

# 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**  
**WOMEN4US, INC.**

ADDRESS (number and street) **700 PENNSYLVANIA AVE., SE**  
**STE 200**  
 Check if different than previously reported. (ACC) **WASHINGTON DC 20003**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00884239** 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  /  /  2024 through  /  /  2024

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 **McCauley, Mike, , ,**

Signature of Treasurer **McCauley, Mike, , ,** Date  /  /  2024

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

WOMEN4US, INC.

Report Covering the Period: From: 07 / 01 / 2024 To: 09 / 30 / 2024

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2024		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	0.00	
(c) Total Receipts (from Line 19) .....	643798.45	643798.45
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	643798.45	643798.45
7. Total Disbursements (from Line 31).....	431956.49	431956.49
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	211841.96	211841.96
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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 the Federal Election Commission at 800-424-9530 or visit www.fec.gov

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**WOMEN4US, INC.**

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).....	553650.00	553650.00
(ii) Unitemized .....	3440.00	3440.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	557090.00	557090.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	86708.45	86708.45
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	643798.45	643798.45
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)).....▶	643798.45	643798.45
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	643798.45	643798.45

**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 .....	171956.49	171956.49
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	171956.49	171956.49
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) .....	260000.00	260000.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	431956.49	431956.49
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	431956.49	431956.49

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	643798.45	643798.45
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	643798.45	643798.45
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	171956.49	171956.49
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	171956.49	171956.49

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 6 OF 30
(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)  
**WOMEN4US, INC.**

**A. Beidler, Francis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20 Stonegate Rd  
 City Forest State IL Zip Code 60045  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 04 / 2024  
**Transaction ID : SA11AI.4627**  
 Amount of Each Receipt this Period  
 4000.00  
 Memo Item  
 Receipt

**B. Birch, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9836 Reeder Street  
 City Overland Park State KS Zip Code 66214  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) retired Occupation (for Individual) retired  
 Receipt For: 2024  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  
 09 / 16 / 2024  
**Transaction ID : SA11AI.4516**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
 Receipt

**C. Cobb, Steve, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 49 Park Avenue  
 D  
 City Dayton State OH Zip Code 45419  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) retired Occupation (for Individual) retired  
 Receipt For: 2024  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 18 / 2024  
**Transaction ID : SA11AI.4576**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item  
 Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....	9500.00
<b>TOTAL</b> 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 7 OF 30
<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)  
**WOMEN4US, INC.**

**A. Corio, Christopher, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3433 Divisadero St  
 City San Francisco State CA Zip Code 94123  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Engineered Care Inc. Occupation (for Individual) CEO  
 Receipt For: 2024  
 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  
 08 / 13 / 2024  
**Transaction ID : SA11AI.4549**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 Receipt

**B. Crotty, Rebecca, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3600 SW Randolph Square Unit 11  
 City Topeka State KS Zip Code 66611  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) retired Occupation (for Individual) retired  
 Receipt For: 2024  
 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  
 08 / 15 / 2024  
**Transaction ID : SA11AI.4548**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
 Receipt

**C. Dochen, Carol, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5010 North Rim Drive  
 City Austin State TX Zip Code 78731  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Dochen Realty Group Occupation (for Individual) Realtor  
 Receipt For: 2024  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2024  
**Transaction ID : SA11AI.4584**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<b>TOTAL</b> 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 30
	<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)  
**WOMEN4US, INC.**

**A. Garlinghouse, Matt, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 300 La Cuesta Drive  
 City Portola Valley State CA Zip Code 94028  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Energy Asset Developer  
 Receipt For: 2024  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt  
 09 / 24 / 2024  
**Transaction ID : SA11AI.4510**  
 Amount of Each Receipt this Period 4000.00  
 Memo Item  
 Receipt

**B. Glenn, Nancy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 314 Bolton Ln  
 City Downingtown State PA Zip Code 19335  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) self employed Occupation (for Individual) real estate agent  
 Receipt For: 2024  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 08 / 06 / 2024  
**Transaction ID : SA11AI.4557**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Receipt

**C. Greene, Michelle, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2828 Broadway 8c  
 City New York State NY Zip Code 10025  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Homemaker Occupation (for Individual) Homemaker  
 Receipt For: 2024  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 09 / 30 / 2024  
**Transaction ID : SA11AI.4509**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 9 OF 30
Use separate schedule(s) for each category of the Detailed Summary Page
FOR LINE NUMBER: (check only one)
[X] 11a 11b 11c 12
13 14 15 16 17

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NAME OF COMMITTEE (In Full)
WOMEN4US, INC.

