amount of Each Receipt this Period 5.00
 Memo Item
ERMK: DEBORAH ROSS FOR SENATE

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: PAGE 76 OF 293 (check only one)
<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. ROSEMARY GSCHWIND
Full Name (Last, First, Middle Initial)

Mailing Address 5504 W WARWICK AVE

City CHICAGO State IL Zip Code 60641

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 40.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : INCA5600

Amount of Each Receipt this Period
 5.00

Memo Item
 ERMK: TAMMY FOR ILLINOIS

B. ROSEMARY GSCHWIND
Full Name (Last, First, Middle Initial)

Mailing Address 5504 W WARWICK AVE

City CHICAGO State IL Zip Code 60641

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 40.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : INCA5604

Amount of Each Receipt this Period
 5.00

Memo Item
 ERMK: KATIE MCGINTY FOR SENATE

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

Mailing Address 5504 W WARWICK AVE

City CHICAGO State IL Zip Code 60641

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 40.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : INCA5603

Amount of Each Receipt this Period
 5.00

Memo Item
 ERMK: KIRKPATRICK FOR SENATE

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 77 OF 293
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. ROSEMARY GSCHWIND
 Full Name (Last, First, Middle Initial)
 Mailing Address 5504 W WARWICK AVE
 City CHICAGO State IL Zip Code 60641
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 40.00

Date of Receipt 07 / 29 / 2016
Transaction ID : INCA5601
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: MAGGIE FOR NH

B. ROSEMARY GSCHWIND
 Full Name (Last, First, Middle Initial)
 Mailing Address 5504 W WARWICK AVE
 City CHICAGO State IL Zip Code 60641
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 40.00

Date of Receipt 07 / 29 / 2016
Transaction ID : INCA5602
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: PATTY JUDGE FOR IOWA

C. VIRGINIA GUTIERREZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 5635 N. 16 ST.
 City PHILADELPHIA State PA Zip Code 19141
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CITY OF PHILADELPHIA Occupation LAWYER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 35.00

Date of Receipt 07 / 29 / 2016
Transaction ID : INCA5586
 Amount of Each Receipt this Period 5.00
 Memo Item
 ERMK: TAMMY FOR ILLINOIS

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 78 OF 293
<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. VIRGINIA GUTIERREZ
Full Name (Last, First, Middle Initial)
Mailing Address 5635 N. 16 ST.

City PHILADELPHIA	State PA	Zip Code 19141
----------------------	-------------	-------------------

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

Name of Employer CITY OF PHILADELPHIA	Occupation LAWYER
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
35.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2016

Transaction ID : INCA5592

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: HILLARY FOR AMERICA

B. VIRGINIA GUTIERREZ
Full Name (Last, First, Middle Initial)
Mailing Address 5635 N. 16 ST.

City PHILADELPHIA	State PA	Zip Code 19141
----------------------	-------------	-------------------

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

Name of Employer CITY OF PHILADELPHIA	Occupation LAWYER
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
35.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2016

Transaction ID : INCA5588

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: PATTY JUDGE FOR IOWA

C. VIRGINIA GUTIERREZ
Full Name (Last, First, Middle Initial)
Mailing Address 5635 N. 16 ST.

City PHILADELPHIA	State PA	Zip Code 19141
----------------------	-------------	-------------------

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

Name of Employer CITY OF PHILADELPHIA	Occupation LAWYER
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
35.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2016

Transaction ID : INCA5590

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: KATIE MCGINTY FOR SENATE

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 79 OF 293
<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. VIRGINIA GUTIERREZ
Full Name (Last, First, Middle Initial)
Mailing Address 5635 N. 16 ST.
City PHILADELPHIA State PA Zip Code 19141
FEC ID number of contributing federal political committee. **C**
Name of Employer CITY OF PHILADELPHIA Occupation LAWYER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 35.00

Date of Receipt 07 / 29 / 2016
Transaction ID : INCA5589
Amount of Each Receipt this Period 5.00
 Memo Item
ERMK: KIRKPATRICK FOR SENATE

B. VIRGINIA GUTIERREZ
Full Name (Last, First, Middle Initial)
Mailing Address 5635 N. 16 ST.
City PHILADELPHIA State PA Zip Code 19141
FEC ID number of contributing federal political committee. **C**
Name of Employer CITY OF PHILADELPHIA Occupation LAWYER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 35.00

Date of Receipt 07 / 29 / 2016
Transaction ID : INCA5591
Amount of Each Receipt this Period 5.00
 Memo Item
ERMK: DEBORAH ROSS FOR SENATE

C. VIRGINIA GUTIERREZ
Full Name (Last, First, Middle Initial)
Mailing Address 5635 N. 16 ST.
City PHILADELPHIA State PA Zip Code 19141
FEC ID number of contributing federal political committee. **C**
Name of Employer CITY OF PHILADELPHIA Occupation LAWYER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 35.00

Date of Receipt 07 / 29 / 2016
Transaction ID : INCA5587
Amount of Each Receipt this Period 5.00
 Memo Item
ERMK: MAGGIE FOR NH

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 80 OF 293
	<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. DIANE ILARDI
Full Name (Last, First, Middle Initial)
Mailing Address 310 NUTWOOD CIR
City JAMESTOWN State NC Zip Code 27282
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 ▼ 100.00

Date of Receipt 07 / 29 / 2016
Transaction ID : INCA5577
Amount of Each Receipt this Period 10.00
 Memo Item
ERMK: KATIE MCGINTY FOR SENATE

B. DIANE ILARDI
Full Name (Last, First, Middle Initial)
Mailing Address 310 NUTWOOD CIR
City JAMESTOWN State NC Zip Code 27282
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 ▼ 100.00

Date of Receipt 07 / 29 / 2016
Transaction ID : INCA5576
Amount of Each Receipt this Period 10.00
 Memo Item
ERMK: KIRKPATRICK FOR SENATE

C. DIANE ILARDI
Full Name (Last, First, Middle Initial)
Mailing Address 310 NUTWOOD CIR
City JAMESTOWN State NC Zip Code 27282
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 ▼ 100.00

Date of Receipt 07 / 29 / 2016
Transaction ID : INCA5575
Amount of Each Receipt this Period 10.00
 Memo Item
ERMK: TAMMY FOR ILLINOIS

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00
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 81 OF 293
	<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. DIANE ILARDI
 Full Name (Last, First, Middle Initial)
 Mailing Address 310 NUTWOOD CIR
 City JAMESTOWN State NC Zip Code 27282
 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 ▼ 100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : INCA5574
 Amount of Each Receipt this Period
 10.00
 Memo Item
 ERMK: DEBORAH ROSS FOR SENATE

B. DIANE ILARDI
 Full Name (Last, First, Middle Initial)
 Mailing Address 310 NUTWOOD CIR
 City JAMESTOWN State NC Zip Code 27282
 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 ▼ 100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : INCA5573
 Amount of Each Receipt this Period
 60.00
 Memo Item
 ERMK: HILLARY FOR AMERICA

C. JULIE INGLEMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 8515 NOTTINGHAM ROAD
 City LAKE SHORE State MN Zip Code 56468
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED, SAME NAME Occupation DESIGNER
 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
 07 / 29 / 2016
Transaction ID : INCA5614
 Amount of Each Receipt this Period
 5.00
 Memo Item
 ERMK: HILLARY FOR AMERICA

SUBTOTAL of Receipts This Page (optional).....▶	75.00
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 82 OF 293
	<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. JULIE INGLEMAN
Full Name (Last, First, Middle Initial)

Mailing Address 8515 NOTTINGHAM ROAD

City LAKE SHORE State MN Zip Code 56468

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

Name of Employer SELF-EMPLOYED, SAME NAME Occupation DESIGNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 70.00

Date of Receipt 07 / 29 / 2016

Transaction ID : INCA5613

Amount of Each Receipt this Period 5.00

Memo Item
ERMK: DEBORAH ROSS FOR SENATE

B. JULIE INGLEMAN
Full Name (Last, First, Middle Initial)

Mailing Address 8515 NOTTINGHAM ROAD

City LAKE SHORE State MN Zip Code 56468

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

Name of Employer SELF-EMPLOYED, SAME NAME Occupation DESIGNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 70.00

Date of Receipt 07 / 29 / 2016

Transaction ID : INCA5612

Amount of Each Receipt this Period 5.00

Memo Item
ERMK: KATIE MCGINTY FOR SENATE

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

Mailing Address 8515 NOTTINGHAM ROAD

City LAKE SHORE State MN Zip Code 56468

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

Name of Employer SELF-EMPLOYED, SAME NAME Occupation DESIGNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 70.00

Date of Receipt 07 / 29 / 2016

Transaction ID : INCA5611

Amount of Each Receipt this Period 5.00

Memo Item
ERMK: KIRKPATRICK FOR SENATE

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 83 OF 293
	<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. JULIE INGLEMAN
Full Name (Last, First, Middle Initial)

Mailing Address 8515 NOTTINGHAM ROAD

City LAKE SHORE	State MN	Zip Code 56468
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
70.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : INCA5610

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: PATTY JUDGE FOR IOWA

B. JULIE INGLEMAN
Full Name (Last, First, Middle Initial)

Mailing Address 8515 NOTTINGHAM ROAD

City LAKE SHORE	State MN	Zip Code 56468
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
70.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : INCA5609

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: MAGGIE FOR NH

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

Mailing Address 8515 NOTTINGHAM ROAD

City LAKE SHORE	State MN	Zip Code 56468
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
70.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : INCA5608

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: TAMMY FOR ILLINOIS

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 84 OF 293
	<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. LAURA JEPSEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2760 W. 22ND AVE.
 City DENVER State CO Zip Code 80211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HABITAT Occupation MAJOR GIFTS OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 40.00

Date of Receipt 07 / 29 / 2016
Transaction ID : INCA5549
 Amount of Each Receipt this Period 6.67
 Memo Item
 ERMK: MAGGIE FOR NH

B. LAURA JEPSEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2760 W. 22ND AVE.
 City DENVER State CO Zip Code 80211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HABITAT Occupation MAJOR GIFTS OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 40.00

Date of Receipt 07 / 29 / 2016
Transaction ID : INCA5548
 Amount of Each Receipt this Period 6.67
 Memo Item
 ERMK: KATIE MCGINTY FOR SENATE

C. LAURA JEPSEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2760 W. 22ND AVE.
 City DENVER State CO Zip Code 80211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HABITAT Occupation MAJOR GIFTS OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 40.00

Date of Receipt 07 / 29 / 2016
Transaction ID : INCA5550
 Amount of Each Receipt this Period 6.67
 Memo Item
 ERMK: DEBORAH ROSS FOR SENATE

SUBTOTAL of Receipts This Page (optional).....	20.01
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 85 OF 293
	<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. LAURA JEPSEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2760 W. 22ND AVE.
 City DENVER State CO Zip Code 80211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HABITAT Occupation MAJOR GIFTS OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 40.00

Date of Receipt 07 / 29 / 2016
Transaction ID : INCA5547
 Amount of Each Receipt this Period 6.67
 Memo Item
 ERMK: TAMMY FOR ILLINOIS

B. LAURA JEPSEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2760 W. 22ND AVE.
 City DENVER State CO Zip Code 80211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HABITAT Occupation MAJOR GIFTS OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 40.00

Date of Receipt 07 / 29 / 2016
Transaction ID : INCA5551
 Amount of Each Receipt this Period 6.65
 Memo Item
 ERMK: PATTY JUDGE FOR IOWA

C. LAURA JEPSEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2760 W. 22ND AVE.
 City DENVER State CO Zip Code 80211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HABITAT Occupation MAJOR GIFTS OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 40.00

Date of Receipt 07 / 29 / 2016
Transaction ID : INCA5546
 Amount of Each Receipt this Period 6.67
 Memo Item
 ERMK: KIRKPATRICK FOR SENATE

SUBTOTAL of Receipts This Page (optional).....▶	19.99
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 86 OF 293
	<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. CATHY LINDY
Full Name (Last, First, Middle Initial)

Mailing Address 930 CAPE MARCO DR 506

City MARCO ISLAND	State FL	Zip Code 34145
----------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : INCA5599

