



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**WOMEN VOTE!**

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="2012"/>	<input type="text" value=""/>	<input type="text" value="542315.25"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="883682.63"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="1782703.29"/>	<input type="text" value="9215659.01"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="2666385.92"/>	<input type="text" value="9757974.26"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="2459180.29"/>	<input type="text" value="9550768.63"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="207205.63"/>	<input type="text" value="207205.63"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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

Write or Type Committee Name

**WOMEN VOTE!**

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).....	1233532.00	5603000.17
(ii) Unitemized .....	99171.29	837566.81
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1332703.29	6440566.98
(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) .....	1332703.29	6440566.98
12. Transfers From Affiliated/Other Party Committees.....	450000.00	2750000.00
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	25092.03
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))..... ▶	1782703.29	9215659.01
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1782703.29	9215659.01

**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 .....	124294.73	1751087.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	124294.73	1751087.87
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	175000.00
24. Independent Expenditures (use Schedule E) .....	2327385.56	7616075.76
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 .....	7500.00	8605.00
(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)).....	7500.00	8605.00
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)) ..	2459180.29	9550768.63
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2459180.29	9550768.63

**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) .....	1332703.29	6440566.98
34. Total Contribution Refunds (from Line 28(d)) .....	7500.00	8605.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1325203.29	6431961.98
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	124294.73	1751087.87
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	124294.73	1751087.87

**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 127
	<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)  
**WOMEN VOTE!**

**A. Mr. Richard R Eynon**  
Full Name (Last, First, Middle Initial)

Mailing Address 175 S. Spring Mill Rd.

City Villanova State PA Zip Code 19085

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

Name of Employer retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
10 / 18 / 2012  
**Transaction ID : 3484701**

Amount of Each Receipt this Period  
200.00

**B. Mrs. Nancy J. Reed**  
Full Name (Last, First, Middle Initial)

Mailing Address 2602 Francis

City Saint Joseph State MO Zip Code 64501

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

Name of Employer none Occupation housewife

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
10 / 19 / 2012  
**Transaction ID : 3487977**

Amount of Each Receipt this Period  
500.00

**C. Ms. Patricia Stich**  
Full Name (Last, First, Middle Initial)

Mailing Address 521 20th St  
POBox 45530

City Santa Monica State CA Zip Code 90402

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

Name of Employer self Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
10 / 19 / 2012  
**Transaction ID : 3489721**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1700.00

**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 7 OF 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial)  
**A. La Pedrera, LLC**

Mailing Address 1940 Timber Canyon Road

City State Zip Code  
Santa Paula CA 93060

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

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2012  
**Transaction ID : 3492182**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**B. Ronnie Planalp**

Mailing Address 48 W 88TH St

City State Zip Code  
New York NY 10024

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

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 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  
10 / 19 / 2012  
**Transaction ID : 3492220**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**C. Ms. Margaret Munzer Loeb**

Mailing Address 15 Central Park West  
PH 39

City State Zip Code  
New York NY 10023

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

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2012  
**Transaction ID : 3492232**

Amount of Each Receipt this Period  
25000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	31000.00
<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 127
<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Mrs. Suzy W. Filbert</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 22 / 2012
Mailing Address 114 Taplow Rd.		<b>Transaction ID : 3492274</b>
City Baltimore	State MD	Zip Code 21212
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer none	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	

Full Name (Last, First, Middle Initial) <b>B. Ms. Nancy L. L. Buc</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 22 / 2012
Mailing Address 4200 Massachusetts Ave. NW Apt. 310		<b>Transaction ID : 3492276</b>
City Washington	State DC	Zip Code 20016
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer BUCLAWPLLC	Occupation Lawyer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Ms. Lois Whitman</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 22 / 2012
Mailing Address 285 Central Park West 12S		<b>Transaction ID : 3492281</b>
City New York	State NY	Zip Code 10024
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer none	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7000.00
<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 9 OF 127  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**WOMEN VOTE!**

**A. Mr. Ronald D Abramson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1700 K Street, NW, #300  
 City Washington State DC Zip Code 20006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Buchanan Ingersoll & Rooney Occupation Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 41500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 22 / 2012  
**Transaction ID : 3492284**  
 Amount of Each Receipt this Period  
 250.00

**B. Mr. Ronald D Abramson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1700 K Street, NW, #300  
 City Washington State DC Zip Code 20006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Buchanan Ingersoll & Rooney Occupation Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 41500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 22 / 2012  
**Transaction ID : 3492286**  
 Amount of Each Receipt this Period  
 1000.00

**c. Dr. Olga M. Eaton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1001 Sandia Road N.W.  
 City Albuquerque State NM Zip Code 87107  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer university of new mexico Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 19 / 2012  
**Transaction ID : 3493296**  
 Amount of Each Receipt this Period  
 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1450.00  
**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 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial)  
**A. Lare Mischo**

Mailing Address P.O. box 1294

City Sumner State WA Zip Code 98390

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

Name of Employer SPL Occupation Librarian

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2012

**Transaction ID : 3494998**

Amount of Each Receipt this Period  
350.00

Full Name (Last, First, Middle Initial)  
**B. Ms. Susan Nora Clark**

Mailing Address

City REQUESTED State DC Zip Code 11111

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 22 / 2012

**Transaction ID : 3497126**

Amount of Each Receipt this Period  
400.00

Full Name (Last, First, Middle Initial)  
**C. Ms. Judy M. Judd**

Mailing Address 1241 Island Drive, Apt. 101

City Ann Arbor State MI Zip Code 48105

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

Name of Employer Retired Univ. of Michigan Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 22 / 2012

**Transaction ID : 3498681**

Amount of Each Receipt this Period  
1000.00

<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 11 OF 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Mr. Todd Evans</b>		Date of Receipt
Mailing Address 2086 East Lake Rd.		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2012"/>
City	State	Zip Code
Atlanta	GA	30307
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Self	Teacher	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="10000.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="10000.00"/>

Full Name (Last, First, Middle Initial) <b>B. Ms. George-Ann Hyams</b>		Date of Receipt
Mailing Address 627 San Lorenzo St		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2012"/>
City	State	Zip Code
Santa Monica	CA	90402
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
George Spota Productions, Inc.	Producer/Alzheimer's	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="5750.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>

Full Name (Last, First, Middle Initial) <b>C. Mrs. Suzy W. Filbert</b>		Date of Receipt
Mailing Address 114 Taplow Rd.		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2012"/>
City	State	Zip Code
Baltimore	MD	21212
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
none	retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="2400.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="15100.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Ms. Stacy Fischer Robinson</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 22 / 2012
Mailing Address 401 Sherman Canal		<b>Transaction ID : 3502986</b>
City Venice	State CA	Zip Code 90291
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 5000.00
Name of Employer Ron Robinson Inc	Occupation retail	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 6000.00	

