

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.
Washington Women for Choice

ADDRESS (number and street)

 Check if different than previously reported. (ACC)

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

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the: Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day **POST-Election** Report for the: General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / through / /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Tracy Newman

Signature of Treasurer Tracy Newman [Electronically Filed] Date / /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Washington Women for Choice

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="2015"/>		2188.27
(b) Cash on Hand at Beginning of Reporting Period.....	2188.27	
(c) Total Receipts (from Line 19)	46500.00	46500.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	48688.27	48688.27
7. Total Disbursements (from Line 31).....	26955.90	26955.90
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	21732.37	21732.37
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

Washington Women for Choice

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2015 To: M M / D D / Y Y Y Y 06 / 30 / 2015

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).....	46500.00	46500.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	46500.00	46500.00
(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)	46500.00	46500.00
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))..... ▶	46500.00	46500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	46500.00	46500.00

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	1955.90	1955.90
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1955.90	1955.90
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25000.00	25000.00
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)) ..	26955.90	26955.90
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	26955.90	26955.90

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)	46500.00	46500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	46500.00	46500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1955.90	1955.90
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1955.90	1955.90

**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 18
	<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)
Washington Women for Choice

A. Theiline Cramer
Full Name (Last, First, Middle Initial)
Mailing Address 265 Maiden Ln E
City Seattle State WA Zip Code 98112
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 **5000.00**

Date of Receipt **01 / 23 / 2015**
Transaction ID : SA11AI.4345
Amount of Each Receipt this Period **5000.00**
Contribution

B. Karen Criddle
Full Name (Last, First, Middle Initial)
Mailing Address 9403 26th Street
City Bellevue State WA Zip Code 98004
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 **2500.00**

Date of Receipt **04 / 28 / 2015**
Transaction ID : SA11AI.4356
Amount of Each Receipt this Period **2500.00**
Contribution

C. Sonya Erickson
Full Name (Last, First, Middle Initial)
Mailing Address 714 W Galer St
City Seattle State WA Zip Code 98119
FEC ID number of contributing federal political committee. **C**
Name of Employer Cooley LLP Occupation Attorney
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **1000.00**

Date of Receipt **01 / 16 / 2015**
Transaction ID : SA11AI.4343
Amount of Each Receipt this Period **1000.00**
Contribution

SUBTOTAL of Receipts This Page (optional)..... **8500.00**
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 7 OF 18
	(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)
Washington Women for Choice

Full Name (Last, First, Middle Initial) A. Kathryn Kelly			Date of Receipt MM / DD / YYYY 05 / 11 / 2015 Transaction ID : SA11AI.4358
Mailing Address PO Box 95197			Amount of Each Receipt this Period 1000.00
City Seattle	State WA	Zip Code 98145	Contribution
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer University of Washington	Occupation Scientist	Contribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	Contribution	

Full Name (Last, First, Middle Initial) B. Anne Kroeker			Date of Receipt MM / DD / YYYY 05 / 11 / 2015 Transaction ID : SA11AI.4357
Mailing Address 227 Bellevue Way NE			Amount of Each Receipt this Period 5000.00
City Bellevue	State WA	Zip Code 98004	Contribution
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer None	Occupation Community Volunteer	Contribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	Contribution	

Full Name (Last, First, Middle Initial) C. Ruth Lipscomb			Date of Receipt MM / DD / YYYY 01 / 09 / 2015 Transaction ID : SA11AI.4340
Mailing Address 103 Cascade Key			Amount of Each Receipt this Period 1000.00
City Bellevue	State WA	Zip Code 98006	Contribution
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Self	Occupation Investor	Contribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	Contribution	

SUBTOTAL of Receipts This Page (optional).....▶	7000.00
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 18
	<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)
Washington Women for Choice

A. Penny Miller
 Full Name (Last, First, Middle Initial)
 Mailing Address 15941 252nd Ave SE
 City Issaquah State WA Zip Code 98027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Woodland Park Zoo Occupation Assistant Registrar
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **01 / 07 / 2015**
Transaction ID : SA11AI.4339
 Amount of Each Receipt this Period **1000.00**
 Contribution

B. Judith Nicastro
 Full Name (Last, First, Middle Initial)
 Mailing Address 4010 Woodland Park Avenue N
 City Seattle State WA Zip Code 96103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University of Washington Occupation Communications
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2500.00**

Date of Receipt **01 / 13 / 2015**
Transaction ID : SA11AI.4342
 Amount of Each Receipt this Period **2500.00**
 Contribution

C. Carol Pencke
 Full Name (Last, First, Middle Initial)
 Mailing Address 918 W Emerson St
 City Seattle State WA Zip Code 98119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Non-Profit Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **03 / 27 / 2015**
Transaction ID : SA11AI.4355
 Amount of Each Receipt this Period **1000.00**
 Contribution

SUBTOTAL of Receipts This Page (optional).....	4500.00
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 18
	(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)
Washington Women for Choice