Amount of Each Receipt this Period
142.84

Memo Item
ERMK: HILLARY FOR AMERICA

B. CATHY LINDY
Full Name (Last, First, Middle Initial)

Mailing Address 930 CAPE MARCO DR 506

City MARCO ISLAND	State FL	Zip Code 34145
----------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : INCA5595

Amount of Each Receipt this Period
142.86

Memo Item
ERMK: PATTY JUDGE FOR IOWA

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

Mailing Address 930 CAPE MARCO DR 506

City MARCO ISLAND	State FL	Zip Code 34145
----------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : INCA5598

Amount of Each Receipt this Period
142.86

Memo Item
ERMK: DEBORAH ROSS FOR SENATE

SUBTOTAL of Receipts This Page (optional).....	428.56
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 87 OF 293
	<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. CATHY LINDY
Full Name (Last, First, Middle Initial)

Mailing Address 930 CAPE MARCO DR 506

City MARCO ISLAND	State FL	Zip Code 34145
----------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : INCA5596

Amount of Each Receipt this Period
142.86

Memo Item
ERMK: KIRKPATRICK FOR SENATE

B. CATHY LINDY
Full Name (Last, First, Middle Initial)

Mailing Address 930 CAPE MARCO DR 506

City MARCO ISLAND	State FL	Zip Code 34145
----------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : INCA5597

Amount of Each Receipt this Period
142.86

Memo Item
ERMK: KATIE MCGINTY FOR SENATE

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

Mailing Address 930 CAPE MARCO DR 506

City MARCO ISLAND	State FL	Zip Code 34145
----------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : INCA5594

Amount of Each Receipt this Period
142.86

Memo Item
ERMK: MAGGIE FOR NH

SUBTOTAL of Receipts This Page (optional).....	428.58
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 88 OF 293
	<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. CATHY LINDY
 Full Name (Last, First, Middle Initial)
 Mailing Address 930 CAPE MARCO DR 506
 City MARCO ISLAND State FL Zip Code 34145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **07 / 29 / 2016**
Transaction ID : INCA5593
 Amount of Each Receipt this Period **142.86**
 Memo Item
 ERMK: TAMMY FOR ILLINOIS

B. KARITA MATTILA
 Full Name (Last, First, Middle Initial)
 Mailing Address 4851 CERROMAR DRIVE
 City NAPLES State FL Zip Code 34112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED, SAME NAME Occupation OPERA SINGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **285.48**

Date of Receipt **07 / 29 / 2016**
Transaction ID : INCA5615
 Amount of Each Receipt this Period **20.16**
 Memo Item
 ERMK: HILLARY FOR AMERICA

C. KARITA MATTILA
 Full Name (Last, First, Middle Initial)
 Mailing Address 4851 CERROMAR DRIVE
 City NAPLES State FL Zip Code 34112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED, SAME NAME Occupation OPERA SINGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **285.48**

Date of Receipt **07 / 29 / 2016**
Transaction ID : INCA5616
 Amount of Each Receipt this Period **5.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	168.02
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 89 OF 293
	<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. CATHERINE STRAUSS
Full Name (Last, First, Middle Initial)

Mailing Address 2805 MONUMENT AVENUE APT. 3

City	State	Zip Code
RICHMOND	VA	23221

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

Name of Employer	Occupation
NONE	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : INCA5623

Amount of Each Receipt this Period
5.00

Memo Item

B. CATHERINE STRAUSS
Full Name (Last, First, Middle Initial)

Mailing Address 2805 MONUMENT AVENUE APT. 3

City	State	Zip Code
RICHMOND	VA	23221

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

Name of Employer	Occupation
NONE	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : INCA5619

Amount of Each Receipt this Period
300.00

Memo Item
ERMK: KATIE MCGINTY FOR SENATE

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

Mailing Address 2805 MONUMENT AVENUE APT. 3

City	State	Zip Code
RICHMOND	VA	23221

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

Name of Employer	Occupation
NONE	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : INCA5617

Amount of Each Receipt this Period
40.00

Memo Item
ERMK: KIRKPATRICK FOR SENATE

SUBTOTAL of Receipts This Page (optional).....▶	345.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 90 OF 293
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. CATHERINE STRAUSS
Full Name (Last, First, Middle Initial)

Mailing Address 2805 MONUMENT AVENUE APT. 3

City	State	Zip Code
RICHMOND	VA	23221

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

Name of Employer	Occupation
NONE	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2016

Transaction ID : INCA5618

Amount of Each Receipt this Period
40.00

Memo Item
ERMK: TAMMY FOR ILLINOIS

B. CATHERINE STRAUSS
Full Name (Last, First, Middle Initial)

Mailing Address 2805 MONUMENT AVENUE APT. 3

City	State	Zip Code
RICHMOND	VA	23221

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

Name of Employer	Occupation
NONE	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2016

Transaction ID : INCA5620

Amount of Each Receipt this Period
40.00

Memo Item
ERMK: MAGGIE FOR NH

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

Mailing Address 2805 MONUMENT AVENUE APT. 3

City	State	Zip Code
RICHMOND	VA	23221

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

Name of Employer	Occupation
NONE	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2016

Transaction ID : INCA5624

Amount of Each Receipt this Period
5.00

Memo Item
ERMK: HILLARY FOR AMERICA

SUBTOTAL of Receipts This Page (optional).....	85.00
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 91 OF 293
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. CATHERINE STRAUSS
Full Name (Last, First, Middle Initial)

Mailing Address 2805 MONUMENT AVENUE APT. 3

City	State	Zip Code
RICHMOND	VA	23221

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

Name of Employer	Occupation
NONE	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : INCA5621

Amount of Each Receipt this Period
 40.00

Memo Item
 ERMK: DEBORAH ROSS FOR SENATE

B. CATHERINE STRAUSS
Full Name (Last, First, Middle Initial)

Mailing Address 2805 MONUMENT AVENUE APT. 3

City	State	Zip Code
RICHMOND	VA	23221

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

Name of Employer	Occupation
NONE	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : INCA5622

Amount of Each Receipt this Period
 40.00

Memo Item
 ERMK: PATTY JUDGE FOR IOWA

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

Mailing Address 1004 CALN MEETINGHOUSE RD

City	State	Zip Code
COATESVILLE	PA	19320

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

Name of Employer	Occupation
MAIN LINE HEALTH	THERAPIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
75.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : INCA5554

Amount of Each Receipt this Period
 10.00

Memo Item
 ERMK: PATTY JUDGE FOR IOWA

SUBTOTAL of Receipts This Page (optional).....	90.00
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 92 OF 293
	<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. GINGER WITMER
Full Name (Last, First, Middle Initial)

Mailing Address 1004 CALN MEETINGHOUSE RD

City COATESVILLE	State PA	Zip Code 19320
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FEC ID number of contributing federal political committee. **C**

Name of Employer MAIN LINE HEALTH	Occupation THERAPIST
--------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **75.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 29 / 2016

Transaction ID : INCA5555

Amount of Each Receipt this Period
10.00

Memo Item
 ERMK: KIRKPATRICK FOR SENATE

B. GINGER WITMER
Full Name (Last, First, Middle Initial)

Mailing Address 1004 CALN MEETINGHOUSE RD

City COATESVILLE	State PA	Zip Code 19320
---------------------	-------------	-------------------

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

Name of Employer MAIN LINE HEALTH	Occupation THERAPIST
--------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **75.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 29 / 2016

Transaction ID : INCA5557

Amount of Each Receipt this Period
10.00

Memo Item
 ERMK: DEBORAH ROSS FOR SENATE

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

Mailing Address 1004 CALN MEETINGHOUSE RD

City COATESVILLE	State PA	Zip Code 19320
---------------------	-------------	-------------------

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

Name of Employer MAIN LINE HEALTH	Occupation THERAPIST
--------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **75.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 29 / 2016

Transaction ID : INCA5556

Amount of Each Receipt this Period
10.00

Memo Item
 ERMK: KATIE MCGINTY FOR SENATE

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 93 OF 293
	<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. GINGER WITMER
Full Name (Last, First, Middle Initial)

Mailing Address 1004 CALN MEETINGHOUSE RD

City COATESVILLE	State PA	Zip Code 19320
---------------------	-------------	-------------------

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

Name of Employer MAIN LINE HEALTH	Occupation THERAPIST
--------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
75.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2016

Transaction ID : INCA5559

Amount of Each Receipt this Period

5.00

 Memo Item

B. GINGER WITMER
Full Name (Last, First, Middle Initial)

Mailing Address 1004 CALN MEETINGHOUSE RD

City COATESVILLE	State PA	Zip Code 19320
---------------------	-------------	-------------------

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

Name of Employer MAIN LINE HEALTH	Occupation THERAPIST
--------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
75.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2016

Transaction ID : INCA5553

Amount of Each Receipt this Period

10.00

 Memo Item
 ERMK: MAGGIE FOR NH

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

Mailing Address 1004 CALN MEETINGHOUSE RD

City COATESVILLE	State PA	Zip Code 19320
---------------------	-------------	-------------------

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

Name of Employer MAIN LINE HEALTH	Occupation THERAPIST
--------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
75.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2016

Transaction ID : INCA5558

Amount of Each Receipt this Period

10.00

 Memo Item
 ERMK: HILLARY FOR AMERICA

SUBTOTAL of Receipts This Page (optional).....▶	25.00
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 94 OF 293
	<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. GINGER WITMER
Full Name (Last, First, Middle Initial)

Mailing Address 1004 CALN MEETINGHOUSE RD

City COATESVILLE	State PA	Zip Code 19320
---------------------	-------------	-------------------

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

Name of Employer MAIN LINE HEALTH	Occupation THERAPIST
--------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
75.00

Date of Receipt
07 / 29 / 2016

Transaction ID : INCA5552

Amount of Each Receipt this Period
10.00

Memo Item
ERMK: TAMMY FOR ILLINOIS

B. GHADA ALKIEK
Full Name (Last, First, Middle Initial)

Mailing Address 250 K ST NE, APT 624

City WASHINGTON	State DC	Zip Code 20002
--------------------	-------------	-------------------

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

Name of Employer US HOUSE OF REPS	Occupation STAFFER
--------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
30.00

Date of Receipt
07 / 30 / 2016

Transaction ID : INCA5531

Amount of Each Receipt this Period
30.00

Memo Item
ERMK: ELECTING WOMEN SAN FRANCISCO

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

Mailing Address 65 EVERGREEN LANE

City BERKELEY	State CA	Zip Code 94705
------------------	-------------	-------------------

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

Name of Employer CLOSE THE GAP CA	Occupation DIRECTOR
--------------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2005.00

Date of Receipt
07 / 30 / 2016

Transaction ID : INCA5532

Amount of Each Receipt this Period
1000.00

Memo Item
ERMK: DEBORAH ROSS FOR SENATE

SUBTOTAL of Receipts This Page (optional).....	1040.00
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 95 OF 293
	<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. JUDITH HUGHES
Full Name (Last, First, Middle Initial)
Mailing Address 383 PEARL DRIVE

City LIVERMORE	State CA	Zip Code 94550
-------------------	-------------	-------------------

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

Name of Employer SELF-EMPLOYED, SAME NAME	Occupation MARRIAGE AND FAMILY THERAPIST
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
90.00

Date of Receipt
07 / 30 / 2016
Transaction ID : INCA5533

Amount of Each Receipt this Period
15.00

Memo Item
ERMK: TAMMY FOR ILLINOIS

B. JUDITH HUGHES
Full Name (Last, First, Middle Initial)
Mailing Address 383 PEARL DRIVE

City LIVERMORE	State CA	Zip Code 94550
-------------------	-------------	-------------------

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

Name of Employer SELF-EMPLOYED, SAME NAME	Occupation MARRIAGE AND FAMILY THERAPIST
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
90.00

Date of Receipt
07 / 30 / 2016
Transaction ID : INCA5534

Amount of Each Receipt this Period
15.00

Memo Item
ERMK: MAGGIE FOR NH

C. JUDITH HUGHES
Full Name (Last, First, Middle Initial)
Mailing Address 383 PEARL DRIVE

City LIVERMORE	State CA	Zip Code 94550
-------------------	-------------	-------------------

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

Name of Employer SELF-EMPLOYED, SAME NAME	Occupation MARRIAGE AND FAMILY THERAPIST
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
90.00