Full Name (Last, First, Middle Initial) <b>B. karen friedman</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 22 / 2012
Mailing Address 1999 harrison street suite 221 Suite 2210		<b>Transaction ID : 3504111</b>
City oakland	State CA	Zip Code 94612
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 1500.00
Name of Employer self	Occupation attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Ronald D Abramson</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 23 / 2012
Mailing Address 1700 K Street, NW, #300		<b>Transaction ID : 3504359</b>
City Washington	State DC	Zip Code 20006
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00
Name of Employer Buchanan Ingersoll & Rooney	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 41500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6750.00
<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 127
<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Mr. Ronald D Abramson</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 23 / 2012 <b>Transaction ID : 3504361</b>
Mailing Address 1700 K Street, NW, #300		Amount of Each Receipt this Period 750.00
City Washington	State DC	Zip Code 20006
FEC ID number of contributing federal political committee. C		
Name of Employer Buchanan Ingersoll & Rooney	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 41500.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Ronald D Abramson</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 23 / 2012 <b>Transaction ID : 3504363</b>
Mailing Address 1700 K Street, NW, #300		Amount of Each Receipt this Period 1000.00
City Washington	State DC	Zip Code 20006
FEC ID number of contributing federal political committee. C		
Name of Employer Buchanan Ingersoll & Rooney	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 41500.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Ronald D Abramson</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 23 / 2012 <b>Transaction ID : 3504365</b>
Mailing Address 1700 K Street, NW, #300		Amount of Each Receipt this Period 1000.00
City Washington	State DC	Zip Code 20006
FEC ID number of contributing federal political committee. C		
Name of Employer Buchanan Ingersoll & Rooney	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 41500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2750.00
<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 127
	<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)  
**WOMEN VOTE!**

**A. Mr. Ronald D Abramson**  
Full Name (Last, First, Middle Initial)

Mailing Address 1700 K Street, NW, #300

City Washington	State DC	Zip Code 20006
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FEC ID number of contributing federal political committee. **C**

Name of Employer Buchanan Ingersoll & Rooney	Occupation Attorney
---	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
41500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2012

**Transaction ID : 3504367**

Amount of Each Receipt this Period  

1000.00
---------

**B. Mr. Ronald D Abramson**  
Full Name (Last, First, Middle Initial)

Mailing Address 1700 K Street, NW, #300

City Washington	State DC	Zip Code 20006
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FEC ID number of contributing federal political committee. **C**

Name of Employer Buchanan Ingersoll & Rooney	Occupation Attorney
---	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
41500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2012

**Transaction ID : 3504369**

Amount of Each Receipt this Period  

1000.00
---------

**C. Mr. Ronald D Abramson**  
Full Name (Last, First, Middle Initial)

Mailing Address 1700 K Street, NW, #300

City Washington	State DC	Zip Code 20006
--------------------	-------------	-------------------

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

Name of Employer Buchanan Ingersoll & Rooney	Occupation Attorney
---	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
41500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2012

**Transaction ID : 3504371**

Amount of Each Receipt this Period  

500.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2500.00
<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 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Ms. Jacqueline Nemerovski</b>		Date of Receipt
Mailing Address 40 Seaview Terrace		<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2012"/>
City	State	Zip Code
San Francisco	CA	94121
FEC ID number of contributing federal political committee.		<b>Transaction ID : 3505141</b>
FEC ID number: <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Bruce Bastian</b>		Date of Receipt
Mailing Address 1384 N 450 East		<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2012"/>
City	State	Zip Code
Orem	UT	84907
FEC ID number of contributing federal political committee.		<b>Transaction ID : 3505733</b>
FEC ID number: <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
Name of Employer	Occupation	
REQUESTED	REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="5000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Ms. Edith D. Cofrin</b>		Date of Receipt
Mailing Address 1074 Berkshire Rd. NE		<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2012"/>
City	State	Zip Code
Atlanta	GA	30306
FEC ID number of contributing federal political committee.		<b>Transaction ID : 3505913</b>
FEC ID number: <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="7000.00"/>
Name of Employer	Occupation	
Self-Employed	Investor	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="10000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="13000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>





**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 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Ms. Madelin M. Wexler</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 23 / 2012
Mailing Address 3101 N Sheridan Rd Apt 1104		<b>Transaction ID : 3508105</b>
City Chicago	State IL	Zip Code 60657
FEC ID number of contributing federal political committee.	C	
Name of Employer None	Occupation Retired	Amount of Each Receipt this Period 7000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 9500.00	

Full Name (Last, First, Middle Initial) <b>B. Gale Thompson</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 23 / 2012
Mailing Address 4815 43rd Street NW		<b>Transaction ID : 3508108</b>
City Washington	State DC	Zip Code 20016
FEC ID number of contributing federal political committee.	C	
Name of Employer REQUESTED	Occupation REQUESTED	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Ms. Cindy Harrell-Horn</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 23 / 2012
Mailing Address 401 Saint Cloud Road		<b>Transaction ID : 3508124</b>
City Bel Air	State CA	Zip Code 90077
FEC ID number of contributing federal political committee.	C	
Name of Employer REQUESTED	Occupation REQUESTED	Amount of Each Receipt this Period 10000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 35000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	18000.00
<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 18 OF 127  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial)  
**A. American Federation of Teachers**

Mailing Address 555 New Jersey Ave., N.W.

City Washington State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2012  
**Transaction ID : 3508176**

Amount of Each Receipt this Period  
100000.00

Full Name (Last, First, Middle Initial)  
**B. Mr. Scott Shenker**

Mailing Address 860 San Jude Ave

City Palo Alto State CA Zip Code 94306

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

Name of Employer Occupation  
ICSI Scientist

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
330000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2012  
**Transaction ID : 3508459**

Amount of Each Receipt this Period  
200000.00

Full Name (Last, First, Middle Initial)  
**C. Mrs. Diane L. Abbey**

Mailing Address 1035 Fifth Avenue 11C

City New York State NY Zip Code 10028

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

Name of Employer Occupation  
self retired teacher

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2012  
**Transaction ID : 3508461**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 300500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Ms. Susan S Adler</b>		Date of Receipt
Mailing Address 161 E Chicago Ave Apt 35E Apt 35E		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2012"/>
City Chicago	State IL	Zip Code 60611
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 3508478</b>
Name of Employer N/A	Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="500.00"/>
	<input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Dr. Toni C. Antonucci</b>		Date of Receipt
Mailing Address 340 Orchard Hills Dr		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2012"/>
City Ann Arbor	State MI	Zip Code 48104
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 3508488</b>
Name of Employer University of Michigan	Occupation Professor	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="1000.00"/>
	<input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Ms. Cecilia Boone</b>		Date of Receipt
Mailing Address 3111 Welborn St. #1404		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2012"/>
City Dallas	State TX	Zip Code 75219
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 3508558</b>
Name of Employer None	Occupation philanthropy	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="5000.00"/>
	<input type="text" value="5000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="6500.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Ms. Elizabeth L Colton</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2012 <b>Transaction ID : 3508640</b>
Mailing Address 1848 Pine Street		Amount of Each Receipt this Period 1000.00
City San Francisco	State CA	Zip Code 94109
FEC ID number of contributing federal political committee. C		
Name of Employer n/a	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Michael A. Crews</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2012 <b>Transaction ID : 3508658</b>
Mailing Address 6501 CABALLERO PKWY, NW		Amount of Each Receipt this Period 150.00
City Los Ranchos	State NM	Zip Code 87107
FEC ID number of contributing federal political committee. C		
Name of Employer RADIOLOGY ASSOC OF ALBUQUERQUE	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>C. Dr. Ruth P. Dawson</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2012 <b>Transaction ID : 3508693</b>
Mailing Address 1539 Halekoa Dr Honolulu		Amount of Each Receipt this Period 150.00
City Honolulu	State HI	Zip Code 96821
FEC ID number of contributing federal political committee. C		
Name of Employer U of Hawaii	Occupation Retired prof	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1300.00
<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 21 OF 127
	<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)  
**WOMEN VOTE!**

