



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Women Vote Smart

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="5670.00"/>	<input type="text" value="5670.00"/>
(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="5670.00"/>	<input type="text" value="5670.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1356.24"/>	<input type="text" value="1356.24"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="4313.76"/>	<input type="text" value="4313.76"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="16659.63"/>	

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)

Write or Type Committee Name

**Women Vote Smart**

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
01 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y  
06 / 30 / 2016

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2000.00	2000.00
(ii) Unitemized .....	3670.00	3670.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5670.00	5670.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	5670.00	5670.00
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	0.00
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))..... ▶	5670.00	5670.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	5670.00	5670.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	1356.24	1356.24
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	1356.24	1356.24
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1356.24	1356.24
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1356.24	1356.24

**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) .....	5670.00	5670.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5670.00	5670.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	1356.24	1356.24
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1356.24	1356.24

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 13
	<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)  
**Women Vote Smart**

**A. Tawanda Smith**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7655 President St  
 City Fulton State MD Zip Code 20759  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer IntelligentFiscalOptimalSolutions Occupation Founder  
 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  
 06 / 09 / 2016  
**Transaction ID : INCA11**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**B. Larry LaRoy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2808 E Morgan Ave  
 City Evansville State IN Zip Code 47711  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LaRoy Tax Service Occupation Accountant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 16 / 2016  
**Transaction ID : INCA53**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. Fern Treely**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 69 ROCKLAND ST  
 City Malone State NY Zip Code 12953  
 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 ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 19 / 2016  
**Transaction ID : INCA73**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2000.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)  
**Women Vote Smart**

Full Name (Last, First, Middle Initial)

**A. Anedot**

Mailing Address 10202 Perkins Rowe. Suite 2006

City Baton Rouge State LA Zip Code 70810

Purpose of Disbursement Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 06 / 11 / 2016

Transaction ID : EXPB85

Amount of Each Disbursement this Period: 86.53

Memo Item

Category/Type: 001

Full Name (Last, First, Middle Initial)

**B. Bank of America**

Mailing Address 300 E Main Street

City Norfolk State VA Zip Code 23510

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 06 / 15 / 2016

Transaction ID : EXPB102

Amount of Each Disbursement this Period: 25.00

Memo Item

Category/Type: 001

Full Name (Last, First, Middle Initial)

**C. Anedot**

Mailing Address 10202 Perkins Rowe. Suite 2006

City Baton Rouge State LA Zip Code 70810

Purpose of Disbursement Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 06 / 20 / 2016

Transaction ID : EXPB99

Amount of Each Disbursement this Period: 1.77

Memo Item

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 113.30

**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)  
**Women Vote Smart**

Full Name (Last, First, Middle Initial)

**A. J Chandler LLC**

Mailing Address 339 Woodlawn Drive

City Cedartown State GA Zip Code 30125

Purpose of Disbursement  
Social Media Management

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

**Transaction ID : EXPB82**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Anedot**

Mailing Address 10202 Perkins Rowe. Suite 2006

City Baton Rouge State LA Zip Code 70810

Purpose of Disbursement  
Credit Card Processing Fees

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

**Transaction ID : EXPB98**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Anedot**

Mailing Address 10202 Perkins Rowe. Suite 2006

City Baton Rouge State LA Zip Code 70810

Purpose of Disbursement  
Credit Card Processing Fees

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

**Transaction ID : EXPB108**

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)  
**Women Vote Smart**

**A. Anedot**

Full Name (Last, First, Middle Initial)

Mailing Address 10202 Perkins Rowe. Suite 2006

City Baton Rouge State LA Zip Code 70810

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
06 / 24 / 2016

Transaction ID : **EXPB119**

Amount of Each Disbursement this Period: 13.12

Memo Item

**B. Anedot**

Full Name (Last, First, Middle Initial)

Mailing Address 10202 Perkins Rowe. Suite 2006

City Baton Rouge State LA Zip Code 70810

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
06 / 28 / 2016

Transaction ID : **EXPB130**

Amount of Each Disbursement this Period: 2.65

Memo Item

**C. Anedot**

Full Name (Last, First, Middle Initial)

Mailing Address 10202 Perkins Rowe. Suite 2006

City Baton Rouge State LA Zip Code 70810

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
06 / 30 / 2016

Transaction ID : **EXPB146**

Amount of Each Disbursement this Period: 6.46

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 22.23

**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)  
**Women Vote Smart**

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Mailing Address 300 E Main Street

City Norfolk State VA Zip Code 23510

Purpose of Disbursement  
Check Printing Costs

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : EXPB153**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Memo Item

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

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

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 11 OF 13
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Women Vote Smart**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Campaign Compliance Group Inc</b>	Nature of Debt (Purpose): Financial Analyst
Mailing Address 300 Spectrum Center Drive, #400	
City State Zip Code Irvine CA 92618	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : PAYD79</b>	
Amount Incurred This Period 1500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Cook Craig &amp; Francuzenko PLLC</b>	Nature of Debt (Purpose): Legal Services
Mailing Address 3050 Chain Bridge Road, #200	
City State Zip Code Fairfax VA 22030	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : PAYD77</b>	
Amount Incurred This Period 1229.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1229.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Envision Marketing</b>	Nature of Debt (Purpose): Fundraising Email Costs
Mailing Address 148 Graves Mill Road	
City State Zip Code Lynchburg VA 24502	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : PAYD125</b>	
Amount Incurred This Period 2810.41	Payment This Period 0.00	Outstanding Balance at Close of This Period 2810.41

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	5539.41
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> 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 12 OF 13
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Women Vote Smart**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>J Chandler LLC</b>	Nature of Debt (Purpose): Social Media Management
Mailing Address 339 Woodlawn Drive	
City State Zip Code Cedartown GA 30125	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : PAYD76</b>	
Amount Incurred This Period 2550.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2550.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Amy Kremer</b>	Nature of Debt (Purpose): PAC Fundraising Web Costs
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : PAYD101</b>	
Amount Incurred This Period 367.59	Payment This Period 0.00	Outstanding Balance at Close of This Period 367.59

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Kathryn Serkes</b>	Nature of Debt (Purpose): Legal Retainer Costs
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : PAYD81</b>	
Amount Incurred This Period 1250.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1250.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	4167.59
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> 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 13 OF 13
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Women Vote Smart**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>The Liberty Lab Inc</b>	Nature of Debt (Purpose): Website Design
Mailing Address 4020 Villa Ravello	
City State Zip Code Yorba Linda CA 92886	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : PAYD78</b>	
Amount Incurred This Period 3525.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3525.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>The Liberty Lab Inc</b>	Nature of Debt (Purpose): Website Design Costs
Mailing Address 4020 Villa Ravello	
City State Zip Code Yorba Linda CA 92886	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : PAYD124</b>	
Amount Incurred This Period 2126.25	Payment This Period 0.00	Outstanding Balance at Close of This Period 2126.25

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Total Direct Response LLC</b>	Nature of Debt (Purpose): Fundraising Email Costs & Supplies
Mailing Address 695 N Glebe Road	
City State Zip Code Montross VA 22520	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : PAYD126</b>	
Amount Incurred This Period 1301.38	Payment This Period 0.00	Outstanding Balance at Close of This Period 1301.38

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	6952.63
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	16659.63
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	16659.63