Date of Receipt
07 / 30 / 2016
Transaction ID : INCA5538

Amount of Each Receipt this Period
15.00

Memo Item
ERMK: DEBORAH ROSS FOR SENATE

SUBTOTAL of Receipts This Page (optional).....	45.00
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 96 OF 293
<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. JUDITH HUGHES
Full Name (Last, First, Middle Initial)
Mailing Address 383 PEARL DRIVE

City LIVERMORE	State CA	Zip Code 94550
-------------------	-------------	-------------------

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

Name of Employer SELF-EMPLOYED, SAME NAME	Occupation MARRIAGE AND FAMILY THERAPIST
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
90.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2016

Transaction ID : INCA5536

Amount of Each Receipt this Period
15.00

Memo Item
ERMK: KIRKPATRICK FOR SENATE

B. JUDITH HUGHES
Full Name (Last, First, Middle Initial)
Mailing Address 383 PEARL DRIVE

City LIVERMORE	State CA	Zip Code 94550
-------------------	-------------	-------------------

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

Name of Employer SELF-EMPLOYED, SAME NAME	Occupation MARRIAGE AND FAMILY THERAPIST
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
90.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2016

Transaction ID : INCA5537

Amount of Each Receipt this Period
15.00

Memo Item
ERMK: KATIE MCGINTY FOR SENATE

C. JUDITH HUGHES
Full Name (Last, First, Middle Initial)
Mailing Address 383 PEARL DRIVE

City LIVERMORE	State CA	Zip Code 94550
-------------------	-------------	-------------------

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

Name of Employer SELF-EMPLOYED, SAME NAME	Occupation MARRIAGE AND FAMILY THERAPIST
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
90.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2016

Transaction ID : INCA5535

Amount of Each Receipt this Period
15.00

Memo Item
ERMK: PATTY JUDGE FOR IOWA

SUBTOTAL of Receipts This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	29197.16

**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 97 OF 293
<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. 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 ▼ **6.65**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 07 / 2016

Transaction ID : INCA5511

Amount of Each Receipt this Period
0.60

Memo Item

Full Name (Last, First, Middle Initial)
B. CAROL SHEA-PORTER FOR CONGRESS

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 ▼ **1.60**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 07 / 2016

Transaction ID : INCA5512

Amount of Each Receipt this Period
0.60

Memo Item

Full Name (Last, First, Middle Initial)
C. CARROLL FOR COLORADO

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 ▼ **6.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 07 / 2016

Transaction ID : INCA5510

Amount of Each Receipt this Period
0.60

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1.80
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 98 OF 293
<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. 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 ▼ 428.46

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 07 / 2016
Transaction ID : INCA5507
 Amount of Each Receipt this Period 82.60
 Memo Item

B. 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 ▼ 357.87

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 07 / 2016
Transaction ID : INCA5508
 Amount of Each Receipt this Period 2.60
 Memo Item

C. 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 ▼ 1120.22

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 07 / 2016
Transaction ID : INCA5505
 Amount of Each Receipt this Period 83.20
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	168.40
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 99 OF 293
<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. MAGGIE FOR NH
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 298

City CONCORD	State NH	Zip Code 03302
FEC ID number of contributing federal political committee. C C00588772	Name of Employer Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 249.23	

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 07 / 2016
Transaction ID : INCA5506

Amount of Each Receipt this Period
2.60

Memo Item

B. PATTY JUDGE FOR IOWA
Full Name (Last, First, Middle Initial)
Mailing Address 321 E WALNUT ST SUITE 201

City DES MOINES	State IA	Zip Code 50309
FEC ID number of contributing federal political committee. C C00612473	Name of Employer Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 22.47	

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 07 / 2016
Transaction ID : INCA5509

Amount of Each Receipt this Period
2.80

Memo Item

C. 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1060.42	

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 07 / 2016
Transaction ID : INCA5504

Amount of Each Receipt this Period
4.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	9.40
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 100 OF 293
<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. ANNA ESHOO 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** C00258475
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.60

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2016
Transaction ID : INCA5876
 Amount of Each Receipt this Period
 1.00
 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 ▼ 6.65

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2016
Transaction ID : INCA5883
 Amount of Each Receipt this Period
 2.20
 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 ▼ 1.60

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2016
Transaction ID : INCA5884
 Amount of Each Receipt this Period
 0.20
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	3.40
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 101 OF 293
<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 ▼ 6.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2016
Transaction ID : INCA5882
 Amount of Each Receipt this Period 0.20
 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 ▼ 428.46

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2016
Transaction ID : INCA5879
 Amount of Each Receipt this Period 41.20
 Memo Item

C. DELBENE FOR CONGRESS
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 487
 City BOTHELL State WA Zip Code 98041
 FEC ID number of contributing federal political committee. **C** C00459099
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2016
Transaction ID : INCA5890
 Amount of Each Receipt this Period 3.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	44.40
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 102 OF 293
<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. 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 ▼ 357.87

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2016
Transaction ID : INCA5880
 Amount of Each Receipt this Period 109.20
 Memo Item

B. 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 ▼ 1120.22

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2016
Transaction ID : INCA5877
 Amount of Each Receipt this Period 81.20
 Memo Item

C. KYRSTEN SINEMA FOR CONGRESS
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 25879
 City TEMPE State AZ Zip Code 85285
 FEC ID number of contributing federal political committee. **C** C00508804
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2016
Transaction ID : INCA5891
 Amount of Each Receipt this Period 1.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	191.40
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 103 OF 293
<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. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City State Zip Code
CONCORD NH 03302

FEC ID number of contributing federal political committee. **C C00588772**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
249.23

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 14 / 2016

Transaction ID : INCA5878

Amount of Each Receipt this Period
1.20

Memo Item

Full Name (Last, First, Middle Initial)
B. MONICA VERNON FOR CONGRESS

Mailing Address PO BOX 1635

City State Zip Code
CEDAR RAPIDS IA 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 ▼
4.40

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 14 / 2016

Transaction ID : INCA5886

Amount of Each Receipt this Period
0.20

Memo Item

Full Name (Last, First, Middle Initial)
C. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City State Zip Code
DES MOINES IA 50309

FEC ID number of contributing federal political committee. **C C00612473**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
22.47

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 14 / 2016

Transaction ID : INCA5881

Amount of Each Receipt this Period
1.20

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2.60
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 104 OF 293
<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. PRAMILA FOR CONGRESS
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 20753
 City SEATTLE State WA Zip Code 98102
 FEC ID number of contributing federal political committee. **C** C00605592
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2.90

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2016
Transaction ID : INCA5888
 Amount of Each Receipt this Period
 2.70
 Memo Item

B. 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 ▼ 3.25

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2016
Transaction ID : INCA5892
 Amount of Each Receipt this Period
 2.00
 Memo Item

C. SUSAN RANDOLPH FOR CONGRESS
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 533643
 City ORLANDO State FL Zip Code 32853
 FEC ID number of contributing federal political committee. **C** C00581041
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2.70

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2016
Transaction ID : INCA5889
 Amount of Each Receipt this Period
 2.70
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	7.40
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 105 OF 293
<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. 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 ▼
3.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	14	/	2016

Transaction ID : INCA5887

Amount of Each Receipt this Period
2.90

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 ▼
1060.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	14	/	2016

Transaction ID : INCA5875

Amount of Each Receipt this Period
1.20

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 ▼
9.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	14	/	2016

Transaction ID : INCA5885

Amount of Each Receipt this Period
2.90

Memo Item

SUBTOTAL of Receipts This Page (optional).....	7.00
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 106 OF 293
<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. CATHERINE CORTEZ MASTO FOR SENATE

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 ▼
651.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	20	/	2016

Transaction ID : INCA5874

Amount of Each Receipt this Period
108.00

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

FEC ID number of contributing federal political committee. **C** C00589820

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
428.46

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	20	/	2016

Transaction ID : INCA5871

Amount of Each Receipt this Period
110.71

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

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

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
110.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	20	/	2016

Transaction ID : INCA5867

Amount of Each Receipt this Period
4.40

Memo Item

SUBTOTAL of Receipts This Page (optional).....	223.11
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 107 OF 293
<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. 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 ▼ 357.87

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : INCA5872
 Amount of Each Receipt this Period 2.71
 Memo Item

B. 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 ▼ 1120.22

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : INCA5869
 Amount of Each Receipt this Period 230.71
 Memo Item

C. MAGGIE FOR NH
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 298
 City CONCORD State NH Zip Code 03302
 FEC ID number of contributing federal political committee. **C** C00588772
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 249.23

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : INCA5870
 Amount of Each Receipt this Period 2.71
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	236.13
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 108 OF 293
<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. PATTY JUDGE FOR IOWA
Full Name (Last, First, Middle Initial)
Mailing Address 321 E WALNUT ST SUITE 201

City DES MOINES	State IA	Zip Code 50309
FEC ID number of contributing federal political committee. C C00612473	Name of Employer Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 22.47	

Date of Receipt
07 / 20 / 2016
Transaction ID : INCA5873

Amount of Each Receipt this Period
2.71

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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1060.42	

Date of Receipt
07 / 20 / 2016
Transaction ID : INCA5868

Amount of Each Receipt this Period
2.71

Memo Item

C. 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 6.65	

Date of Receipt
07 / 28 / 2016
Transaction ID : INCA5862

Amount of Each Receipt this Period
0.20

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	5.62
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 109 OF 293
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)
A. CAROL SHEA-PORTER FOR CONGRESS

Mailing Address P.O. BOX 453

City State Zip Code
ROCHESTER NH 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 ▼
1.60

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : INCA5863

Amount of Each Receipt this Period
 0.20

Memo Item

Full Name (Last, First, Middle Initial)
B. CARROLL FOR COLORADO

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 ▼
6.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : INCA5861

Amount of Each Receipt this Period
 0.20

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

FEC ID number of contributing federal political committee. **C C00589820**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
428.46

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : INCA5858

Amount of Each Receipt this Period
 6.96

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 7.36

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 110 OF 293
<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. HILLARY FOR AMERICA		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 28 / 2016
Mailing Address P.O. BOX 5256		Transaction ID : INCA5854
City NEW YORK	State NY	Zip Code 10185
FEC ID number of contributing federal political committee. C C00575795		Amount of Each Receipt this Period 2.16
Name of Employer	Occupation	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 110.98	

Full Name (Last, First, Middle Initial) B. KATIE MCGINTY FOR SENATE		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 28 / 2016
Mailing Address PO BOX 22447		Transaction ID : INCA5859
City PHILADELPHIA	State PA	Zip Code 19110
FEC ID number of contributing federal political committee. C C00582809		Amount of Each Receipt this Period 6.96
Name of Employer	Occupation	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 357.87	

Full Name (Last, First, Middle Initial) C. KIRKPATRICK FOR SENATE		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 28 / 2016
Mailing Address PO BOX 34421		Transaction ID : INCA5856
City PHOENIX	State AZ	Zip Code 85067
FEC ID number of contributing federal political committee. C C00578484		Amount of Each Receipt this Period 6.96
Name of Employer	Occupation	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1120.22	

SUBTOTAL of Receipts This Page (optional).....▶	16.08
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 111 OF 293
<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. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City State Zip Code
CONCORD NH 03302

FEC ID number of contributing federal political committee. **C C00588772**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
249.23

Date of Receipt
07 / 28 / 2016

Transaction ID : INCA5857

Amount of Each Receipt this Period
6.96

Memo Item

Full Name (Last, First, Middle Initial)
B. MONICA VERNON FOR CONGRESS

Mailing Address PO BOX 1635

City State Zip Code
CEDAR RAPIDS IA 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 ▼
4.40

Date of Receipt
07 / 28 / 2016

Transaction ID : INCA5865

Amount of Each Receipt this Period
0.20

Memo Item

Full Name (Last, First, Middle Initial)
C. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City State Zip Code
DES MOINES IA 50309

FEC ID number of contributing federal political committee. **C C00612473**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
22.47

Date of Receipt
07 / 28 / 2016

Transaction ID : INCA5860

Amount of Each Receipt this Period
6.96

Memo Item

SUBTOTAL of Receipts This Page (optional).....	14.12
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 112 OF 293
<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. 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 ▼
3.90