**A. Susan Dietz**  
Full Name (Last, First, Middle Initial)

Mailing Address 3905 Ventura Canyon Avenue

City Sherman Oaks	State CA	Zip Code 91423
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FEC ID number of contributing federal political committee. **C**

Name of Employer self	Occupation producer
--------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		24		2012

**Transaction ID : 3508714**

Amount of Each Receipt this Period  
250.00

**B. Ms. Jessica E. Donovan**  
Full Name (Last, First, Middle Initial)

Mailing Address 120 Durham Street

City Menlo Park	State CA	Zip Code 94025
--------------------	-------------	-------------------

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

Name of Employer ENVIRON International Corporation	Occupation Geologist
---	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		24		2012

**Transaction ID : 3508725**

Amount of Each Receipt this Period  
1000.00

**C. Paul Egeland**  
Full Name (Last, First, Middle Initial)

Mailing Address 8633 Harrison Circle

City Bloomington	State MN	Zip Code 55437
---------------------	-------------	-------------------

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

Name of Employer retired	Occupation retired
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		24		2012

**Transaction ID : 3508749**

Amount of Each Receipt this Period  
250.00

<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 22 OF 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Nancy Elisburg</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2012 <b>Transaction ID : 3508751</b>
Mailing Address 177 Ocean Lane Drive Apt 1111		Amount of Each Receipt this Period 100.00
City Key Biscayne	State Zip Code FL 33149	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 550.00
Name of Employer Donald Elisburg	Occupation Admin Asst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Ms. Deborah C Franczek</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2012 <b>Transaction ID : 3508794</b>
Mailing Address 5555 So. Everett Ave. Apt. D7		Amount of Each Receipt this Period 500.00
City Chicago	State Zip Code IL 60637	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 750.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Mr. George Franks</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2012 <b>Transaction ID : 3508797</b>
Mailing Address 9336 N Camino Del Plata		Amount of Each Receipt this Period 100.00
City Tucson	State Zip Code AZ 85742	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 600.00
Name of Employer self	Occupation engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	700.00
<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 23 OF 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Ms. Cheryl L. Hiipakka</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 24 / 2012 <b>Transaction ID : 3508972</b>
Mailing Address 5487 S. Cornell Ave Apt #1		Amount of Each Receipt this Period 150.00
City Chicago	State IL Zip Code 60615	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 300.00
Name of Employer Hyde Park School of Dance	Occupation Accountant (part-tim	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Ms. Ann L. Ingram</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 24 / 2012 <b>Transaction ID : 3509010</b>
Mailing Address 5213 Linnean Ave., NW		Amount of Each Receipt this Period 250.00
City Washington	State DC Zip Code 20015	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 250.00
Name of Employer retired	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Cara L. Kazanowski</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 24 / 2012 <b>Transaction ID : 3509061</b>
Mailing Address 2968 Orchard Place		Amount of Each Receipt this Period 1000.00
City Orchard Lake	State MI Zip Code 48324	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 1000.00
Name of Employer retired	Occupation public relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1400.00
<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 24 OF 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Ms. Katherine Kristensen</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2012
Mailing Address 1075 Clarendon Cres		<b>Transaction ID : 3509090</b>
City Oakland	State CA	Zip Code 94610
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer Visa Inc	Occupation IT Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>B. Ms. Eugenia McGill</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2012
Mailing Address 345 Riverside Drive, Apt. 6D		<b>Transaction ID : 3509220</b>
City New York	State NY	Zip Code 10025
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Columbia University	Occupation Academic	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Ms. Jane Rohlf</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2012
Mailing Address 253 Wendover Drive		<b>Transaction ID : 3509471</b>
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Premier Research	Occupation researcher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1550.00
<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 25 OF 127  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial)  
**A. Cathryn Selman**

Mailing Address 8 Courtlandt Place

City State Zip Code  
Houston TX 77006

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

Name of Employer Occupation  
N/A Retired

Receipt For:  
 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  
 10 / 25 / 2012  
**Transaction ID : 3509527**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. Ms. Barbara S Silverstein**

Mailing Address 701 S. 15th St.

City State Zip Code  
Philadelphia PA 19146

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

Name of Employer Occupation  
self-employed Artistic Producer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2012  
**Transaction ID : 3509548**

Amount of Each Receipt this Period  
200.00

Full Name (Last, First, Middle Initial)  
**C. Ms. Marvis R. Snell**

Mailing Address 1700 3rd Ave W Apt 107

City State Zip Code  
Bradenton FL 34205

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

Name of Employer Occupation  
None Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2012  
**Transaction ID : 3509569**

Amount of Each Receipt this Period  
350.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 800.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial)  
**A. Ms. Nancy F Solomon**

Mailing Address 151 Central Park West

City New York State NY Zip Code 10023

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

Name of Employer n/a Occupation homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2012

**Transaction ID : 3509572**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. Bill Stetson**

Mailing Address 139 Elm Street

City Norwich State VT Zip Code 05055

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 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  
 10 / 24 / 2012

**Transaction ID : 3509594**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**C. Marguerite Town**

Mailing Address 2312 Avalon Pl

City Houston State TX Zip Code 77019

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

Name of Employer ExxonMobil Occupation Analyst

Receipt For:  
 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  
 10 / 24 / 2012

**Transaction ID : 3509634**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5300.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Ms. Eileen Tsai</b>		Date of Receipt
Mailing Address 14311 Miro Ct		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2012"/>
City State Zip Code Irvine CA 92606		<b>Transaction ID : 3509651</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="295.00"/>
Name of Employer Ceridian Tax Services	Occupation Resolution Specialis	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="390.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Ms. Constance H Williams</b>		Date of Receipt
Mailing Address 307 Brentford Road		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2012"/>
City State Zip Code Haverford PA 19041		<b>Transaction ID : 3509701</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="25000.00"/>
Name of Employer None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="25000.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Ann Witt</b>		Date of Receipt
Mailing Address 1420 Highland Dr.		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2012"/>
City State Zip Code Silver Spring MD 20910		<b>Transaction ID : 3509713</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer Food and Drug Administration	Occupation lawyer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="25545.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 127
	<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)  
**WOMEN VOTE!**

**A. Ms. Stephanie Rogall**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16107 huron dr  
 City sun city west State AZ Zip Code 85375  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer retired Occupation retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2012  
**Transaction ID : 3509762**  
 Amount of Each Receipt this Period  
 50.00

**B. Ms. Patricia D. Shure**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1127 Brooks St  
 City Ann Arbor State MI Zip Code 48103  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer university of michigan Occupation Retired  
 Receipt For:  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  
 10 / 24 / 2012  
**Transaction ID : 3509768**  
 Amount of Each Receipt this Period  
 500.00

**C. Ms. Jean L. L. Ambrose**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7305 Westover Way  
 City Somerset State NJ Zip Code 08873  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2012  
**Transaction ID : 3509787**  
 Amount of Each Receipt this Period  
 300.00

<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: (check only one)	PAGE 29 OF 127
	<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)  
**WOMEN VOTE!**

**A. Mrs. Ruth M Wright**  
Full Name (Last, First, Middle Initial)

Mailing Address 1440 High Street

City Boulder State CO Zip Code 80304

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

Name of Employer none Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2012

**Transaction ID : 3509791**

Amount of Each Receipt this Period  
**250.00**

**B. Ms. Sylvia Rosenfield**  
Full Name (Last, First, Middle Initial)

Mailing Address 502 Moorings Circle

City Arnold State MD Zip Code 21012

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2012

**Transaction ID : 3509807**

Amount of Each Receipt this Period  
**100.00**

**C. Mrs. Judith S Rowe**  
Full Name (Last, First, Middle Initial)

Mailing Address 4701 Willard Ave. Apt. 405  
apt 405

City Chevy Chase State MD Zip Code 20815

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

Name of Employer N/A Occupation Retired

Receipt For:  
 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  
 10 / 24 / 2012