A. Hill, Angus, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 405 Manor Ridge Drive Northwest
City Atlanta State GA Zip Code 30305
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Sunrise Occupation (for Individual) Manager
Receipt For: 2024
Primary [ ] General [X] Other (specify) [ ]
Aggregate Year-to-Date 250.00

Date of Receipt 09 / 30 / 2024
Transaction ID : SA11AI.4508
Amount of Each Receipt this Period 250.00
Memo Item [ ]
Receipt

B. Hoffman, Reid, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1415 Commercial Ave. #105
City Anacortes State WA Zip Code 98221
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Graylock Occupation (for Individual) Partner
Receipt For:
Primary [ ] General [ ] Other (specify) [ ]
Aggregate Year-to-Date 250000.00

Date of Receipt 07 / 29 / 2024
Transaction ID : SA11AI.4588
Amount of Each Receipt this Period 250000.00
Memo Item [ ]
Receipt

C. Hoffman, Reid, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1415 Commercial Ave. #105
City Anacortes State WA Zip Code 98221
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Graylock Occupation (for Individual) Partner
Receipt For:
Primary [ ] General [ ] Other (specify) [ ]
Aggregate Year-to-Date 518000.00

Date of Receipt 09 / 25 / 2024
Transaction ID : SA11AI.4626
Amount of Each Receipt this Period 268000.00
Memo Item [ ]
Receipt

SUBTOTAL of Receipts This Page (optional)..... 518250.00
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 30
	<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)  
**WOMEN4US, INC.**

**A. Hurt, Brett, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9102 Atwater Cove  
 City Austin State TX Zip Code 78733  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) data.world Occupation (for Individual) CEO  
 Receipt For: 2024  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 08 / 19 / 2024  
**Transaction ID : SA11AI.4542**  
 Amount of Each Receipt this Period 1800.00  
 Memo Item  
 Receipt

**B. Jaffe, Donna, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1411 Edith Street  
 City Berkeley State CA Zip Code 94703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) retired Occupation (for Individual) retired  
 Receipt For: 2024  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 19 / 2024  
**Transaction ID : SA11AI.4513**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Receipt

**C. Kleinbrodt, Peter, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14 Ranch Road  
 City San Rafael State CA Zip Code 94903  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Freitas Law Firm, LLP Occupation (for Individual) Partner  
 Receipt For: 2024  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 27 / 2024  
**Transaction ID : SA11AI.4529**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2300.00
<b>TOTAL</b> 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 30
	<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)  
**WOMEN4US, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Levy, Marcia, , ,</b>			Date of Receipt MM / DD / YYYY 09 / 12 / 2024 <b>Transaction ID : SA11AI.4520</b>
Mailing Address 4000 Enclave Mesa Circle			Amount of Each Receipt this Period 250.00
City Austin	State TX	Zip Code 78731	<input type="checkbox"/> Memo Item Receipt
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 250.00	
Name of Employer (for Individual) retired		Occupation (for Individual) retired	
Receipt For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Mainsah, Evaristus, , ,</b>			Date of Receipt MM / DD / YYYY 08 / 06 / 2024 <b>Transaction ID : SA11AI.4559</b>
Mailing Address 11 Pebble Beach Drive			Amount of Each Receipt this Period 250.00
City Harrison	State NY	Zip Code 10577	<input type="checkbox"/> Memo Item Receipt
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 250.00	
Name of Employer (for Individual) Amazon		Occupation (for Individual) HR	
Receipt For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Manus, Jillian, , ,</b>			Date of Receipt MM / DD / YYYY 08 / 05 / 2024 <b>Transaction ID : SA11AI.4562</b>
Mailing Address 1001 California St 4			Amount of Each Receipt this Period 1000.00
City San Francisco	State CA	Zip Code 94108	<input type="checkbox"/> Memo Item Receipt
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 1000.00	
Name of Employer (for Individual) Structure Capital		Occupation (for Individual) Venture Capitalist	
Receipt For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<b>TOTAL</b> 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 30
	<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)  
**WOMEN4US, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Mathieson, Patrick, , ,</b>		Date of Receipt MM / DD / YYYY 09 / 20 / 2024 <b>Transaction ID : SA11AI.4511</b>
Mailing Address 700 Bridle Path Drive		Amount of Each Receipt this Period 2000.00
City Wexford	State PA	Zip Code 15090
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Receipt
Name of Employer (for Individual) Toba Capital	Occupation (for Individual) Investor	
Receipt For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Mcgettigan, Elizabeth, , ,</b>		Date of Receipt MM / DD / YYYY 08 / 27 / 2024 <b>Transaction ID : SA11AI.4531</b>
Mailing Address 17 Donegal Lane		Amount of Each Receipt this Period 250.00
City Downingtown	State PA	Zip Code 19335
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Receipt
Name of Employer (for Individual) Homemaker	Occupation (for Individual) Homemaker	
Receipt For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Metrick, Maryfrances, , ,</b>		Date of Receipt MM / DD / YYYY 08 / 12 / 2024 <b>Transaction ID : SA11AI.4551</b>
Mailing Address 267 Ivy Hill Rd		Amount of Each Receipt this Period 1000.00
City Ridgefield	State CT	Zip Code 06877
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Receipt
Name of Employer (for Individual) retired	Occupation (for Individual) retired	
Receipt For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3250.00
<b>TOTAL</b> 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 30
	<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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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)  
**WOMEN4US, INC.**