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 28 / 2016

Transaction ID : INCA5866

Amount of Each Receipt this Period
0.20

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 ▼
1060.42

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 28 / 2016

Transaction ID : INCA5855

Amount of Each Receipt this Period
6.96

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 ▼
9.64

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 28 / 2016

Transaction ID : INCA5864

Amount of Each Receipt this Period
0.20

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	7.36
TOTAL This Period (last page this line number only).....▶	945.58

**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. AUTHORIZE.NET

Mailing Address P.O. BOX 8999

City State Zip Code
SAN FRANCISCO CA 94128

Purpose of Disbursement
ACCOUNT FEE

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : EXPB5529

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. FIRST DATA

Mailing Address 5565 GLENRIDGE CONNECTOR NE
SUITE 2000

City State Zip Code
ATLANTA GA 30342

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : EXPB5201

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. FIRST DATA

Mailing Address 5565 GLENRIDGE CONNECTOR NE
SUITE 2000

City State Zip Code
ATLANTA GA 30342

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : EXPB5202

Amount of Each Disbursement this Period

Memo Item

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

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. FIRST DATA

Mailing Address 5565 GLENRIDGE CONNECTOR NE
SUITE 2000

City ATLANTA State GA Zip Code 30342

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

003

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
07 / 05 / 2016

Transaction ID : EXPB5203

Amount of Each Disbursement this Period

518.33

Memo Item

Full Name (Last, First, Middle Initial)

B. WELLS FARGO BANK

Mailing Address 464 CALIFORNIA STREET

City SAN FRANCISCO State CA Zip Code 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
07 / 13 / 2016

Transaction ID : EXPB5908

Amount of Each Disbursement this Period

55.48

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)..... ▶

573.81

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

762.28

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

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

FOR LINE NUMBER:
(check only one)

<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: MARCIA ADDY

Candidate Name
EMILY CAIN

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

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 07 / 2016

Transaction ID : EXPB5371

Amount of Each Disbursement this Period

15.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CAROL SHEA-PORTER FOR CONGRESS

Mailing Address P.O. BOX 453

City ROCHESTER State NH Zip Code 03866

Purpose of Disbursement
ERMK: MARCIA ADDY

Candidate Name
CAROL SHEA PORTER

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

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 07 / 2016

Transaction ID : EXPB5372

Amount of Each Disbursement this Period

15.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CARROLL FOR COLORADO

Mailing Address PO BOX 470783

City AURORA State CO Zip Code 80047

Purpose of Disbursement
ERMK: MARCIA ADDY

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
07 / 07 / 2016

Transaction ID : EXPB5370

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)..... ▶

45.00

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

Form/Schedule: SB23

Transaction ID : EXPB5371

ERMK: MARCIA ADDY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5372

ERMK: MARCIA ADDY-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 : EXPB5370

ERMK: MARCIA ADDY-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: S LEE

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 / D D / Y Y Y Y Y
07 / 07 / 2016

Transaction ID : EXPB5362

Amount of Each Disbursement this Period

5.00

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: LAURA HELFMAN

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 / D D / Y Y Y Y Y
07 / 07 / 2016

Transaction ID : EXPB5364

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: GERRY JENNINGS

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 / D D / Y Y Y Y Y
07 / 07 / 2016

Transaction ID : EXPB5377

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)..... ▶

25.00

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

Form/Schedule: SB23

Transaction ID : EXPB5362

ERMK: S LEE-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5364

ERMK: LAURA HELFMAN-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 : EXPB5377

ERMK: GERRY JENNINGS-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: DEBORAH LOPEZ

Candidate Name
DEBORAH ROSS

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: NC District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 07 / 2016

Transaction ID : EXPB5383

Amount of Each Disbursement this Period

10.00

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: JEANNE STILLMAN

Candidate Name
DEBORAH ROSS

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: NC District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 07 / 2016

Transaction ID : EXPB5390

Amount of Each Disbursement this Period

5.00

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: BARBARA CASE

Candidate Name
DEBORAH ROSS

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: NC District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 07 / 2016

Transaction ID : EXPB5396

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)..... ▶

25.00

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

Form/Schedule: SB23

Transaction ID : EXPB5383

ERMK: DEBORAH LOPEZ-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5390

ERMK: JEANNE STILLMAN-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 : EXPB5396

ERMK: BARBARA CASE-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: CHARLES STIMSON

Candidate Name
DEBORAH ROSS

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: NC District:

Date of Disbursement

/ /

Transaction ID : EXPB5402

Amount of Each Disbursement this Period

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: CATHERINE SPAULDING

Candidate Name
DEBORAH ROSS

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: NC District:

Date of Disbursement

/ /

Transaction ID : EXPB5406

Amount of Each Disbursement this Period

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: MAUREEN DILLON

Candidate Name
DEBORAH ROSS

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: NC District:

Date of Disbursement

/ /

Transaction ID : EXPB5417

Amount of Each Disbursement this Period

Memo Item

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

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 : EXPB5402

ERMK: CHARLES STIMSON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5406

ERMK: CATHERINE SPAULDING-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 : EXPB5417

ERMK: MAUREEN DILLON-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: TOD COHEN

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 / D D / Y Y Y Y Y
07 / 07 / 2016

Transaction ID : EXPB5419

Amount of Each Disbursement this Period

1000.00

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: STACY MASON

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 / D D / Y Y Y Y Y
07 / 07 / 2016

Transaction ID : EXPB5421

Amount of Each Disbursement this Period

1000.00

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: S LEE

Candidate Name
KATHLEEN 'KATIE' MCGINTY

Office Sought: House
 Senate
 President
State: PA District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 07 / 2016

Transaction ID : EXPB5360

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 : EXPB5419

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

Form/Schedule: SB23

Transaction ID: EXPB5421

ERMK: STACY MASON-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 : EXPB5360

ERMK: S LEE-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. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City PHILADELPHIA State PA Zip Code 19110

Purpose of Disbursement
ERMK: LAURA HELFMAN

Candidate Name
KATHLEEN 'KATIE' MCGINTY

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

Date of Disbursement

/ /

Transaction ID : EXPB5368

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City PHILADELPHIA State PA Zip Code 19110

Purpose of Disbursement
ERMK: GERRY JENNINGS

Candidate Name
KATHLEEN 'KATIE' MCGINTY

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

Date of Disbursement

/ /

Transaction ID : EXPB5375

Amount of Each Disbursement this Period

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: DEBORAH LOPEZ

Candidate Name
KATHLEEN 'KATIE' MCGINTY

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

Date of Disbursement

/ /

Transaction ID : EXPB5381

Amount of Each Disbursement this Period

Memo Item

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

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 : EXPB5368

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

Form/Schedule: SB23

Transaction ID: EXPB5375

ERMK: GERRY JENNINGS-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 : EXPB5381

ERMK: DEBORAH LOPEZ-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. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City PHILADELPHIA State PA Zip Code 19110

Purpose of Disbursement
ERMK: JEANNE STILLMAN

Candidate Name
KATHLEEN 'KATIE' MCGINTY

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

Date of Disbursement

/ /

Transaction ID : EXPB5388

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City PHILADELPHIA State PA Zip Code 19110

Purpose of Disbursement
ERMK: BARBARA CASE

Candidate Name
KATHLEEN 'KATIE' MCGINTY

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

Date of Disbursement

/ /

Transaction ID : EXPB5394

Amount of Each Disbursement this Period

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: CHARLES STIMSON

Candidate Name
KATHLEEN 'KATIE' MCGINTY

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

Date of Disbursement

/ /

Transaction ID : EXPB5400

Amount of Each Disbursement this Period

Memo Item

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

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 : EXPB5388

ERMK: JEANNE STILLMAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5394

ERMK: BARBARA CASE-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 : EXPB5400

ERMK: CHARLES STIMSON-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. KATIE MCGINTY FOR SENATE		Date of Disbursement MM / DD / YYYY 07 / 07 / 2016
Mailing Address PO BOX 22447		Transaction ID : EXPB5408
City PHILADELPHIA	State PA	
Purpose of Disbursement ERMK: CATHERINE SPAULDING		Amount of Each Disbursement this Period 5.00
Candidate Name KATHLEEN 'KATIE' MCGINTY		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA	District:	

Full Name (Last, First, Middle Initial) B. KATIE MCGINTY FOR SENATE		Date of Disbursement MM / DD / YYYY 07 / 07 / 2016
Mailing Address PO BOX 22447		Transaction ID : EXPB5415
City PHILADELPHIA	State PA	
Purpose of Disbursement ERMK: MAUREEN DILLON		Amount of Each Disbursement this Period 5.00
Candidate Name KATHLEEN 'KATIE' MCGINTY		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA	District:	

Full Name (Last, First, Middle Initial) C. KIRKPATRICK FOR SENATE		Date of Disbursement MM / DD / YYYY 07 / 07 / 2016
Mailing Address PO BOX 34421		Transaction ID : EXPB5357
City PHOENIX	State AZ	
Purpose of Disbursement ERMK: KAREN SILVERMAN		Amount of Each Disbursement this Period 1000.00
Candidate Name ANN KIRKPATRICK		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AZ	District:	

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

1010.00

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 : EXPB5408

ERMK: CATHERINE SPAULDING-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5415

ERMK: MAUREEN DILLON-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 : EXPB5357

ERMK: KAREN SILVERMAN-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. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City PHOENIX State AZ Zip Code 85067

Purpose of Disbursement
ERMK: S LEE

Candidate Name
ANN KIRKPATRICK

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: AZ District:

Date of Disbursement

/ /

Transaction ID : EXPB5358

Amount of Each Disbursement this Period

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: LAURA HELFMAN

Candidate Name
ANN KIRKPATRICK

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: AZ District:

Date of Disbursement

/ /

Transaction ID : EXPB5365

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City PHOENIX State AZ Zip Code 85067

Purpose of Disbursement
ERMK: GERRY JENNINGS

Candidate Name
ANN KIRKPATRICK

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: AZ District:

Date of Disbursement

/ /

Transaction ID : EXPB5373

Amount of Each Disbursement this Period

Memo Item

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

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

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

Form/Schedule: SB23

Transaction ID : EXPB5358

ERMK: S LEE-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5365

ERMK: LAURA HELFMAN-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 : EXPB5373

ERMK: GERRY JENNINGS-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. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City PHOENIX State AZ Zip Code 85067

Purpose of Disbursement
ERMK: DEBORAH LOPEZ

Candidate Name
ANN KIRKPATRICK

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: AZ District:

Date of Disbursement

/ /

Transaction ID : EXPB5379

Amount of Each Disbursement this Period

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: JUANITA CARRILLO

Candidate Name
ANN KIRKPATRICK

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: AZ District:

Date of Disbursement

/ /

Transaction ID : EXPB5385

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City PHOENIX State AZ Zip Code 85067

Purpose of Disbursement
ERMK: JEANNE STILLMAN

Candidate Name
ANN KIRKPATRICK

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: AZ District:

Date of Disbursement

/ /

Transaction ID : EXPB5386

Amount of Each Disbursement this Period

Memo Item

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

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 : EXPB5379

ERMK: DEBORAH LOPEZ-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5385

ERMK: JUANITA CARRILLO-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 : EXPB5386

ERMK: JEANNE STILLMAN-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. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City PHOENIX State AZ Zip Code 85067

Purpose of Disbursement
ERMK: BARBARA CASE

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 / D D / Y Y Y Y Y
07 / 07 / 2016

Transaction ID : EXPB5392

Amount of Each Disbursement this Period

10.00

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: CHARLES STIMSON

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 / D D / Y Y Y Y Y
07 / 07 / 2016

Transaction ID : EXPB5398

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

C. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City PHOENIX State AZ Zip Code 85067

Purpose of Disbursement
ERMK: CATHERINE SPAULDING

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 / D D / Y Y Y Y Y
07 / 07 / 2016

Transaction ID : EXPB5410

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 : EXPB5392

ERMK: BARBARA CASE-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5398

ERMK: CHARLES STIMSON-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 : EXPB5410

ERMK: CATHERINE SPAULDING-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. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City PHOENIX State AZ Zip Code 85067

Purpose of Disbursement
ERMK: CRAIG AUSTER

Candidate Name
ANN KIRKPATRICK

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: AZ District:

Date of Disbursement

/ /

Transaction ID : EXPB5412

Amount of Each Disbursement this Period

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: MAUREEN DILLON

Candidate Name
ANN KIRKPATRICK

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: AZ District:

Date of Disbursement

/ /

Transaction ID : EXPB5413

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City PHOENIX State AZ Zip Code 85067

Purpose of Disbursement
ERMK: STACY MASON

Candidate Name
ANN KIRKPATRICK

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: AZ District:

Date of Disbursement

/ /

Transaction ID : EXPB5420

Amount of Each Disbursement this Period

Memo Item

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

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 : EXPB5412

ERMK: CRAIG AUSTER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5413

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 : EXPB5420

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. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City State Zip Code
CONCORD NH 03302

Purpose of Disbursement
ERMK: S LEE

Candidate Name
MAGGIE HASSAN

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: NH District:

Date of Disbursement

/ /

Transaction ID : EXPB5361

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City State Zip Code
CONCORD NH 03302

Purpose of Disbursement
ERMK: LAURA HELFMAN

Candidate Name
MAGGIE HASSAN

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: NH District:

Date of Disbursement

/ /

Transaction ID : EXPB5369

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City State Zip Code
CONCORD NH 03302

Purpose of Disbursement
ERMK: GERRY JENNINGS

Candidate Name
MAGGIE HASSAN

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: NH District:

Date of Disbursement

/ /

Transaction ID : EXPB5376

Amount of Each Disbursement this Period

Memo Item

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

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 : EXPB5361

ERMK: S LEE-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5369

ERMK: LAURA HELFMAN-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 : EXPB5376

ERMK: GERRY JENNINGS-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. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City State Zip Code
CONCORD NH 03302

Purpose of Disbursement
ERMK: DEBORAH LOPEZ

Candidate Name
MAGGIE HASSAN

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: NH District:

Date of Disbursement

/ /

Transaction ID : EXPB5382

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City State Zip Code
CONCORD NH 03302

Purpose of Disbursement
ERMK: JEANNE STILLMAN

Candidate Name
MAGGIE HASSAN

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: NH District:

Date of Disbursement

/ /

Transaction ID : EXPB5389

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City State Zip Code
CONCORD NH 03302

Purpose of Disbursement
ERMK: BARBARA CASE

Candidate Name
MAGGIE HASSAN

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: NH District:

Date of Disbursement

/ /

Transaction ID : EXPB5395

Amount of Each Disbursement this Period

Memo Item

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

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 : EXPB5382

ERMK: DEBORAH LOPEZ-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5389

ERMK: JEANNE STILLMAN-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 : EXPB5395

ERMK: BARBARA CASE-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. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City State Zip Code
CONCORD NH 03302

Purpose of Disbursement
ERMK: CHARLES STIMSON

Candidate Name
MAGGIE HASSAN

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: NH District:

Date of Disbursement

/ /

Transaction ID : EXPB5401

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City State Zip Code
CONCORD NH 03302

Purpose of Disbursement
ERMK: CATHERINE SPAULDING

Candidate Name
MAGGIE HASSAN

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: NH District:

Date of Disbursement

/ /

Transaction ID : EXPB5407

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City State Zip Code
CONCORD NH 03302

Purpose of Disbursement
ERMK: MAUREEN DILLON

Candidate Name
MAGGIE HASSAN

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: NH District:

Date of Disbursement

/ /

Transaction ID : EXPB5416

Amount of Each Disbursement this Period

Memo Item

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

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

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

Form/Schedule: SB23

Transaction ID : EXPB5401

ERMK: CHARLES STIMSON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5407

ERMK: CATHERINE SPAULDING-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 : EXPB5416

ERMK: MAUREEN DILLON-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. PATTY JUDGE FOR IOWA		Date of Disbursement MM / DD / YYYY 07 / 07 / 2016	
Mailing Address 321 E WALNUT ST SUITE 201		Transaction ID : EXPB5363 Amount of Each Disbursement this Period 5.00 <input type="checkbox"/> Memo Item	
City DES MOINES	State IA		Zip Code 50309
Purpose of Disbursement ERMK: S LEE	Category/ Type		
Candidate Name PATTY JUDGE	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. PATTY JUDGE FOR IOWA		Date of Disbursement MM / DD / YYYY 07 / 07 / 2016	
Mailing Address 321 E WALNUT ST SUITE 201		Transaction ID : EXPB5367 Amount of Each Disbursement this Period 10.00 <input type="checkbox"/> Memo Item	
City DES MOINES	State IA		Zip Code 50309
Purpose of Disbursement ERMK: LAURA HELFMAN	Category/ Type		
Candidate Name PATTY JUDGE	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. PATTY JUDGE FOR IOWA		Date of Disbursement MM / DD / YYYY 07 / 07 / 2016	
Mailing Address 321 E WALNUT ST SUITE 201		Transaction ID : EXPB5378 Amount of Each Disbursement this Period 10.00 <input type="checkbox"/> Memo Item	
City DES MOINES	State IA		Zip Code 50309
Purpose of Disbursement ERMK: GERRY JENNINGS	Category/ Type		
Candidate Name PATTY JUDGE	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Disbursements This Page (optional).....▶	25.00
TOTAL This Period (last page this line number only).....▶	

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

Form/Schedule: SB23

Transaction ID : EXPB5363

ERMK: S LEE-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5367

ERMK: LAURA HELFMAN-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 : EXPB5378

ERMK: GERRY JENNINGS-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. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City DES MOINES State IA Zip Code 50309

Purpose of Disbursement
ERMK: DEBORAH LOPEZ

Candidate Name
PATTY JUDGE

Office Sought: House
 Senate
 President
State: IA District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : EXPB5384

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City DES MOINES State IA Zip Code 50309

Purpose of Disbursement
ERMK: JEANNE STILLMAN

Candidate Name
PATTY JUDGE

Office Sought: House
 Senate
 President
State: IA District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : EXPB5391

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City DES MOINES State IA Zip Code 50309

Purpose of Disbursement
ERMK: BARBARA CASE

Candidate Name
PATTY JUDGE

Office Sought: House
 Senate
 President
State: IA District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : EXPB5397

Amount of Each Disbursement this Period

Memo Item

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

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 : EXPB5384

ERMK: DEBORAH LOPEZ-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5391

ERMK: JEANNE STILLMAN-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 : EXPB5397

ERMK: BARBARA CASE-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. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City DES MOINES State IA Zip Code 50309

Purpose of Disbursement
ERMK: CHARLES STIMSON

Candidate Name
PATTY JUDGE

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: IA District:

Date of Disbursement

/ /

Transaction ID : EXPB5403

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City DES MOINES State IA Zip Code 50309

Purpose of Disbursement
ERMK: TERESA YOUNG

Candidate Name
PATTY JUDGE

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: IA District:

Date of Disbursement

/ /

Transaction ID : EXPB5404

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City DES MOINES State IA Zip Code 50309

Purpose of Disbursement
ERMK: CATHERINE SPAULDING

Candidate Name
PATTY JUDGE

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: IA District:

Date of Disbursement

/ /

Transaction ID : EXPB5405

Amount of Each Disbursement this Period

Memo Item

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

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 : EXPB5403

ERMK: CHARLES STIMSON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5404

ERMK: TERESA YOUNG-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 : EXPB5405

ERMK: CATHERINE SPAULDING-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. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City State Zip Code
DES MOINES IA 50309

Purpose of Disbursement
ERMK: MAUREEN DILLON

Candidate Name
PATTY JUDGE

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: IA District:

Date of Disbursement

/ /

Transaction ID : **EXPB5418**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City State Zip Code
SCHAUMBURG IL 60159

Purpose of Disbursement
ERMK: S LEE

Candidate Name
TAMMY DUCKWORTH

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: IL District:

Date of Disbursement

/ /

Transaction ID : **EXPB5359**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City State Zip Code
SCHAUMBURG IL 60159

Purpose of Disbursement
ERMK: LAURA HELFMAN

Candidate Name
TAMMY DUCKWORTH

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: IL District:

Date of Disbursement

/ /

Transaction ID : **EXPB5366**

Amount of Each Disbursement this Period

Memo Item

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

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

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

Form/Schedule: SB23

Transaction ID : EXPB5418

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

Form/Schedule: SB23

Transaction ID: EXPB5359

ERMK: S LEE-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 : EXPB5366

ERMK: LAURA HELFMAN-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: GERRY JENNINGS

Candidate Name
TAMMY DUCKWORTH

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: IL District:

Date of Disbursement

/ /

Transaction ID : EXPB5374

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City State Zip Code
SCHAUMBURG IL 60159

Purpose of Disbursement
ERMK: DEBORAH LOPEZ

Candidate Name
TAMMY DUCKWORTH

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: IL District:

Date of Disbursement

/ /

Transaction ID : EXPB5380

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City State Zip Code
SCHAUMBURG IL 60159

Purpose of Disbursement
ERMK: JEANNE STILLMAN

Candidate Name
TAMMY DUCKWORTH

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: IL District:

Date of Disbursement

/ /

Transaction ID : EXPB5387

Amount of Each Disbursement this Period

Memo Item

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

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 : EXPB5374

ERMK: GERRY JENNINGS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5380

ERMK: DEBORAH LOPEZ-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 : EXPB5387

ERMK: JEANNE STILLMAN-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		Date of Disbursement MM / DD / YYYY 07 / 07 / 2016
Mailing Address P.O. BOX 59568		Transaction ID : EXPB5393
City SCHAUMBURG	State IL	
Purpose of Disbursement ERMK: BARBARA CASE		Amount of Each Disbursement this Period 10.00
Candidate Name TAMMY DUCKWORTH		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL District:		

Full Name (Last, First, Middle Initial) B. TAMMY FOR ILLINOIS		Date of Disbursement MM / DD / YYYY 07 / 07 / 2016
Mailing Address P.O. BOX 59568		Transaction ID : EXPB5399
City SCHAUMBURG	State IL	
Purpose of Disbursement ERMK: CHARLES STIMSON		Amount of Each Disbursement this Period 5.00
Candidate Name TAMMY DUCKWORTH		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL District:		

Full Name (Last, First, Middle Initial) C. TAMMY FOR ILLINOIS		Date of Disbursement MM / DD / YYYY 07 / 07 / 2016
Mailing Address P.O. BOX 59568		Transaction ID : EXPB5409
City SCHAUMBURG	State IL	
Purpose of Disbursement ERMK: CATHERINE SPAULDING		Amount of Each Disbursement this Period 5.00
Candidate Name TAMMY DUCKWORTH		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL 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 : EXPB5393

ERMK: BARBARA CASE-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5399

ERMK: CHARLES STIMSON-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 : EXPB5409

ERMK: CATHERINE SPAULDING-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: MARCIA ADDY

Candidate Name
TAMMY DUCKWORTH

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

Date of Disbursement

/ /

Transaction ID : EXPB5411

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City State Zip Code
SCHAUMBURG IL 60159

Purpose of Disbursement
ERMK: MAUREEN DILLON

Candidate Name
TAMMY DUCKWORTH

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

Date of Disbursement

/ /

Transaction ID : EXPB5414

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City State Zip Code
SCHAUMBURG IL 60159

Purpose of Disbursement
ERMK: LOURNA YZAGUIRRE

Candidate Name
TAMMY DUCKWORTH

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

Date of Disbursement

/ /

Transaction ID : EXPB5422

Amount of Each Disbursement this Period

Memo Item

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

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

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

Form/Schedule: SB23

Transaction ID : EXPB5411

ERMK: MARCIA ADDY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5414

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 : EXPB5422

ERMK: LOURNA YZAGUIRRE-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. ANNA ESHOO FOR CONGRESS

Mailing Address 555 CAPITOL MALL, SUITE 1425

City State Zip Code
SACRAMENTO CA 95814

Purpose of Disbursement
ERMK: JACKIE WHISMAN

Candidate Name

ANNA ESHOO

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: CA District: 18

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 14 / 2016

Transaction ID : EXPB5826

Amount of Each Disbursement this Period

25.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CAIN FOR CONGRESS

Mailing Address PO BOX 1523

City State Zip Code
BANGOR ME 04402

Purpose of Disbursement
ERMK: LOIS TOEVS

Candidate Name

EMILY CAIN

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: ME District: 02

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 14 / 2016

Transaction ID : EXPB5818

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 State Zip Code
BANGOR ME 04402