**Transaction ID : 3509824**

Amount of Each Receipt this Period  
**100.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>450.00</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 30 OF 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**WOMEN VOTE!**

**A. Ms. Elizabeth H. Hunter**  
Full Name (Last, First, Middle Initial)

Mailing Address 310 West 79th St  
Apt 11W

City New York State NY Zip Code 10024

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

Name of Employer retired Occupation retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
10 / 24 / 2012  
Transaction ID : 3509825

Amount of Each Receipt this Period  
150.00

**B. Mr. Dariel Jamieson**  
Full Name (Last, First, Middle Initial)

Mailing Address 200 Lafayette Lane

City Chesterbrook State PA Zip Code 19087

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
10 / 24 / 2012  
Transaction ID : 3509827

Amount of Each Receipt this Period  
500.00

**C. Ms. Marsha McMahan Zelus**  
Full Name (Last, First, Middle Initial)

Mailing Address 225 Crossroads Blvd. #360

City Carmel State CA Zip Code 93923

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

Name of Employer retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
10 / 24 / 2012  
Transaction ID : 3509832

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 1150.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 127
	<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)  
**WOMEN VOTE!**

**A. Dr. Cheryl E. Weinstein**  
Full Name (Last, First, Middle Initial)  
Mailing Address 18600 South Woodland Road  
City Shaker Heights State OH Zip Code 44122  
FEC ID number of contributing federal political committee. **C**  
Name of Employer metrohealth medical center Occupation Physician  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 24 / 2012  
**Transaction ID : 3509833**  
Amount of Each Receipt this Period 250.00

**B. Dr. Priscilla A Gilman**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4537 Deer Run  
City Evans State GA Zip Code 30809  
FEC ID number of contributing federal political committee. **C**  
Name of Employer GHSU Occupation Physician/educator  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 24 / 2012  
**Transaction ID : 3509839**  
Amount of Each Receipt this Period 250.00

**C. Ms. Mary Lou Kennedy**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1765 W. Ainslie  
City Chicago State IL Zip Code 60640  
FEC ID number of contributing federal political committee. **C**  
Name of Employer First American Title Insurance Company Occupation Underwriting Counsel  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 24 / 2012  
**Transaction ID : 3509848**  
Amount of Each Receipt this Period 2000.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 2500.00  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Ms. Eve Ilsen</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2012 <b>Transaction ID : 3509850</b>
Mailing Address 1720 Lehigh St.		Amount of Each Receipt this Period 90.00
City Boulder	State CO	Zip Code 80305
FEC ID number of contributing federal political committee. C	Name of Employer Aleph Alliance for Jewish Renewal	
Occupation rabbinic pastor		Aggregate Year-to-Date ▼ 360.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mr. Barry M. Popkin</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2012 <b>Transaction ID : 3509862</b>
Mailing Address 201 huntington drive		Amount of Each Receipt this Period 1000.00
City Chapel Hill	State NC	Zip Code 27514
FEC ID number of contributing federal political committee. C	Name of Employer unc	
Occupation Professor		Aggregate Year-to-Date ▼ 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>c. Ms. Cynthia G Sterne</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2012 <b>Transaction ID : 3509867</b>
Mailing Address 862 De Haro St #B 1 W. 4th st., suite 2222		Amount of Each Receipt this Period 250.00
City San Francisco	State CA	Zip Code 94107
FEC ID number of contributing federal political committee. C	Name of Employer retired	
Occupation retired		Aggregate Year-to-Date ▼ 450.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1340.00
<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 33 OF 127
	<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)  
**WOMEN VOTE!**

**A. Ms. Edward A. Welch**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 932-A Twisp River Rd.  
 City Twisp State WA Zip Code 98856  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer self Occupation organic farmer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2012  
**Transaction ID : 3509872**  
 Amount of Each Receipt this Period  
 100.00

**B. Mrs. Kathlyn Terry Schaaf**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 27711 Deputy Circle  
 City Laguna Hills State CA Zip Code 92653  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer self Occupation organizational devel  
 Receipt For:  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  
 10 / 24 / 2012  
**Transaction ID : 3509888**  
 Amount of Each Receipt this Period  
 250.00

**C. Ms. Christine M. Waternaux**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7164 N Mercer Spring Pl  
 City Tucson State AZ Zip Code 85718  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  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  
 10 / 24 / 2012  
**Transaction ID : 3509903**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Ms. Laura W. Hamilton</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2012 <b>Transaction ID : 3509908</b>
Mailing Address 707 Randolph Ave.			Amount of Each Receipt this Period 250.00
City Huntsville	State AL	Zip Code 35801	
FEC ID number of contributing federal political committee. C			
Name of Employer Retirement Systems of Alabama	Occupation Retired Circuit Judg		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Pamela L. Harrington</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2012 <b>Transaction ID : 3509959</b>
Mailing Address P.O. Box 240			Amount of Each Receipt this Period 150.00
City Graton	State CA	Zip Code 95444	
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Leslie Roessler</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2012 <b>Transaction ID : 3510028</b>
Mailing Address 1942 Sycamore Street			Amount of Each Receipt this Period 250.00
City Bethlehem	State PA	Zip Code 18017	
FEC ID number of contributing federal political committee. C			
Name of Employer None	Occupation none		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	650.00
<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 35 OF 127  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial)  
**A. Dr. Valerie Arkoosh**

Mailing Address 530 Spring Ln

City Wyndmoor      State PA      Zip Code 19038

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

Name of Employer University of Pennsylvania      Occupation Physician

Receipt For:  
 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  
 10 / 24 / 2012

**Transaction ID : 3510031**

Amount of Each Receipt this Period  
2500.00

Full Name (Last, First, Middle Initial)  
**B. steven staudaher**

Mailing Address 10 Loring Way

City Sterling      State MA      Zip Code 01564

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

Name of Employer cognex      Occupation Engineer

Receipt For:  
 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  
 10 / 24 / 2012

**Transaction ID : 3510087**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. Jennifer Roberts**

Mailing Address 263 Peregrine Dr.