**A. Meyers, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 116 Estabrook Road  
 City Concord State MA Zip Code 01742  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Eastern Reasearch Group, Inc. Occupation (for Individual) President  
 Receipt For: 2024  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 30 / 2024  
**Transaction ID : SA11AI.4567**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item  
 Receipt

**B. Morriss, Anne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22 Fayerweather St.  
 City Cambridge State MA Zip Code 02138  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Morriss Group Occupation (for Individual) Consultant  
 Receipt For: 2024  
 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  
 09 / 12 / 2024  
**Transaction ID : SA11AI.4519**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 Receipt

**C. Nasaw, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 336 Bon Air Center, Greenbrae CA 9 #140  
 City Greenbrae State CA Zip Code 94904  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) retired Occupation (for Individual) retired  
 Receipt For: 2024  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 20 / 2024  
**Transaction ID : SA11AI.4540**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item  
 Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 30
	<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)  
**WOMEN4US, INC.**

**A. Rice, Brian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1150 North Ave  
 City Bannockburn State IL Zip Code 60015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Rice dairy Occupation (for Individual) Broker  
 Receipt For: 2024  
 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 / 22 / 2024  
**Transaction ID : SA11AI.4574**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 Receipt

**B. Rice, Brian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1150 North Ave  
 City Bannockburn State IL Zip Code 60015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Rice dairy Occupation (for Individual) Broker  
 Receipt For: 2024  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 06 / 2024  
**Transaction ID : SA11AI.4526**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 Receipt

**C. Roth, Carla, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 336 Bon Air Center #140  
 City Greenbrae State CA Zip Code 94904  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) retired Occupation (for Individual) retired  
 Receipt For: 2024  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 20 / 2024  
**Transaction ID : SA11AI.4539**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item  
 Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4500.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 30
	<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

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)  
**WOMEN4US, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Weinbach, Joanne, , ,</b>		Date of Receipt MM / DD / YYYY 09 / 16 / 2024 <b>Transaction ID : SA11AI.4517</b>
Mailing Address 13879 Le Mans Way		Amount of Each Receipt this Period 500.00
City Palm Beach Gardens	State FL	Zip Code 33410
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Receipt
Name of Employer (for Individual) retired	Occupation (for Individual) retired	
Receipt For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Whipple, Katherine, , ,</b>		Date of Receipt MM / DD / YYYY 07 / 29 / 2024 <b>Transaction ID : SA11AI.4570</b>
Mailing Address 37 Pond Lane		Amount of Each Receipt this Period 250.00
City Southampton	State NY	Zip Code 11968
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Receipt
Name of Employer (for Individual) Self	Occupation (for Individual) Artist	
Receipt For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Whipple, Katherine, , ,</b>		Date of Receipt MM / DD / YYYY 09 / 30 / 2024 <b>Transaction ID : SA11AI.4507</b>
Mailing Address 37 Pond Lane		Amount of Each Receipt this Period 100.00
City Southampton	State NY	Zip Code 11968
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Receipt
Name of Employer (for Individual) Self	Occupation (for Individual) Artist	
Receipt For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	850.00
<b>TOTAL</b> 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 30
(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)  
**WOMEN4US, INC.**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
whitcomb, juliet, , ,

Mailing Address 2700 Broadway St.