A. Linden Rhoades
Full Name (Last, First, Middle Initial)
Mailing Address 1212 39th Ave E
City Seattle State WA Zip Code 98112
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Investor
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **5000.00**

Date of Receipt **01 / 13 / 2015**
Transaction ID : SA11AI.4341
Amount of Each Receipt this Period **5000.00**
Contribution

B. Roberta Riley
Full Name (Last, First, Middle Initial)
Mailing Address 1116 Grand Avenue
City Seattle State WA Zip Code 98122-3516
FEC ID number of contributing federal political committee. **C**
Name of Employer Planned Parenthood Occupation Attorney
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **3500.00**

Date of Receipt **02 / 11 / 2015**
Transaction ID : SA11AI.4350
Amount of Each Receipt this Period **3500.00**
Contribution

C. Jennifer Robers
Full Name (Last, First, Middle Initial)
Mailing Address 3914 48th PI NE
City Seattle State WA Zip Code 98105
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Events Coordinator
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **2500.00**

Date of Receipt **02 / 21 / 2015**
Transaction ID : SA11AI.4351
Amount of Each Receipt this Period **2500.00**
Contribution

SUBTOTAL of Receipts This Page (optional)..... **11000.00**
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 10 OF 18
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Washington Women for Choice

A. Sara Robinson
 Full Name (Last, First, Middle Initial)
 Mailing Address 4242 NE 89th St
 City Seattle State WA Zip Code 98115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Investor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 02 / 10 / 2015
Transaction ID : SA11AI.4348
 Amount of Each Receipt this Period 2500.00
 Contribution

B. Evelyn Rozner
 Full Name (Last, First, Middle Initial)
 Mailing Address 1500 4th Avenue
 City Seattle State WA Zip Code 98101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 02 / 06 / 2015
Transaction ID : SA11AI.4347
 Amount of Each Receipt this Period 2500.00
 Contribution

C. Donna Sakson
 Full Name (Last, First, Middle Initial)
 Mailing Address 1154 Federal Avenue East
 City Seattle State WA Zip Code 98102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sakson & Taylor Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 02 / 10 / 2015
Transaction ID : SA11AI.4349
 Amount of Each Receipt this Period 2500.00
 Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 7500.00
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 18
	<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)
Washington Women for Choice

A. Irene Saraf
 Full Name (Last, First, Middle Initial)
 Mailing Address 924 36th Ave
 City Seattle State WA Zip Code 98122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Homemaker
 Receipt For: Primary General Other (specify)

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 23 / 2015
Transaction ID : SA11AI.4354
 Amount of Each Receipt this Period
 2500.00
 Contribution

B. Kathryn Strong
 Full Name (Last, First, Middle Initial)
 Mailing Address 1188 Harvard Ave E
 City Seattle State WA Zip Code 98102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Retired
 Receipt For: Primary General Other (specify)

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 22 / 2015
Transaction ID : SA11AI.4353
 Amount of Each Receipt this Period
 2500.00
 Contribution

C. Valerie Tarico
 Full Name (Last, First, Middle Initial)
 Mailing Address 1220 10th Avenue East
 City Seattle State WA Zip Code 98102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Psychologist
 Receipt For: Primary General Other (specify)

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 29 / 2015
Transaction ID : SA11AI.4346
 Amount of Each Receipt this Period
 1000.00
 Contribution

SUBTOTAL of Receipts This Page (optional).....	6000.00
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 12 OF 18
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Washington Women for Choice

A. Julie Weed
 Full Name (Last, First, Middle Initial)
 Mailing Address 1217 Federal Avenue E.
 City Seattle State WA Zip Code 98102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Freelance Writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 17 / 2015
Transaction ID : SA11AI.4344
 Amount of Each Receipt this Period
 2000.00
 Contribution

B.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	46500.00

**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)

Washington Women for Choice

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Credit Card Processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 05 / 2015

Transaction ID : SB21B.4375

Amount of Each Disbursement this Period

231.65

Full Name (Last, First, Middle Initial)

B. Network Merchants Inc

Mailing Address 201 Main Street

City Roselle State IL Zip Code 60172

Purpose of Disbursement
Credit Card Processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 02 / 2015

Transaction ID : SB21B.4376

Amount of Each Disbursement this Period

309.83

Full Name (Last, First, Middle Initial)

C. Network Merchants Inc

Mailing Address 201 Main Street

City Roselle State IL Zip Code 60172

Purpose of Disbursement
Credit Card Processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 05 / 2015

Transaction ID : SB21B.4377

Amount of Each Disbursement this Period

39.90

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

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

581.38

**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)
Washington Women for Choice

Full Name (Last, First, Middle Initial)

A. Network Merchants Inc

Mailing Address 201 Main Street

City Roselle State IL Zip Code 60172

Purpose of Disbursement
Credit Card Processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 02 / 2015