Purpose of Disbursement
ERMK: JACKIE WHISMAN

Candidate Name

EMILY CAIN

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: ME District: 02

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 14 / 2016

Transaction ID : EXPB5827

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)..... ▶

80.00

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

Form/Schedule: SB23

Transaction ID : EXPB5826

ERMK: JACKIE WHISMAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5818

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 : EXPB5827

ERMK: JACKIE WHISMAN-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. 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

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

Date of Disbursement

/ /

Transaction ID : EXPB5819

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. CARROLL FOR COLORADO

Mailing Address PO BOX 470783

City AURORA State CO Zip Code 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

/ /

Transaction ID : EXPB5816

Amount of Each Disbursement this Period

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: BARBARA GRASSESCHI

Candidate Name
DEBORAH ROSS

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

Date of Disbursement

/ /

Transaction ID : EXPB5822

Amount of Each Disbursement this Period

Memo Item

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

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 : EXPB5819

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

Form/Schedule: SB23

Transaction ID: EXPB5816

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 : EXPB5822

ERMK: BARBARA GRASSESCHI-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: DOROTHY STRACHER

Candidate Name
DEBORAH ROSS

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: NC District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 14 / 2016

Transaction ID : EXPB5833

Amount of Each Disbursement this Period

5.00

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: ROBERT FUNK

Candidate Name
DEBORAH ROSS

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: NC District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 14 / 2016

Transaction ID : EXPB5839

Amount of Each Disbursement this Period

5.00

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: BEN KROMPAK

Candidate Name
DEBORAH ROSS

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: NC District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 14 / 2016

Transaction ID : EXPB5845

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)..... ▶

20.00

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

Form/Schedule: SB23

Transaction ID : EXPB5833

ERMK: DOROTHY STRACHER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5839

ERMK: ROBERT FUNK-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 : EXPB5845

ERMK: BEN KROMPAK-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: DANIELLE OLIVETO

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 / D D / Y Y Y Y Y
07 / 14 / 2016

Transaction ID : EXPB5851

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

B. DELBENE FOR CONGRESS

Mailing Address PO BOX 487

City BOTHELL State WA Zip Code 98041

Purpose of Disbursement
ERMK: JACKIE WHISMAN

Candidate Name
SUZAN DELBENE

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

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 14 / 2016

Transaction ID : EXPB5823

Amount of Each Disbursement this Period

75.00

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: LAURE WOODS

Candidate Name
KATHLEEN 'KATIE' MCGINTY

Office Sought: House
 Senate
 President
State: PA District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 14 / 2016

Transaction ID : EXPB5805

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)..... ▶

2785.00

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

Form/Schedule: SB23

Transaction ID : EXPB5851

ERMK: DANIELLE OLIVETO-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5823

ERMK: JACKIE WHISMAN-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 : EXPB5805

ERMK: LAURE WOODS-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. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City PHILADELPHIA State PA Zip Code 19110

Purpose of Disbursement
ERMK: DOROTHY STRACHER

Candidate Name
KATHLEEN 'KATIE' MCGINTY

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

Date of Disbursement

/ /

Transaction ID : **EXPB5831**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City PHILADELPHIA State PA Zip Code 19110

Purpose of Disbursement
ERMK: ROBERT FUNK

Candidate Name
KATHLEEN 'KATIE' MCGINTY

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

Date of Disbursement

/ /

Transaction ID : **EXPB5837**

Amount of Each Disbursement this Period

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: BEN KROMPAK

Candidate Name
KATHLEEN 'KATIE' MCGINTY

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

Date of Disbursement

/ /

Transaction ID : **EXPB5843**

Amount of Each Disbursement this Period

Memo Item

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

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 : EXPB5831

ERMK: DOROTHY STRACHER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5837

ERMK: ROBERT FUNK-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 : EXPB5843

ERMK: BEN KROMPAK-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. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City PHILADELPHIA State PA Zip Code 19110

Purpose of Disbursement
ERMK: DANIELLE OLIVETO

Candidate Name
KATHLEEN 'KATIE' MCGINTY

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

Date of Disbursement

/ /

Transaction ID : EXPB5849

Amount of Each Disbursement this Period

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: LISA DIAZ NASH

Candidate Name
ANN KIRKPATRICK

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

Date of Disbursement

/ /

Transaction ID : EXPB5828

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City PHOENIX State AZ Zip Code 85067

Purpose of Disbursement
ERMK: DOROTHY STRACHER

Candidate Name
ANN KIRKPATRICK

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

Date of Disbursement

/ /

Transaction ID : EXPB5829

Amount of Each Disbursement this Period

Memo Item

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

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 : EXPB5849

ERMK: DANIELLE OLIVETO-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5828

ERMK: LISA DIAZ NASH-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 : EXPB5829

ERMK: DOROTHY STRACHER-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. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City PHOENIX State AZ Zip Code 85067

Purpose of Disbursement
ERMK: ROBERT FUNK

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 / D D / Y Y Y Y Y
07 / 14 / 2016

Transaction ID : EXPB5835

Amount of Each Disbursement this Period

5.00

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: BEN KROMPAK

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 / D D / Y Y Y Y Y
07 / 14 / 2016

Transaction ID : EXPB5841

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

C. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City PHOENIX State AZ Zip Code 85067

Purpose of Disbursement
ERMK: DANIELLE OLIVETO

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 / D D / Y Y Y Y Y
07 / 14 / 2016

Transaction ID : EXPB5847

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)..... ▶

25.00

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

Form/Schedule: SB23

Transaction ID : EXPB5835

ERMK: ROBERT FUNK-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5841

ERMK: BEN KROMPAK-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 : EXPB5847

ERMK: DANIELLE OLIVETO-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. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City PHOENIX State AZ Zip Code 85067

Purpose of Disbursement
ERMK: LAURA POWELL

Candidate Name
ANN KIRKPATRICK

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: AZ District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 14 / 2016

Transaction ID : **EXPB5853**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. KYRSTEN SINEMA FOR CONGRESS

Mailing Address PO BOX 25879

City TEMPE State AZ Zip Code 85285

Purpose of Disbursement
ERMK: JACKIE WHISMAN

Candidate Name
KYRSTEN SINEMA

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: AZ District: 09

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 14 / 2016

Transaction ID : **EXPB5824**

Amount of Each Disbursement this Period

25.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City CONCORD State NH Zip Code 03302

Purpose of Disbursement
ERMK: DOROTHY STRACHER

Candidate Name
MAGGIE HASSAN

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: NH District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 14 / 2016

Transaction ID : **EXPB5832**

Amount of Each Disbursement this Period

5.00

Memo Item

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

1030.00

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

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

Form/Schedule: SB23

Transaction ID : EXPB5853

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

Form/Schedule: SB23

Transaction ID: EXPB5824

ERMK: JACKIE WHISMAN-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 : EXPB5832

ERMK: DOROTHY STRACHER-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. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City State Zip Code
CONCORD NH 03302

Purpose of Disbursement
ERMK: ROBERT FUNK

Candidate Name
MAGGIE HASSAN

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: NH District:

Date of Disbursement

/ /

Transaction ID : EXPB5838

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City State Zip Code
CONCORD NH 03302

Purpose of Disbursement
ERMK: BEN KROMPAK

Candidate Name
MAGGIE HASSAN

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: NH District:

Date of Disbursement

/ /

Transaction ID : EXPB5844

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City State Zip Code
CONCORD NH 03302

Purpose of Disbursement
ERMK: DANIELLE OLIVETO

Candidate Name
MAGGIE HASSAN

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: NH District:

Date of Disbursement

/ /

Transaction ID : EXPB5850

Amount of Each Disbursement this Period

Memo Item

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

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 : EXPB5838

ERMK: ROBERT FUNK-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5844

ERMK: BEN KROMPAK-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 : EXPB5850

ERMK: DANIELLE OLIVETO-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
07 / 14 / 2016

Transaction ID : **EXPB5820**

Amount of Each Disbursement this Period
5.00

Memo Item

Full Name (Last, First, Middle Initial)
B. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City DES MOINES State IA Zip Code 50309

Purpose of Disbursement
ERMK: DOROTHY STRACHER

Candidate Name
PATTY JUDGE

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

State: IA District:

Date of Disbursement
MM / DD / YYYY
07 / 14 / 2016

Transaction ID : **EXPB5834**

Amount of Each Disbursement this Period
5.00

Memo Item

Full Name (Last, First, Middle Initial)
C. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City DES MOINES State IA Zip Code 50309

Purpose of Disbursement
ERMK: ROBERT FUNK

Candidate Name
PATTY JUDGE

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

State: IA District:

Date of Disbursement
MM / DD / YYYY
07 / 14 / 2016

Transaction ID : **EXPB5840**

Amount of Each Disbursement this Period
5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 15.00

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

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

Form/Schedule: SB23

Transaction ID : EXPB5820

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

Form/Schedule: SB23

Transaction ID: EXPB5834

ERMK: DOROTHY STRACHER-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 : EXPB5840

ERMK: ROBERT FUNK-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. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City State Zip Code
DES MOINES IA 50309

Purpose of Disbursement
ERMK: BEN KROMPAK

Candidate Name
PATTY JUDGE

Office Sought: House
 Senate
 President
State: IA District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 14 / 2016

Transaction ID : EXPB5846

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

B. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City State Zip Code
DES MOINES IA 50309

Purpose of Disbursement
ERMK: DANIELLE OLIVETO

Candidate Name
PATTY JUDGE

Office Sought: House
 Senate
 President
State: IA District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 14 / 2016

Transaction ID : EXPB5852

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

C. PRAMILA FOR CONGRESS

Mailing Address PO BOX 20753

City State Zip Code
SEATTLE WA 98102

Purpose of Disbursement
ERMK: TERI VERSHEL

Candidate Name
PRAMILA JAYAPAL

Office Sought: House
 Senate
 President
State: WA District: 07

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 14 / 2016

Transaction ID : EXPB5808

Amount of Each Disbursement this Period

62.50

Memo Item

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

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

82.50

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

Form/Schedule: SB23

Transaction ID : EXPB5846

ERMK: BEN KROMPAK-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5852

ERMK: DANIELLE OLIVETO-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 : EXPB5808

ERMK: TERI VERSHEL-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. PRAMILA FOR CONGRESS

Mailing Address PO BOX 20753

City SEATTLE State WA Zip Code 98102

Purpose of Disbursement
ERMK: SUSAN HERNER

Candidate Name
PRAMILA JAYAPAL

Office Sought: House Senate President
State: WA District: 07
Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **EXPB5812**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. SUSAN DAVIS FOR CONGRESS

Mailing Address PO BOX 84049

City SAN DIEGO State CA Zip Code 92138

Purpose of Disbursement
ERMK: JACKIE WHISMAN

Candidate Name
SUSAN DAVIS

Office Sought: House Senate President
State: CA District: 53
Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **EXPB5825**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. SUSAN RANDOLPH FOR CONGRESS

Mailing Address PO BOX 533643

City ORLANDO State FL Zip Code 32853

Purpose of Disbursement
ERMK: TERI VERSHEL

Candidate Name
SUSAN RANDOLPH FOR CONGRESS

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

Date of Disbursement

/ /

Transaction ID : **EXPB5809**

Amount of Each Disbursement this Period

Memo Item

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

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

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

Form/Schedule: SB23

Transaction ID : EXPB5812

ERMK: SUSAN HERNER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5825

ERMK: JACKIE WHISMAN-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 : EXPB5809

ERMK: TERI VERSHEL-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 RANDOLPH FOR CONGRESS