City San Francisco	State CA	Zip Code 94115
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) retired	Occupation (for Individual) retired
--	--

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
09		12		2024

**Transaction ID : SA11AI.4521**

Amount of Each Receipt this Period  
1000.00

Memo Item Receipt

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

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

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

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

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

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

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	553650.00



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 30
<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)  
**WOMEN4US, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. ONE FOR ALL COMMITTEE**

Mailing Address **PO BOX 33079**

City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20033</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C C00752691**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**6708.45**

Date of Receipt  
**08 / 09 / 2024**

**Transaction ID : SA11C.4633**

Amount of Each Receipt this Period  
**6708.45**

Memo Item  
In-kind - Digital Advertising

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. ONE FOR ALL COMMITTEE**

Mailing Address **PO BOX 33079**

City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20033</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C C00752691**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**36708.45**

Date of Receipt  
**08 / 14 / 2024**

**Transaction ID : SA11C.4635**

Amount of Each Receipt this Period  
**30000.00**

Memo Item  
In-kind - Digital Advertising

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. ONE FOR ALL COMMITTEE**

Mailing Address **PO BOX 33079**

City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20033</b>
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FEC ID number of contributing federal political committee. **C C00752691**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
**46708.45**

Date of Receipt  
**08 / 15 / 2024**

**Transaction ID : SA11C.4636**

Amount of Each Receipt this Period  
**10000.00**

Memo Item  
In-kind - Digital Advertising

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>46708.45</b>
<b>TOTAL</b> 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 30
<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)  
**WOMEN4US, INC.**

**A. ONE FOR ALL COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO BOX 33079

City WASHINGTON	State DC	Zip Code 20033
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00752691

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
56708.45

Date of Receipt: 08 / 26 / 2024  
**Transaction ID : SA11C.4637**

Amount of Each Receipt this Period: 10000.00

Memo Item  
In-kind - Digital advertising

**B. ONE FOR ALL COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO BOX 33079

City WASHINGTON	State DC	Zip Code 20033
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00752691

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
66708.45

Date of Receipt: 09 / 06 / 2024  
**Transaction ID : SA11C.4638**

Amount of Each Receipt this Period: 10000.00

Memo Item  
In-kind - Digital Advertising

**C. ONE FOR ALL COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO BOX 33079

City WASHINGTON	State DC	Zip Code 20033
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00752691

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
76708.45

Date of Receipt: 09 / 11 / 2024  
**Transaction ID : SA11C.4639**

Amount of Each Receipt this Period: 10000.00

Memo Item  
In-kind - Digital Advertising

<b>SUBTOTAL</b> of Receipts This Page (optional).....	30000.00
<b>TOTAL</b> 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 30
<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)  
**WOMEN4US, INC.**

**A. ONE FOR ALL COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 33079

City WASHINGTON	State DC	Zip Code 20033
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FEC ID number of contributing federal political committee. **C** C00752691

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
86708.45

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2024

**Transaction ID : SA11C.4640**

Amount of Each Receipt this Period  
10000.00

Memo Item  
In-kind - Digital Advertising

**B.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

**C.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10000.00
<b>TOTAL</b> This Period (last page this line number only).....	86708.45

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)

Form for line numbers 21b through 30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
WOMEN4US, INC.

Form A: Airbnb. Includes fields for Full Name, Mailing Address (888 Brannan St), City (San Francisco), State (CA), Zip Code (94103), Purpose of Disbursement (Travel - Hotel), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (09/13/2024), FEC Identification Number (C), Transaction ID (SB21B.4605), Amount of Each Disbursement (1059.88), and Memo Item checkbox.

Form B: American Airlines. Includes fields for Full Name, Mailing Address (PO box 619616), City (Dallas), State (TX), Zip Code (75261), Purpose of Disbursement (Travel - Airfare), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (09/13/2024), FEC Identification Number (C), Transaction ID (SB21B.4602), Amount of Each Disbursement (356.96), and Memo Item checkbox.

Form C: American Airlines. Includes fields for Full Name, Mailing Address (PO box 619616), City (Dallas), State (TX), Zip Code (75261), Purpose of Disbursement (Travel - Airfare), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (09/13/2024), FEC Identification Number (C), Transaction ID (SB21B.4604), Amount of Each Disbursement (408.94), and Memo Item checkbox.