City Indialantic      State FL      Zip Code 32903

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

Name of Employer retired      Occupation retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2012

**Transaction ID : 3510093**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. John Pringle</b>		Date of Receipt
Mailing Address 940 Siskiyou Drive		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2012"/>
City	State	Zip Code
Menlo Park	CA	94025
FEC ID number of contributing federal political committee.		Transaction ID : <b>3510098</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="2000.00"/>
Name of Employer	Occupation	
Stanford University	Professor	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. ValBerta Harrop</b>		Date of Receipt
Mailing Address 759 Carlingford Lane		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2012"/>
City	State	Zip Code
Houston	TX	77079
FEC ID number of contributing federal political committee.		Transaction ID : <b>3510121</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
n/a	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Pamela A. A. Lowry</b>		Date of Receipt
Mailing Address 2627 Fulton St., Apt. 1		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2012"/>
City	State	Zip Code
Berkeley	CA	94704
FEC ID number of contributing federal political committee.		Transaction ID : <b>3510154</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="175.00"/>
Name of Employer	Occupation	
none	retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="210.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="2425.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Anne Smith</b>		Date of Receipt
Mailing Address 689 Albany Post Rd		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2012"/>
City	State	Zip Code
New Paltz	NY	12561
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 3510314</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
N/A	RETIRED	<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="850.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Victoria A A. Tori Adams</b>		Date of Receipt
Mailing Address 2330 Medford Court East		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2012"/>
City	State	Zip Code
Fort Worth	TX	76109
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 3510349</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
n/a	homemaker/community	<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Sen. Martha Fuller Clark</b>		Date of Receipt
Mailing Address 152 Middle Street		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City	State	Zip Code
Portsmouth	NH	03801
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 3510970</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
State of NH	Former State Senator	<input type="text" value="25000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="25000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="26000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 38 OF 127  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**WOMEN VOTE!**

**A. sally Alvarez**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 83 Iroquois Rd.  
 City State Zip Code  
 Yonkers NY 10710  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Cornell University teacher  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012  
**Transaction ID : 3510985**  
 Amount of Each Receipt this Period  
 250.00

**B. peter bickel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1033 colusa ave  
 City State Zip Code  
 Berkeley CA 94707  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 uc berkeley professor retired an  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 550.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012  
**Transaction ID : 3511063**  
 Amount of Each Receipt this Period  
 500.00

**C. Mr. Philip Blackmarr**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 333 Congress Place  
 City State Zip Code  
 Pasadena CA 91105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Peter Schulz home healthcaregiver  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012  
**Transaction ID : 3511072**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 850.00  
**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 39 OF 127  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial)  
**A. Ms. Joan I. Bolker**

Mailing Address 10 Chester St.

City State Zip Code  
Newton MA 02461

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

Name of Employer self Occupation psychologist/writer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012  
**Transaction ID : 3511087**

Amount of Each Receipt this Period  
**250.00**

Full Name (Last, First, Middle Initial)  
**B. William Boyce**

Mailing Address P.O. Box 68

City State Zip Code  
Grafton NY 12082

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

Name of Employer retired Occupation retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2012  
**Transaction ID : 3511098**

Amount of Each Receipt this Period  
**250.00**

Full Name (Last, First, Middle Initial)  
**C. Mr. Edward Coe**

Mailing Address 206 HEATHER LN

City State Zip Code  
Columbia MO 65203

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

Name of Employer retired Occupation Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2012  
**Transaction ID : 3511205**

Amount of Each Receipt this Period  
**150.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **425.00**

**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 40 OF 127  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**WOMEN VOTE!**

**A. Ms. Janice R Eldred**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4975 Beacon Hill Drive  
 City Castro Valley State CA Zip Code 94552  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NA Occupation retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012  
**Transaction ID : 3511340**  
 Amount of Each Receipt this Period  
 500.00

**B. Nancy Elisburg**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 177 Ocean Lane Drive Apt 1111  
 City Key Biscayne State FL Zip Code 33149  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Donald Elisburg Occupation Admin Asst  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012  
**Transaction ID : 3511341**  
 Amount of Each Receipt this Period  
 250.00

**C. Arlen Feldman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1519 Mt. Everett St.  
 City Colorado Springs State CO Zip Code 80909  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Cherwell Software Occupation Software Engineer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012  
**Transaction ID : 3511377**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1250.00  
**TOTAL** This Period (last page this line number only)..... ▶



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 127
	<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)  
**WOMEN VOTE!**

**A. Mr. George Franks**  
Full Name (Last, First, Middle Initial)

Mailing Address 9336 N Camino Del Plata

City Tucson State AZ Zip Code 85742

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

Name of Employer self Occupation engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**Transaction ID : 3511404**

Amount of Each Receipt this Period  
 100.00

**B. Judith Gebhardt**  
Full Name (Last, First, Middle Initial)

Mailing Address 6607 Shady Lane SE

City Lacey State WA Zip Code 98503

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

Name of Employer Self-employed Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**Transaction ID : 3511434**

Amount of Each Receipt this Period  
 100.00

**C. Ms. Susan W. Goldstein**  
Full Name (Last, First, Middle Initial)

Mailing Address 1349 Carlotta Avenue

City Berkeley State CA Zip Code 94703

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

Name of Employer San Francisco Public Library Occupation Archivist

Receipt For:  
 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  
 10 / 26 / 2012

**Transaction ID : 3511459**

Amount of Each Receipt this Period  
 2000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2200.00

**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 42 OF 127
	<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)  
**WOMEN VOTE!**

**A. Ms. Susanna Gordon**  
Full Name (Last, First, Middle Initial)

Mailing Address 1496 Trestle Glen Rd

City Oakland	State CA	Zip Code 94610
-----------------	-------------	-------------------

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

Name of Employer Sandia National Labs	Occupation Manager
--	-----------------------

Receipt For:  
 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
10	/	26	/	2012

**Transaction ID : 3511464**

Amount of Each Receipt this Period  
100.00

**B. Ms. Nancy Henley**  
Full Name (Last, First, Middle Initial)

Mailing Address 81 Beverly Dr

City Durham	State NC	Zip Code 27707
----------------	-------------	-------------------

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

Name of Employer self	Occupation physician
--------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2012

**Transaction ID : 3511534**

Amount of Each Receipt this Period  
200.00

**C. Mr. Jeffrey M. Hoke**  
Full Name (Last, First, Middle Initial)

Mailing Address 5506 North Kenmore #3

City Chicago	State IL	Zip Code 60640
-----------------	-------------	-------------------

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

Name of Employer retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2012

**Transaction ID : 3511555**

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	550.00
<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 43 OF 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. kristin hull</b>			Date of Receipt M M / D D / Y Y Y Y Y 10 / 26 / 2012 <b>Transaction ID : 3511589</b>
Mailing Address 341 el cerrito ave			Amount of Each Receipt this Period 500.00
City piedmont	State CA	Zip Code 94611	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 500.00
Name of Employer self employed		Occupation educator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Paulette Jarvey</b>			Date of Receipt M M / D D / Y Y Y Y Y 10 / 25 / 2012 <b>Transaction ID : 3511603</b>
Mailing Address 7212 S Seven Oaks			Amount of Each Receipt this Period 500.00
City Canby	State OR	Zip Code 97013	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 500.00
Name of Employer Hot Off The Press		Occupation publisher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Ms. Marion S. Kaplan</b>			Date of Receipt M M / D D / Y Y Y Y Y 10 / 25 / 2012 <b>Transaction ID : 3511625</b>
Mailing Address 450 W End Ave 16-B			Amount of Each Receipt this Period 500.00
City New York	State NY	Zip Code 10024	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 500.00
Name of Employer None		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input 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 44 OF 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Mr. Michael Kieschnick</b>		Date of Receipt
Mailing Address 1467 Hamilton Avenue		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City Palo Alto State CA Zip Code 94301		<b>Transaction ID : 3511647</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer CREDO Occupation Manager		<input type="text" value="5000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="5000.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Ms. Katherine Kristensen</b>		Date of Receipt
Mailing Address 1075 Clarendon Cres		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City Oakland State CA Zip Code 94610		<b>Transaction ID : 3511670</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Visa Inc Occupation IT Management		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="225.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Kathleen Kroessler</b>		Date of Receipt
Mailing Address 511 Elmgrove Ave		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City Providence State RI Zip Code 02906		<b>Transaction ID : 3511671</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Neurology Partners Occupation MD		<input type="text" value="250.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="500.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="5300.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 45 OF 127  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**WOMEN VOTE!**