Mailing Address PO BOX 533643

City ORLANDO State FL Zip Code 32853

Purpose of Disbursement
ERMK: SUSAN HERNER

Candidate Name
SUSAN RANDOLPH FOR CONGRESS

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

Date of Disbursement

/ /

Transaction ID : EXPB5813

Amount of Each Disbursement this Period

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: TERI VERSHEL

Candidate Name
ANNETTE TADDEO

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: FL District: 26

Date of Disbursement

/ /

Transaction ID : EXPB5811

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. TADDEO FOR CONGRESS

Mailing Address PO BOX 432094

City PO BOX 432094 State FL Zip Code 33243

Purpose of Disbursement
ERMK: SUSAN HERNER

Candidate Name
ANNETTE TADDEO

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: FL District: 26

Date of Disbursement

/ /

Transaction ID : EXPB5815

Amount of Each Disbursement this Period

Memo Item

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

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 : EXPB5813

ERMK: SUSAN HERNER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5811

ERMK: TERI VERSHEL-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 : EXPB5815

ERMK: SUSAN HERNER-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. 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

M M / D D / Y Y Y Y Y Y
07 / 14 / 2016

Transaction ID : **EXPB5821**

Amount of Each Disbursement this Period

5.00

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: DOROTHY STRACHER

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 / D D / Y Y Y Y Y Y
07 / 14 / 2016

Transaction ID : **EXPB5830**

Amount of Each Disbursement this Period

5.00

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: ROBERT FUNK

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 / D D / Y Y Y Y Y Y
07 / 14 / 2016

Transaction ID : **EXPB5836**

Amount of Each Disbursement this Period

5.00

Memo Item

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

15.00

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 : EXPB5821

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

Form/Schedule: SB23

Transaction ID: EXPB5830

ERMK: DOROTHY STRACHER-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 : EXPB5836

ERMK: ROBERT FUNK-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: BEN KROMPAK

Candidate Name
TAMMY DUCKWORTH

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

Date of Disbursement

MM / DD / YYYY
07 / 14 / 2016

Transaction ID : **EXPB5842**

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

B. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City State Zip Code
SCHAUMBURG IL 60159

Purpose of Disbursement
ERMK: DANIELLE OLIVETO

Candidate Name
TAMMY DUCKWORTH

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

Date of Disbursement

MM / DD / YYYY
07 / 14 / 2016

Transaction ID : **EXPB5848**

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address PO BOX 536926

City State Zip Code
ORLAND FL 32853

Purpose of Disbursement
ERMK: TERI VERSHEL

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
07 / 14 / 2016

Transaction ID : **EXPB5810**

Amount of Each Disbursement this Period

62.50

Memo Item

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

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

82.50

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

Form/Schedule: SB23

Transaction ID : EXPB5842

ERMK: BEN KROMPAK-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5848

ERMK: DANIELLE OLIVETO-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 : EXPB5810

ERMK: TERI VERSHEL-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: SUSAN HERNER

Candidate Name
VAL DEMINGS

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

Date of Disbursement

/ /

Transaction ID : **EXPB5814**

Amount of Each Disbursement this Period

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: LOIS TOEVS

Candidate Name
VAL DEMINGS

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

Date of Disbursement

/ /

Transaction ID : **EXPB5817**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. CATHERINE CORTEZ MASTO FOR SENATE

Mailing Address 8020 SOUTH RAINBOW BLVD. SUITE 100

City LAS VEGAS State NV Zip Code 89139

Purpose of Disbursement
ERMK: LAURE WOODS

Candidate Name
CATHERINE CORTEZ MASTO

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

Date of Disbursement

/ /

Transaction ID : **EXPB5804**

Amount of Each Disbursement this Period

Memo Item

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

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 : EXPB5814

ERMK: SUSAN HERNER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5817

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 : EXPB5804

ERMK: LAURE WOODS-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: ANNE BARRY

Candidate Name
DEBORAH ROSS

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

Date of Disbursement

/ /

Transaction ID : EXPB5780

Amount of Each Disbursement this Period

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: THERESA RADER-WILSON

Candidate Name
DEBORAH ROSS

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

Date of Disbursement

/ /

Transaction ID : EXPB5787

Amount of Each Disbursement this Period

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: ALISSA WARNER

Candidate Name
DEBORAH ROSS

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

Date of Disbursement

/ /

Transaction ID : EXPB5794

Amount of Each Disbursement this Period

Memo Item

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

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 : EXPB5780

ERMK: ANNE BARRY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5787

ERMK: THERESA RADER-WILSON-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 : EXPB5794

ERMK: ALISSA WARNER-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: MELANIE WYLER

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 / D D / Y Y Y Y Y
07 / 20 / 2016

Transaction ID : EXPB5800

Amount of Each Disbursement this Period

17.86

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: LAURE WOODS

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 / D D / Y Y Y Y Y
07 / 20 / 2016

Transaction ID : EXPB5806

Amount of Each Disbursement this Period

2700.00

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: THERESA RADER-WILSON

Candidate Name
HILLARY RODHAM CLINTON

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 20 / 2016

Transaction ID : EXPB5788

Amount of Each Disbursement this Period

100.00

Memo Item

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

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

2817.86

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

Form/Schedule: SB23

Transaction ID : EXPB5800

ERMK: MELANIE WYLER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5806

ERMK: LAURE WOODS-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 : EXPB5788

ERMK: THERESA RADER-WILSON-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 NEW YORK State NY Zip Code 10185

Purpose of Disbursement
ERMK: KENLYN MIRBACH

Candidate Name
HILLARY RODHAM CLINTON

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
07 / 20 / 2016

Transaction ID : EXPB5803

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

B. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City PHILADELPHIA State PA Zip Code 19110

Purpose of Disbursement
ERMK: ANNE BARRY

Candidate Name
KATHLEEN 'KATIE' MCGINTY

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 20 / 2016

Transaction ID : EXPB5779

Amount of Each Disbursement this Period

25.00

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: THERESA RADER-WILSON

Candidate Name
KATHLEEN 'KATIE' MCGINTY

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 20 / 2016

Transaction ID : EXPB5786

Amount of Each Disbursement this Period

20.00

Memo Item

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

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

55.00

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

Form/Schedule: SB23

Transaction ID : EXPB5803

ERMK: KENLYN MIRBACH-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5779

ERMK: ANNE BARRY-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 : EXPB5786

ERMK: THERESA RADER-WILSON-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. KATIE MCGINTY FOR SENATE		Date of Disbursement MM / DD / YYYY 07 / 20 / 2016
Mailing Address PO BOX 22447		Transaction ID : EXPB5793
City PHILADELPHIA	State PA	
Purpose of Disbursement ERMK: ALISSA WARNER		Amount of Each Disbursement this Period 5.00
Candidate Name KATHLEEN 'KATIE' MCGINTY		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA	District:	

Full Name (Last, First, Middle Initial) B. KATIE MCGINTY FOR SENATE		Date of Disbursement MM / DD / YYYY 07 / 20 / 2016
Mailing Address PO BOX 22447		Transaction ID : EXPB5799
City PHILADELPHIA	State PA	
Purpose of Disbursement ERMK: MELANIE WYLER		Amount of Each Disbursement this Period 17.86
Candidate Name KATHLEEN 'KATIE' MCGINTY		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA	District:	

Full Name (Last, First, Middle Initial) C. KIRKPATRICK FOR SENATE		Date of Disbursement MM / DD / YYYY 07 / 20 / 2016
Mailing Address PO BOX 34421		Transaction ID : EXPB5778
City PHOENIX	State AZ	
Purpose of Disbursement ERMK: ANNE BARRY		Amount of Each Disbursement this Period 25.00
Candidate Name ANN KIRKPATRICK		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AZ	District:	

SUBTOTAL of Disbursements This Page (optional)..... ▶	47.86
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 : EXPB5793

ERMK: ALISSA WARNER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5799

ERMK: MELANIE WYLER-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 : EXPB5778

ERMK: ANNE BARRY-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. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City PHOENIX State AZ Zip Code 85067

Purpose of Disbursement
ERMK: LISA HNIG

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 / D D / Y Y Y Y Y
07 / 20 / 2016

Transaction ID : EXPB5781

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: THERESA RADER-WILSON

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 / D D / Y Y Y Y Y
07 / 20 / 2016

Transaction ID : EXPB5785

Amount of Each Disbursement this Period

20.00

Memo Item

Full Name (Last, First, Middle Initial)

C. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City PHOENIX State AZ Zip Code 85067

Purpose of Disbursement
ERMK: ALISSA WARNER

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 / D D / Y Y Y Y Y
07 / 20 / 2016

Transaction ID : EXPB5792

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)..... ▶

1025.00

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

Form/Schedule: SB23

Transaction ID : EXPB5781

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

Form/Schedule: SB23

Transaction ID: EXPB5785

ERMK: THERESA RADER-WILSON-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 : EXPB5792

ERMK: ALISSA WARNER-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. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City PHOENIX State AZ Zip Code 85067

Purpose of Disbursement
ERMK: MELANIE WYLER

Candidate Name
ANN KIRKPATRICK

Office Sought: House
 Senate
 President
State: AZ District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 20 / 2016

Transaction ID : EXPB5798

Amount of Each Disbursement this Period

17.86

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: DALE SCHROEDEL

Candidate Name
ANN KIRKPATRICK

Office Sought: House
 Senate
 President
State: AZ District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 20 / 2016

Transaction ID : EXPB5801

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City PHOENIX State AZ Zip Code 85067

Purpose of Disbursement
ERMK: MARTHA EHMANN CONTE

Candidate Name
ANN KIRKPATRICK

Office Sought: House
 Senate
 President
State: AZ District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 20 / 2016

Transaction ID : EXPB5802

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)..... ▶

2017.86

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

Form/Schedule: SB23

Transaction ID : EXPB5798

ERMK: MELANIE WYLER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5801

ERMK: DALE SCHROEDEL-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 : EXPB5802

ERMK: MARTHA EHMANN CONTE-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. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City PHOENIX State AZ Zip Code 85067

Purpose of Disbursement
ERMK: LAURE WOODS

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 / D D / Y Y Y Y Y
07 / 20 / 2016

Transaction ID : **EXPB5807**

Amount of Each Disbursement this Period

2700.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City CONCORD State NH Zip Code 03302

Purpose of Disbursement
ERMK: ANNE BARRY

Candidate Name
MAGGIE HASSAN

Office Sought: House
 Senate
 President
State: NH District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 20 / 2016

Transaction ID : **EXPB5776**

Amount of Each Disbursement this Period

25.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City CONCORD State NH Zip Code 03302

Purpose of Disbursement
ERMK: THERESA RADER-WILSON

Candidate Name
MAGGIE HASSAN

Office Sought: House
 Senate
 President
State: NH District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 20 / 2016

Transaction ID : **EXPB5783**

Amount of Each Disbursement this Period

20.00

Memo Item

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

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

2745.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFH`ZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : EXPB5807

ERMK: LAURE WOODS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5776

ERMK: ANNE BARRY-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 : EXPB5783

ERMK: THERESA RADER-WILSON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

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

Form/Schedule: SB23

Transaction ID : EXPB5790

ERMK: ALISSA WARNER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5796

ERMK: MELANIE WYLER-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 : EXPB5777

ERMK: ANNE BARRY-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. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City DES MOINES State IA Zip Code 50309

Purpose of Disbursement
ERMK: THERESA RADER-WILSON

Candidate Name
PATTY JUDGE

Office Sought: House
 Senate
 President
State: IA District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : EXPB5784

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City DES MOINES State IA Zip Code 50309

Purpose of Disbursement
ERMK: ALISSA WARNER

Candidate Name
PATTY JUDGE

Office Sought: House
 Senate
 President
State: IA District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : EXPB5791

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City DES MOINES State IA Zip Code 50309

Purpose of Disbursement
ERMK: MELANIE WYLER

Candidate Name
PATTY JUDGE

Office Sought: House
 Senate
 President
State: IA District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : EXPB5797

Amount of Each Disbursement this Period

Memo Item

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

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

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

Form/Schedule: SB23

Transaction ID : EXPB5784

ERMK: THERESA RADER-WILSON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5791

ERMK: ALISSA WARNER-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 : EXPB5797

ERMK: MELANIE WYLER-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: ANNE BARRY

Candidate Name
TAMMY DUCKWORTH

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

Date of Disbursement

/ /

Transaction ID : EXPB5775

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City State Zip Code
SCHAUMBURG IL 60159

Purpose of Disbursement
ERMK: THERESA RADER-WILSON

Candidate Name
TAMMY DUCKWORTH

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

Date of Disbursement

/ /

Transaction ID : EXPB5782

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City State Zip Code
SCHAUMBURG IL 60159