SUBTOTAL of Disbursements This Page (optional) 1825.78
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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)  
**WOMEN4US, INC.**

Full Name (Last, First, Middle Initial) <b>A. Anedot, Inc</b>		Date of Disbursement MM / DD / YYYY 09 / 30 / 2024	
Mailing Address 1340 Poydras Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4631</b>	
City New Orleans	State LA	Zip Code 70112	Amount of Each Disbursement this Period [ ] 2301.68
Purpose of Disbursement Merchant fees		Category/ Type [ ]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Corinna Schutte Creative LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 15 / 2024	
Mailing Address 255 West 2700 North		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4599</b>	
City Pleasant View	State UT	Zip Code 84414	Amount of Each Disbursement this Period [ ] 4000.00
Purpose of Disbursement Creative Services		Category/ Type [ ]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Corinna Schutte Creative LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 20 / 2024	
Mailing Address 255 West 2700 North		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4625</b>	
City Pleasant View	State UT	Zip Code 84414	Amount of Each Disbursement this Period [ ] 4000.00
Purpose of Disbursement Creative Services		Category/ Type [ ]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 10301.68
<b>TOTAL</b> 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"/> 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)  
**WOMEN4US, INC.**

**A. James Lynch Communications**

Full Name (Last, First, Middle Initial)

Mailing Address 544 Warren St.

City Scotch Plains State NJ Zip Code 07076

Purpose of Disbursement Strategic Communications consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 19 / 2024

FEC Identification Number: C

Transaction ID : SB21B.4619

Amount of Each Disbursement this Period: 7000.00

Memo Item

**B. Jennifer Horn**

Full Name (Last, First, Middle Initial)

Mailing Address 20108 Sea Glass Circle

City Land O Lakes State FL Zip Code 34638

Purpose of Disbursement Communications Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 14 / 2024

FEC Identification Number: C

Transaction ID : SB21B.4597

Amount of Each Disbursement this Period: 5000.00

Memo Item

**C. Jennifer Horn**

Full Name (Last, First, Middle Initial)

Mailing Address 20108 Sea Glass Circle

City Land O Lakes State FL Zip Code 34638

Purpose of Disbursement Communications Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 04 / 2024

FEC Identification Number: C

Transaction ID : SB21B.4593

Amount of Each Disbursement this Period: 5000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 17000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)  
**WOMEN4US, INC.**

**A. Jennifer Horn**

Full Name (Last, First, Middle Initial)

Mailing Address 20108 Sea Glass Circle

City Land O Lakes State FL Zip Code 34638

Purpose of Disbursement  
Communications Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
09 / 19 / 2024

FEC Identification Number: C  
Transaction ID : SB21B.4621

Amount of Each Disbursement this Period: 10000.00

Memo Item

**B. Lyft, Inc**

Full Name (Last, First, Middle Initial)

Mailing Address 185 Berry St.

City San Francisco State CA Zip Code 94107

Purpose of Disbursement  
Travel - Cabfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
08 / 23 / 2024

FEC Identification Number: C  
Transaction ID : SB21B.4611

Amount of Each Disbursement this Period: 75.99

Memo Item

**C. Lyft, Inc**

Full Name (Last, First, Middle Initial)

Mailing Address 185 Berry St.

City San Francisco State CA Zip Code 94107

Purpose of Disbursement  
Travel - Cabfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
08 / 26 / 2024

FEC Identification Number: C  
Transaction ID : SB21B.4609

Amount of Each Disbursement this Period: 57.27

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 10133.26

**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)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
WOMEN4US, INC.

Form A: McCauley & Associates. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, and Memo Item.

Form B: McCauley & Associates. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, and Memo Item.

Form C: Murmuration. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, and Memo Item.

SUBTOTAL of Disbursements This Page (optional) 6990.00
TOTAL This Period (last page this line number only)



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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)  
**WOMEN4US, INC.**

Full Name (Last, First, Middle Initial)

**A. ONE FOR ALL COMMITTEE**

Mailing Address PO BOX 33079

City  
WASHINGTON

State  
DC

Zip Code  
20033

Purpose of Disbursement  
In-kind - Digital Advertising

Candidate Name

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
0	8		0	9		2	0	2	4

FEC Identification Number

**C** C00752691  
**Transaction ID : SB21B.4647**

Amount of Each Disbursement this Period

46708.45

Memo Item

Full Name (Last, First, Middle Initial)

**B. ONE FOR ALL COMMITTEE**

Mailing Address PO BOX 33079

City  
WASHINGTON

State  
DC

Zip Code  
20033

Purpose of Disbursement  
In-kind - Digital Advertising

Candidate Name

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
0	8		1	4		2	0	2	4

FEC Identification Number

**C** C00752691  
**Transaction ID : SB21B.4646**

Amount of Each Disbursement this Period

30000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. ONE FOR ALL COMMITTEE**