**A. Grace Lee-Park**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 10251  
 City Portland State OR Zip Code 97296  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer n/a Occupation homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 25 / 2012  
**Transaction ID : 3511700**  
 Amount of Each Receipt this Period  
 350.00

**B. Mr. Stewart Macaulay**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 314 Shepard Terrace  
 City Madison State WI Zip Code 53705  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Univ. of Wisconsin-Madison Occupation Professor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 26 / 2012  
**Transaction ID : 3511766**  
 Amount of Each Receipt this Period  
 1500.00

**C. Mary Mcneill**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 44001 Road 409  
 City Mendocino State CA Zip Code 95460  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 25 / 2012  
**Transaction ID : 3511833**  
 Amount of Each Receipt this Period  
 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2050.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Ms. Susan A. Mohrman</b>		Date of Receipt
Mailing Address 1905 Craig Ave.		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City	State	Zip Code
Altadena	CA	91001
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 3511866</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
University of Southern California	Research Professor	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Heather L. Hillman Mutz</b>		Date of Receipt
Mailing Address 1200 Furlong Road		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City	State	Zip Code
Sebastopol	CA	95472
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 3511900</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Not applicable	homemaker, student	<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Diane Pepetone</b>		Date of Receipt
Mailing Address P.O. Box 1529		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City	State	Zip Code
Ukiah	CA	95482
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 3511970</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
L'Monte	software engineer	<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1750.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Ms. Maria S. Ragucci</b>		Date of Receipt
Mailing Address 16 Morris Ct		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City	State	Zip Code
Rye	NY	10580
FEC ID number of contributing federal political committee.		Transaction ID : <b>3512011</b>
Name of Employer		Amount of Each Receipt this Period
N/A		<input type="text" value="350.00"/>
Occupation		
Homemaker		
Receipt For:		Aggregate Year-to-Date ▼
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="460.00"/>
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Ms. Edna Caila Rossenas</b>		Date of Receipt
Mailing Address 1795 Shoreline Highway		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City	State	Zip Code
Muir Beach	CA	94965
FEC ID number of contributing federal political committee.		Transaction ID : <b>3512063</b>
Name of Employer		Amount of Each Receipt this Period
N/A		<input type="text" value="75.00"/>
Occupation		
n/a		
Receipt For:		Aggregate Year-to-Date ▼
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="250.00"/>
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Mr. Robert H. Schor</b>		Date of Receipt
Mailing Address 10 Ambassador Drive		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City	State	Zip Code
Rochester	NY	14610
FEC ID number of contributing federal political committee.		Transaction ID : <b>3512118</b>
Name of Employer		Amount of Each Receipt this Period
University of Rochester		<input type="text" value="350.00"/>
Occupation		
Faculty		
Receipt For:		Aggregate Year-to-Date ▼
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="850.00"/>
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="775.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Mara Senn</b>		Date of Receipt
Mailing Address 11409 Rouen Dr.		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City Potomac	State MD	Zip Code 20854
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 3512133</b>
Name of Employer Arnold & Porter LLP		Amount of Each Receipt this Period
Occupation Attorney		<input type="text" value="300.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) <b>B. jean W Shank</b>		Date of Receipt
Mailing Address P.O. Box 368		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City Port Orford	State OR	Zip Code 97465
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 3512139</b>
Name of Employer n/a		Amount of Each Receipt this Period
Occupation retired		<input type="text" value="200.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Ms. Marilyn R. Stern</b>		Date of Receipt
Mailing Address 195 Chestnut Avenue		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City Jamaica Plain	State MA	Zip Code 02130
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 3512202</b>
Name of Employer Self Employed		Amount of Each Receipt this Period
Occupation Teacher		<input type="text" value="500.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="500.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 127
	<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)  
**WOMEN VOTE!**

**A. Ms. Faye Straus**  
Full Name (Last, First, Middle Initial)  
Mailing Address 318 Maverick Ct.  
City Lafayette State CA Zip Code 94549  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Homemaker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 26 / 2012  
**Transaction ID : 3512218**  
Amount of Each Receipt this Period 500.00

**B. Ms. Betty Tableman**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1515 Moores River Drive  
City Lansing State MI Zip Code 48910  
FEC ID number of contributing federal political committee. **C**  
Name of Employer retired Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 25 / 2012  
**Transaction ID : 3512255**  
Amount of Each Receipt this Period 250.00

**C. Camilla Thomason**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3700 West National Road  
City Springfield State OH Zip Code 45504  
FEC ID number of contributing federal political committee. **C**  
Name of Employer retired Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 26 / 2012  
**Transaction ID : 3512272**  
Amount of Each Receipt this Period 2000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2750.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Mr. Curtis E. Thomsen</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2012
Mailing Address 330 Jacksonville Rd Apt 9-102		<b>Transaction ID : 3512280</b>
City Warminster	State PA	Zip Code 18974
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 350.00
Name of Employer None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>B. Ms. Judith Tumin</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2012
Mailing Address 176 West 87th Street Apt. MA		<b>Transaction ID : 3512295</b>
City New York	State NY	Zip Code 10024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer The Heschel School	Occupation Educator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 341.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Douglas Wang</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2012
Mailing Address 2903 SOUTHLINGTON RD		<b>Transaction ID : 3512329</b>
City SHAKER HEIGHTS	State OH	Zip Code 44120
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer none	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	700.00
<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 51 OF 127
	<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)  
**WOMEN VOTE!**

**A. Ms. Kate Washton**  
Full Name (Last, First, Middle Initial)

Mailing Address 19 Overlook Road

City State Zip Code  
Hastings On Hudson NY 10706

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

Name of Employer self Occupation Psychotherapist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 26 / 2012

**Transaction ID : 3512332**

Amount of Each Receipt this Period  
50.00

**B. Ms. Mary Ann Ann Yurkonis**  
Full Name (Last, First, Middle Initial)

Mailing Address 1907 Stearns Drive

City State Zip Code  
Los Angeles CA 90034

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

Name of Employer Retired Occupation Retired

Receipt For:  
 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  
10 / 25 / 2012

**Transaction ID : 3512395**

Amount of Each Receipt this Period  
50.00

**C. Ms. Nancy M. Zirkin**  
Full Name (Last, First, Middle Initial)

Mailing Address 5630 Wisconsin Avenue Apt 1703

City State Zip Code  
Chevy Chase MD 20815

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

Name of Employer LCCR Occupation Director of Public Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
7500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 25 / 2012

**Transaction ID : 3512407**

Amount of Each Receipt this Period  
7500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7600.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Dr. Jean E Taylor</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 26 / 2012 <b>Transaction ID : 3512409</b>
Mailing Address 2025 Broadway Apt 30D		Amount of Each Receipt this Period 300.00
City New York	State NY	Zip Code 10023
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. Ms. Judith H Obermayer</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2012 <b>Transaction ID : 3512410</b>
Mailing Address 239 Chestnut St		Amount of Each Receipt this Period 500.00
City West Newton	State MA	Zip Code 02465
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Ms. Pamela L Lowry</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2012 <b>Transaction ID : 3512411</b>
Mailing Address 27 Oak Road		Amount of Each Receipt this Period 2500.00
City Santa Cruz	State CA	Zip Code 95060
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 9000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3300.00
<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 53 OF 127
	<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)  
**WOMEN VOTE!**

**A. Ms. Mary Beth Norton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 159 Remington Rd  
 City Ithaca State NY Zip Code 14850  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Cornell University Occupation professor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 10 / 25 / 2012  
**Transaction ID : 3512413**  
 Amount of Each Receipt this Period 100.00