Purpose of Disbursement
ERMK: ALISSA WARNER

Candidate Name
TAMMY DUCKWORTH

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

Date of Disbursement

/ /

Transaction ID : EXPB5789

Amount of Each Disbursement this Period

Memo Item

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

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 : EXPB5775

ERMK: ANNE BARRY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5782

ERMK: THERESA RADER-WILSON-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 : EXPB5789

ERMK: ALISSA WARNER-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: MELANIE WYLER

Candidate Name
TAMMY DUCKWORTH

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 20 / 2016

Transaction ID : EXPB5795

Amount of Each Disbursement this Period

17.86

Memo Item

Full Name (Last, First, Middle Initial)

B. CAIN FOR CONGRESS

Mailing Address PO BOX 1523

City State Zip Code
BANGOR ME 04402

Purpose of Disbursement
ERMK: LOIS TOEVS

Candidate Name
EMILY CAIN

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: ME District: 02

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 28 / 2016

Transaction ID : EXPB5759

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 State Zip Code
ROCHESTER NH 03866

Purpose of Disbursement
ERMK: LOIS TOEVS

Candidate Name
CAROL SHEA PORTER

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 28 / 2016

Transaction ID : EXPB5760

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)..... ▶

27.86

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

Form/Schedule: SB23

Transaction ID : EXPB5795

ERMK: MELANIE WYLER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5759

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 : EXPB5760

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

M M / D D / Y Y Y Y Y Y
07 / 28 / 2016

Transaction ID : EXPB5757

Amount of Each Disbursement this Period

5.00

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: DEBORAH WEXLER

Candidate Name
DEBORAH ROSS

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 28 / 2016

Transaction ID : EXPB5749

Amount of Each Disbursement this Period

100.00

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: MARILYN WACKS

Candidate Name
DEBORAH ROSS

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 28 / 2016

Transaction ID : EXPB5754

Amount of Each Disbursement this Period

54.00

Memo Item

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

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

159.00

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

Form/Schedule: SB23

Transaction ID : EXPB5757

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

Form/Schedule: SB23

Transaction ID: EXPB5749

ERMK: DEBORAH WEXLER-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 : EXPB5754

ERMK: MARILYN WACKS-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: LYNETTE POIRIER

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 / D D / Y Y Y Y Y Y
07 / 28 / 2016

Transaction ID : EXPB5768

Amount of Each Disbursement this Period

10.00

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: THERESA PARIS

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 / D D / Y Y Y Y Y Y
07 / 28 / 2016

Transaction ID : EXPB5774

Amount of Each Disbursement this Period

10.00

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: MARILYN WACKS

Candidate Name
HILLARY RODHAM CLINTON

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 28 / 2016

Transaction ID : EXPB5756

Amount of Each Disbursement this Period

54.00

Memo Item

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

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

74.00

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

Form/Schedule: SB23

Transaction ID : EXPB5768

ERMK: LYNETTE POIRIER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5774

ERMK: THERESA PARIS-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 : EXPB5756

ERMK: MARILYN WACKS-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. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City PHILADELPHIA State PA Zip Code 19110

Purpose of Disbursement
ERMK: DEBORAH WEXLER

Candidate Name
KATHLEEN 'KATIE' MCGINTY

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

Date of Disbursement

/ /

Transaction ID : EXPB5748

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City PHILADELPHIA State PA Zip Code 19110

Purpose of Disbursement
ERMK: MARILYN WACKS

Candidate Name
KATHLEEN 'KATIE' MCGINTY

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

Date of Disbursement

/ /

Transaction ID : EXPB5752

Amount of Each Disbursement this Period

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: LYNETTE POIRIER

Candidate Name
KATHLEEN 'KATIE' MCGINTY

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

Date of Disbursement

/ /

Transaction ID : EXPB5767

Amount of Each Disbursement this Period

Memo Item

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

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 : EXPB5748

ERMK: DEBORAH WEXLER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5752

ERMK: MARILYN WACKS-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 : EXPB5767

ERMK: LYNETTE POIRIER-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. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City PHILADELPHIA State PA Zip Code 19110

Purpose of Disbursement
ERMK: THERESA PARIS

Candidate Name
KATHLEEN 'KATIE' MCGINTY

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

Date of Disbursement

/ /

Transaction ID : **EXPB5773**

Amount of Each Disbursement this Period

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: DEBORAH WEXLER

Candidate Name
ANN KIRKPATRICK

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

Date of Disbursement

/ /

Transaction ID : **EXPB5747**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City PHOENIX State AZ Zip Code 85067

Purpose of Disbursement
ERMK: MARILYN WACKS

Candidate Name
ANN KIRKPATRICK

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

Date of Disbursement

/ /

Transaction ID : **EXPB5750**

Amount of Each Disbursement this Period

Memo Item

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

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

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

Form/Schedule: SB23

Transaction ID : EXPB5773

ERMK: THERESA PARIS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5747

ERMK: DEBORAH WEXLER-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 : EXPB5750

ERMK: MARILYN WACKS-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. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City PHOENIX State AZ Zip Code 85067

Purpose of Disbursement
ERMK: LYNETTE POIRIER

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 / D D / Y Y Y Y Y
07 / 28 / 2016

Transaction ID : EXPB5766

Amount of Each Disbursement this Period

10.00

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: THERESA PARIS

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 / D D / Y Y Y Y Y
07 / 28 / 2016

Transaction ID : EXPB5772

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City CONCORD State NH Zip Code 03302

Purpose of Disbursement
ERMK: DEBORAH WEXLER

Candidate Name
MAGGIE HASSAN

Office Sought: House
 Senate
 President
State: NH District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 28 / 2016

Transaction ID : EXPB5745

Amount of Each Disbursement this Period

100.00

Memo Item

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

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

120.00

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

Form/Schedule: SB23

Transaction ID : EXPB5766

ERMK: LYNETTE POIRIER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5772

ERMK: THERESA PARIS-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 : EXPB5745

ERMK: DEBORAH WEXLER-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. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City State Zip Code
CONCORD NH 03302

Purpose of Disbursement
ERMK: MARILYN WACKS

Candidate Name
MAGGIE HASSAN

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: NH District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	8			2	0	1	6		

Transaction ID : EXPB5753

Amount of Each Disbursement this Period

5	4	.	0	0
---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

B. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City State Zip Code
CONCORD NH 03302

Purpose of Disbursement
ERMK: LYNETTE POIRIER

Candidate Name
MAGGIE HASSAN

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: NH District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	8			2	0	1	6		

Transaction ID : EXPB5764

Amount of Each Disbursement this Period

1	0	.	0	0
---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

C. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City State Zip Code
CONCORD NH 03302

Purpose of Disbursement
ERMK: THERESA PARIS

Candidate Name
MAGGIE HASSAN

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: NH District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	8			2	0	1	6		

Transaction ID : EXPB5770

Amount of Each Disbursement this Period

1	0	.	0	0
---	---	---	---	---

Memo Item

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

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

7	4	.	0	0
---	---	---	---	---

7	4	.	0	0
---	---	---	---	---

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

Form/Schedule: SB23

Transaction ID : EXPB5753

ERMK: MARILYN WACKS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5764

ERMK: LYNETTE POIRIER-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 : EXPB5770

ERMK: THERESA PARIS-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

/ /

Transaction ID : EXPB5761

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City DES MOINES State IA Zip Code 50309

Purpose of Disbursement
ERMK: DEBORAH WEXLER

Candidate Name
PATTY JUDGE

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

Date of Disbursement

/ /

Transaction ID : EXPB5746

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City DES MOINES State IA Zip Code 50309

Purpose of Disbursement
ERMK: MARILYN WACKS

Candidate Name
PATTY JUDGE

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

Date of Disbursement

/ /

Transaction ID : EXPB5755

Amount of Each Disbursement this Period

Memo Item

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

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 : EXPB5761

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

Form/Schedule: SB23

Transaction ID: EXPB5746

ERMK: DEBORAH WEXLER-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 : EXPB5755

ERMK: MARILYN WACKS-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. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City State Zip Code
DES MOINES IA 50309

Purpose of Disbursement
ERMK: LYNETTE POIRIER

Candidate Name
PATTY JUDGE

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

Date of Disbursement

/ /

Transaction ID : **EXPB5765**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City State Zip Code
DES MOINES IA 50309

Purpose of Disbursement
ERMK: THERESA PARIS

Candidate Name
PATTY JUDGE

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

Date of Disbursement

/ /

Transaction ID : **EXPB5771**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. TADDEO FOR CONGRESS

Mailing Address PO BOX 432094

City State Zip Code
PO BOX 432094 FL 33243

Purpose of Disbursement
ERMK: LOIS TOEVS

Candidate Name
ANNETTE TADDEO

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: FL District: 26

Date of Disbursement

/ /

Transaction ID : **EXPB5762**

Amount of Each Disbursement this Period

Memo Item

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

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 : EXPB5765

ERMK: LYNETTE POIRIER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5771

ERMK: THERESA PARIS-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 : EXPB5762

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. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City State Zip Code
SCHAUMBURG IL 60159

Purpose of Disbursement
ERMK: DEBORAH WEXLER

Candidate Name
TAMMY DUCKWORTH

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 28 / 2016

Transaction ID : EXPB5744

Amount of Each Disbursement this Period

100.00

Memo Item

Full Name (Last, First, Middle Initial)

B. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City State Zip Code
SCHAUMBURG IL 60159

Purpose of Disbursement
ERMK: MARILYN WACKS

Candidate Name
TAMMY DUCKWORTH

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 28 / 2016

Transaction ID : EXPB5751

Amount of Each Disbursement this Period

54.00

Memo Item

Full Name (Last, First, Middle Initial)

C. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City State Zip Code
SCHAUMBURG IL 60159

Purpose of Disbursement
ERMK: LYNETTE POIRIER

Candidate Name
TAMMY DUCKWORTH

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 28 / 2016

Transaction ID : EXPB5763

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)..... ▶

164.00

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

Form/Schedule: SB23

Transaction ID : EXPB5744

ERMK: DEBORAH WEXLER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5751

ERMK: MARILYN WACKS-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 : EXPB5763

ERMK: LYNETTE POIRIER-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: THERESA PARIS

Candidate Name
TAMMY DUCKWORTH

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 28 / 2016

Transaction ID : EXPB5769

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address PO BOX 536926

City State Zip Code
ORLAND FL 32853

Purpose of Disbursement
ERMK: LOIS TOEVS

Candidate Name
VAL DEMINGS

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 28 / 2016

Transaction ID : EXPB5758

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

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)..... ▶

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

15.00

23640.16

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

Form/Schedule: SB23

Transaction ID : EXPB5769

ERMK: THERESA PARIS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB5758

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 291 OF 293
	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 MEGHAN HARVEY	Nature of Debt (Purpose): SOCIAL MEDIA COMMUNICATIONS
Mailing Address 5425 CHARLOTTE WAY	
City State Zip Code LIVERMORE CA 94550	

Outstanding Balance Beginning This Period 0.00	Transaction ID : PAYD6382	
Amount Incurred This Period 12.50	Payment This Period 0.00	Outstanding Balance at Close of This Period 12.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor MEGHAN HARVEY	Nature of Debt (Purpose): SOCIAL MEDIA COMMUNICATIONS
Mailing Address 5425 CHARLOTTE WAY	
City State Zip Code LIVERMORE CA 94550	

Outstanding Balance Beginning This Period 0.00	Transaction ID : PAYD6383	
Amount Incurred This Period 6.25	Payment This Period 0.00	Outstanding Balance at Close of This Period 6.25

1) SUBTOTALS This Period This Page (optional)..... ▶	1323.75
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 292 OF 293
	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 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 2400.98	Transaction ID : PAYD3915	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2400.98

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 1921.47	Transaction ID : PAYD4072	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1921.47

C. 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 1470.00	Transaction ID : PAYD4441	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1470.00

1) SUBTOTALS This Period This Page (optional)..... ▶	5792.45
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 293 OF 293
	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 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 1182.50	Transaction ID : PAYD5200	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1182.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ▶	1182.50
2) TOTALS This Period (last page this line number only)..... ▶	8298.70
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) ▶	8298.70