Transaction ID : **SB21B.4378**

Amount of Each Disbursement this Period

487.09

Full Name (Last, First, Middle Initial)

B. Network Merchants Inc

Mailing Address 201 Main Street

City Roselle State IL Zip Code 60172

Purpose of Disbursement
Credit Card Processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 09 / 2015

Transaction ID : **SB21B.4379**

Amount of Each Disbursement this Period

38.85

Full Name (Last, First, Middle Initial)

C. Network Merchants Inc

Mailing Address 201 Main Street

City Roselle State IL Zip Code 60172

Purpose of Disbursement
Credit Card Processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 02 / 2015

Transaction ID : **SB21B.4380**

Amount of Each Disbursement this Period

14.99

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

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

540.93

**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)
Washington Women for Choice

A. Network Merchants Inc

Full Name (Last, First, Middle Initial)

Mailing Address 201 Main Street

City Roselle State IL Zip Code 60172

Purpose of Disbursement Credit Card Processing

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 02 / 2015

Transaction ID : **SB21B.4381**

Amount of Each Disbursement this Period: 35.00

Category/Type

B. Network Merchants Inc

Full Name (Last, First, Middle Initial)

Mailing Address 201 Main Street

City Roselle State IL Zip Code 60172

Purpose of Disbursement Credit Card Processing

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 04 / 2015

Transaction ID : **SB21B.4382**

Amount of Each Disbursement this Period: 89.04

Category/Type

C. Network Merchants Inc

Full Name (Last, First, Middle Initial)

Mailing Address 201 Main Street

City Roselle State IL Zip Code 60172

Purpose of Disbursement Credit Card Processing

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 08 / 2015

Transaction ID : **SB21B.4383**

Amount of Each Disbursement this Period: 36.05

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... ▶ 160.09

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)
Washington Women for Choice

Full Name (Last, First, Middle Initial)

A. Network Merchants Inc

Mailing Address 201 Main Street

City Roselle State IL Zip Code 60172

Purpose of Disbursement
Credit Card Processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 08 / 2015

Transaction ID : **SB21B.4384**

Amount of Each Disbursement this Period

35.00

Full Name (Last, First, Middle Initial)

B. Project Accounting Services

Mailing Address 603 Stewart St Ste 819

City Seattle State WA Zip Code 98101

Purpose of Disbursement
Accounting/Compliance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 08 / 2015

Transaction ID : **SB21B.4385**

Amount of Each Disbursement this Period

384.00

Full Name (Last, First, Middle Initial)

C. Project Accounting Services

Mailing Address 603 Stewart St Ste 819

City Seattle State WA Zip Code 98101

Purpose of Disbursement
Accounting/Compliance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 10 / 2015

Transaction ID : **SB21B.4386**

Amount of Each Disbursement this Period

205.50

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

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

624.50

1906.90

**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)
Washington Women for Choice

Full Name (Last, First, Middle Initial)

A. HILLARY FOR AMERICA

Mailing Address PO BOX 5256

City NEW YORK State NY Zip Code 10185

Purpose of Disbursement
Contribution

Candidate Name
HILLARY RODHAM CLINTON

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District: 00

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2015

Transaction ID : SB23.4369

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. MISSOURIANS FOR KANDER

Mailing Address PO BOX 548

City COLUMBIA State MO Zip Code 65205

Purpose of Disbursement
Contribution

Candidate Name
JASON KANDER

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: MO District: 00

Date of Disbursement

MM / DD / YYYY
05 / 19 / 2015

Transaction ID : SB23.4365

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. MISSOURIANS FOR KANDER

Mailing Address PO BOX 548

City COLUMBIA State MO Zip Code 65205

Purpose of Disbursement
Contribution

Candidate Name
JASON KANDER

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: MO District: 00

Date of Disbursement

MM / DD / YYYY
05 / 19 / 2015

Transaction ID : SB23.4368

Amount of Each Disbursement this Period

5000.00

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

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

15000.00

**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 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)
Washington Women for Choice

Full Name (Last, First, Middle Initial)

A. PEOPLE FOR PATTY MURRAY U S SENATE CAMPAIGN

Mailing Address PO BOX 3662

City SEATTLE State WA Zip Code 98124

Purpose of Disbursement
Contribution

Candidate Name
PATTY MURRAY

Office Sought: House
 Senate
 President
State: WA District: 00

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2015

Transaction ID : SB23.4360

Amount of Each Disbursement this Period

5000.00

Category/
Type

Full Name (Last, First, Middle Initial)

B. PEOPLE FOR PATTY MURRAY U S SENATE CAMPAIGN

Mailing Address PO BOX 3662

City SEATTLE State WA Zip Code 98124

Purpose of Disbursement
Contribution

Candidate Name
PATTY MURRAY

Office Sought: House
 Senate
 President
State: WA District: 00

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2015

Transaction ID : SB23.4367

Amount of Each Disbursement this Period

5000.00

Category/
Type

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Category/
Type

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

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

10000.00

25000.00