**B. Dr. Nancy G Wilds**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 35 Bangs Shore RD  
 City Orrs Island State ME Zip Code 04066  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer n.a. Occupation retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2012  
**Transaction ID : 3512416**  
 Amount of Each Receipt this Period 250.00

**C. Mr. Stephen Jay Rose**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 550 N ST SW  
 City Washington State DC Zip Code 20024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer GEORGETOWN UNIVERSITY Occupation PROFESSOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2012  
**Transaction ID : 3512421**  
 Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 600.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 127
	<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)  
**WOMEN VOTE!**

**A. Dr. Raminder Kumar**  
Full Name (Last, First, Middle Initial)

Mailing Address 445 E North Water St, apt 2505  
Apt 2505

City Chicago State IL Zip Code 60611

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
850.00

Date of Receipt  
10 / 25 / 2012  
Transaction ID : 3512427

Amount of Each Receipt this Period  
200.00

**B. Ms. Fran E. Goldman**  
Full Name (Last, First, Middle Initial)

Mailing Address 3639 Windom Place NW

City Washington State DC Zip Code 20008

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

Name of Employer self-employed Occupation Finance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
10 / 26 / 2012  
Transaction ID : 3512430

Amount of Each Receipt this Period  
1000.00

**C. Ms. Cathy J. Meyer**  
Full Name (Last, First, Middle Initial)

Mailing Address 1153 Ashmount Ave

City Oakland State CA Zip Code 94610

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

Name of Employer Alta Bates Summit Foundation Occupation Director of Major Gi

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
10 / 25 / 2012  
Transaction ID : 3512438

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1450.00

**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 55 OF 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Dr. carol C Mukhopadhyay</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 26 / 2012 <b>Transaction ID : 3512441</b>
Mailing Address 30 Westpoint Place		Amount of Each Receipt this Period 600.00
City san mateo	State CA	Zip Code 94402
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
Name of Employer self-employed	Occupation scienist-researcher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Pat Massey</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 26 / 2012 <b>Transaction ID : 3512444</b>
Mailing Address 1707 Schieffer Avenue		Amount of Each Receipt this Period 500.00
City Austin	State TX	Zip Code 78722
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer self	Occupation real estate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) <b>C. Ms. Sharon Juergens</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 25 / 2012 <b>Transaction ID : 3512454</b>
Mailing Address 6856 Tred Avon Place		Amount of Each Receipt this Period 250.00
City Gainesville	State VA	Zip Code 20155
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Bank of America	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1350.00
<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 56 OF 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**WOMEN VOTE!**

**A. Prof. Richard M. Dudley**  
Full Name (Last, First, Middle Initial)  
Mailing Address 92 Lewis St.  
City Newton State MA Zip Code 02458  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Massachusetts Institute of Technology Occupation Professor  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 25 / 2012  
**Transaction ID : 3512457**  
Amount of Each Receipt this Period 500.00

**B. Mrs. Caryl S. Bernstein**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5922 Overlea Road  
City Bethesda State MD Zip Code 20816  
FEC ID number of contributing federal political committee. **C**  
Name of Employer The Bernstein Law Firm, PLLC Occupation Lawyer  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 25 / 2012  
**Transaction ID : 3512458**  
Amount of Each Receipt this Period 350.00

**C. Ms. Shirley Hort**  
Full Name (Last, First, Middle Initial)  
Mailing Address 10211 SE 16th St.  
City Vancouver State WA Zip Code 98664  
FEC ID number of contributing federal political committee. **C**  
Name of Employer none Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 25 / 2012  
**Transaction ID : 3512459**  
Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1100.00  
**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 57 OF 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Ms. Shelley M. Cohn</b>		Date of Receipt
Mailing Address 3514 East Oregon		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City State Zip Code Phoenix AZ 85018		<b>Transaction ID : 3512460</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="200.00"/>
Name of Employer Retired	Occupation Arts administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Ms. Prochy P Sethna</b>		Date of Receipt
Mailing Address 1496 Sierra Ave		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City State Zip Code San Jose CA 95126		<b>Transaction ID : 3512461</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Ms. Sylvia Rosenfield</b>		Date of Receipt
Mailing Address 502 Moorings Circle		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City State Zip Code Arnold MD 21012		<b>Transaction ID : 3512463</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="450.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="550.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 58 OF 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Ms. Nancy B B. Price</b>		Date of Receipt
Mailing Address 433 Madison		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City	State	Zip Code
San Antono	TX	78204
FEC ID number of contributing federal political committee.		Transaction ID : <b>3512471</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>
Name of Employer	Occupation	
Price Asset Management	Officer	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Ms. Katherine A. Mahle</b>		Date of Receipt
Mailing Address 1410 Spring Valley Rd		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City	State	Zip Code
Golden Valley	MN	55422
FEC ID number of contributing federal political committee.		Transaction ID : <b>3512479</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
N/A	Retired clergy	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="750.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Ms. Anne Newman</b>		Date of Receipt
Mailing Address 670 West End Ave Apt 17D		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City	State	Zip Code
New York	NY	10025
FEC ID number of contributing federal political committee.		Transaction ID : <b>3512480</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>
Name of Employer	Occupation	
self	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="600.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1250.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 59 OF 127
	(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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Ms. Roslyn E. Walker</b>		Date of Receipt
Mailing Address 13600 Marina Pointe Drive #140 Unit 1406		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City Marina Del Rey	State CA	Zip Code 90292
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 3512495</b>
Name of Employer: None		Amount of Each Receipt this Period
Occupation: Retired		<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1700.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Beverly Carolan Doyle</b>		Date of Receipt
Mailing Address 211 Great Pond Rd		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City Simsbury	State CT	Zip Code 06070
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 3512498</b>
Name of Employer: St. Francis Hospital		Amount of Each Receipt this Period
Occupation: Physician		<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="350.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Ms. Kathy E. Klein</b>		Date of Receipt
Mailing Address 5 Poppy Lane		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City Orinda	State CA	Zip Code 94563
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 3512508</b>
Name of Employer: not employed		Amount of Each Receipt this Period
Occupation: RN		<input type="text" value="150.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1250.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Ms. Leah Lynch McFadden</b>		Date of Receipt
Mailing Address 7926 Scherzo Lane		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City	State	Zip Code
Houston	TX	77040
FEC ID number of contributing federal political committee.		<b>Transaction ID : 3512513</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="200.00"/>
Name of Employer	Occupation	
Retired	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="350.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Ms. Connie R. Caplan</b>		Date of Receipt
Mailing Address 7320 Bellona Ave		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City	State	Zip Code
Baltimore	MD	21212
FEC ID number of contributing federal political committee.		<b>Transaction ID : 3512514</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
Time Group	Real Estate	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="5100.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Dr. Patricia P P. Jones</b>		Date of Receipt
Mailing Address 639 Arastradero Rd		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City	State	Zip Code
Palo Alto	CA	94306
FEC ID number of contributing federal political committee.		<b>Transaction ID : 3512519</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
Stanford University	Professor	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="400.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 127
	<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)  
**WOMEN VOTE!**

**A. Mrs. Cheryl Nabors**  
Full Name (Last, First, Middle Initial)

Mailing Address 14010 SPLIT RAIL DR

City Homer Glen State IL Zip Code 60491

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

Name of Employer Online Business Applications Occupation Technical Writer

Receipt For:  
 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  
10 / 26 / 2012