Mailing Address PO BOX 33079

City  
WASHINGTON

State  
DC

Zip Code  
20033

Purpose of Disbursement  
In-kind - Digital Advertising

Candidate Name

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
0	8		1	5		2	0	2	4

FEC Identification Number

**C** C00752691  
**Transaction ID : SB21B.4645**

Amount of Each Disbursement this Period

10000.00

Memo Item

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

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

46708.45

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)

Form with checkboxes for line numbers 21b, 22, 23, 24, 25, 26, 27, 28a, 28b, 28c, 29, 30b

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NAME OF COMMITTEE (In Full)
WOMEN4US, INC.

Form A: ONE FOR ALL COMMITTEE. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, and Memo Item.

Form B: ONE FOR ALL COMMITTEE. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, and Memo Item.

Form C: ONE FOR ALL COMMITTEE. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, and 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"/> 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)  
**WOMEN4US, INC.**

**A. ONE FOR ALL COMMITTEE**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 33079

City WASHINGTON State DC Zip Code 20033

Purpose of Disbursement In-kind - Digital Advertising

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 27 / 2024

FEC Identification Number: C C00752691

Transaction ID : SB21B.4641

Amount of Each Disbursement this Period: 10000.00

Memo Item

**B. Prime Strategies LLC**

Full Name (Last, First, Middle Initial)

Mailing Address PO box 1643

City Washington State DC Zip Code 20013

Purpose of Disbursement Fundraising services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 04 / 2024

FEC Identification Number: C

Transaction ID : SB21B.4591

Amount of Each Disbursement this Period: 10000.00

Memo Item

**C. Prime Strategies LLC**

Full Name (Last, First, Middle Initial)

Mailing Address PO box 1643

City Washington State DC Zip Code 20013

Purpose of Disbursement Fundraising Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 19 / 2024

FEC Identification Number: C

Transaction ID : SB21B.4616

Amount of Each Disbursement this Period: 1363.49

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 21363.49

**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)

Form with checkboxes for line numbers 21b, 22, 23, 26, 27, 28a, 28b, 28c, 29, 30b

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NAME OF COMMITTEE (In Full)
WOMEN4US, INC.

Form A: Prompt.io, Inc. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form B: Sharp Connections LLC. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form C: Sharp Connections LLC. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

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"/> 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)  
**WOMEN4US, INC.**

Full Name (Last, First, Middle Initial) <b>A. Sharp Connections LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 19 / 2024	
Mailing Address 415 Navajo Lane West		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4622</b>	
City Lake Quivira	State KS	Zip Code 66217	Amount of Each Disbursement this Period [ ] 10952.75
Purpose of Disbursement Communications Consulting		Category/ Type [ ]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Smart Call Media</b>		Date of Disbursement MM / DD / YYYY 09 / 19 / 2024	
Mailing Address 10050 Bridge Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4617</b>	
City Truckee	State CA	Zip Code 96160	Amount of Each Disbursement this Period [ ] 2454.28
Purpose of Disbursement Digital Advertising		Category/ Type [ ]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY [ ] / [ ] / [ ]	
Mailing Address		FEC Identification Number C [ ]	
City	State	Zip Code	Amount of Each Disbursement this Period [ ]
Purpose of Disbursement		Category/ Type [ ]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 13407.03
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ] 171665.20

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
WOMEN4US, INC.
FEC IDENTIFICATION NUMBER
C C00884239

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee Resonate Networks
Mailing Address 11700 Plaza America Drive Suite 1000
City Reston State VA Zip Code 20190
Purpose of Expenditure Digital Advertising
Date of Public Distribution/Dissemination 09 / 27 / 2024
Amount 260000.00
Transaction ID : SE.4101
Date of Disbursement or Obligation 09 / 27 / 2024

Name of Federal Candidate: HARRIS, KAMALA, ,
Support Oppose
Office Sought: House District:
President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 260000.00
Disbursement For: Primary General 2024
Other (specify)

Full Name of Payee
Mailing Address
City State Zip Code
Purpose of Expenditure
Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation

Name of Federal Candidate:
Support Oppose
Office Sought: House District:
President Senate State:
Calendar Year-To-Date Per Election for Office Sought
Disbursement For: Primary General
Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 260000.00, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures 260000.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature McCauley, Mike, ,

Date 10 / 15 / 2024