**Transaction ID : 3512522**

Amount of Each Receipt this Period  
50.00

**B. Mr. James M. Hankins**  
Full Name (Last, First, Middle Initial)

Mailing Address 29 Blue Heron Drive

City Greenwood Village State CO Zip Code 80121

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

Name of Employer Occupation retired Retired

Receipt For:  
 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  
10 / 25 / 2012

**Transaction ID : 3512526**

Amount of Each Receipt this Period  
250.00

**C. Ms. Mary Mogge**  
Full Name (Last, First, Middle Initial)

Mailing Address 638 Farben Drive

City Diamond Bar State CA Zip Code 91765

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

Name of Employer Occupation Cal Poly Pomona University Professor

Receipt For:  
 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  
10 / 26 / 2012

**Transaction ID : 3512534**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 550.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 127
	<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)  
**WOMEN VOTE!**

**A. Dr. Laress L. Wise**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4372 Shoreline Court  
 City Seaside State CA Zip Code 93955  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HumRRO Occupation Research Scientist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012  
**Transaction ID : 3512581**  
 Amount of Each Receipt this Period  
 250.00

**B. Ms. Jerilyn Marler**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3065 SW 113th Avenue  
 City Beaverton State OR Zip Code 97005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Writer/Publisher  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012  
**Transaction ID : 3512583**  
 Amount of Each Receipt this Period  
 250.00

**C. Mr. Rainer Storb**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2330-43rd Ave E # 100B # D1-100  
 City Seattle State WA Zip Code 98112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer F. Hutchison Cancer Research center Occupation physician/scientist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012  
**Transaction ID : 3512586**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<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 63 OF 127
	(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)  
**WOMEN VOTE!**

**A. Ms. Linda Voss**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1303 N.Ode St., #224

City Arlington	State VA	Zip Code 22209
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation writer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 26 / 2012  
**Transaction ID : 3512590**

Amount of Each Receipt this Period  
500.00

**B. Ms. Laura W. Hamilton**  
Full Name (Last, First, Middle Initial)  
Mailing Address 707 Randolph Ave.

City Huntsville	State AL	Zip Code 35801
FEC ID number of contributing federal political committee. C		
Name of Employer Retirement Systems of Alabama	Occupation Retired Circuit Judg	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 26 / 2012  
**Transaction ID : 3512640**

Amount of Each Receipt this Period  
50.00

**C. Ms. Annie E. Zaenen**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3950 Jefferson Avenue

City Emerald Hills	State CA	Zip Code 94062
FEC ID number of contributing federal political committee. C		
Name of Employer na	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 26 / 2012  
**Transaction ID : 3512647**

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	800.00
<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 64 OF 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Miss Ursula Y. Nisonoff</b>		Date of Receipt
Mailing Address 1418 Moraine Drive		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City Vail State CO Zip Code 81657		<b>Transaction ID : 3512649</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer N/a Occupation Mom/attorney/investo		<input type="text" value="100.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="400.00"/>

Full Name (Last, First, Middle Initial) <b>B. Ms. Marian Harris</b>		Date of Receipt
Mailing Address 67-87 Booth St. Apt. 1B		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City Forest Hills State NY Zip Code 11375		<b>Transaction ID : 3512677</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer None Occupation Retired		<input type="text" value="200.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="250.00"/>

Full Name (Last, First, Middle Initial) <b>C. Ms. Maureen R. Hanson</b>		Date of Receipt
Mailing Address 316 Comstock Rd		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City Ithaca State NY Zip Code 14850		<b>Transaction ID : 3512683</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Cornell University Occupation scientist		<input type="text" value="250.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="250.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="550.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 65 OF 127
	(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)  
**WOMEN VOTE!**

**A. Mr. James R. Geiser**  
Full Name (Last, First, Middle Initial)

Mailing Address 6 Spies Road

City New Paltz State NY Zip Code 12561

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

Name of Employer Retired Occupation Mathematician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2012

**Transaction ID : 3512695**

Amount of Each Receipt this Period 150.00

**B. Mr. Seymour Small**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 BEALS ST

City Brookline State MA Zip Code 02446

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

Name of Employer Meditech Occupation DEV DIR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2012

**Transaction ID : 3512701**

Amount of Each Receipt this Period 250.00

**C. Ms. Joyce Ellis**  
Full Name (Last, First, Middle Initial)

Mailing Address 714 23rd Street

City Glenwood Springs State CO Zip Code 81601

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

Name of Employer retired Occupation physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2012

**Transaction ID : 3512709**

Amount of Each Receipt this Period 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 600.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**WOMEN VOTE!**

**A. Ms. Darline Robles**  
Full Name (Last, First, Middle Initial)  
Mailing Address 14277 Eastridge Dr.  
City Whittier State CA Zip Code 90602  
FEC ID number of contributing federal political committee. **C**  
Name of Employer University of Southern California Occupation professor  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
10 / 25 / 2012  
**Transaction ID : 3512735**  
Amount of Each Receipt this Period  
250.00

**B. Mr. Steven Keleti**  
Full Name (Last, First, Middle Initial)  
Mailing Address 18 Clarendon Street  
City Malden State MA Zip Code 02148  
FEC ID number of contributing federal political committee. **C**  
Name of Employer self Occupation Engineer  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
10 / 26 / 2012  
**Transaction ID : 3512754**  
Amount of Each Receipt this Period  
1500.00

**C. Ms. Caroline Bynum**  
Full Name (Last, First, Middle Initial)  
Mailing Address 410 Riverside Dr. #101  
City New York State NY Zip Code 10025  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
10 / 25 / 2012  
**Transaction ID : 3512758**  
Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2000.00  
**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 67 OF 127
	<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)  
**WOMEN VOTE!**

**A. Dale Reisner M.D.**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2007 Federal AVE E  
City Seattle State WA Zip Code 98102  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Obstetric Medical Group of WA Occupation Physician  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 26 / 2012  
Transaction ID : 3512770  
Amount of Each Receipt this Period 100.00

**B. Marie Burke**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2833 Birch Harbor Lane  
City West Bloomfield State MI Zip Code 48324  
FEC ID number of contributing federal political committee. **C**  
Name of Employer ACLU of Michigan Occupation financial manager  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 26 / 2012  
Transaction ID : 3512772  
Amount of Each Receipt this Period 500.00

**C. Barry Zorthian**  
Full Name (Last, First, Middle Initial)  
Mailing Address 101 Upper Alcatraz  
City Mill Valley State CA Zip Code 94941  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Oakcare Medical Group Occupation Physician  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 26 / 2012  
Transaction ID : 3512829  
Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 850.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Rosemary Maher</b>		Date of Receipt
Mailing Address 1971 Bridgewater Dr		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City	State	Zip Code
Lake Mary	FL	32746
FEC ID number of contributing federal political committee.		<b>Transaction ID : 3512910</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
retired	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Amy Applebaum</b>		Date of Receipt
Mailing Address 17600 superior street		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City	State	Zip Code
Northridge	CA	91325
FEC ID number of contributing federal political committee.		<b>Transaction ID : 3512959</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
Not applicable	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="350.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Barbara Deedler</b>		Date of Receipt
Mailing Address 1777 Bollinger Lane		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City	State	Zip Code
Sebastopol	CA	95472
FEC ID number of contributing federal political committee.		<b>Transaction ID : 3513044</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="300.00"/>
Name of Employer	Occupation	
retired	retired RN	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="400.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="800.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial)  
**A. Kay Bains**

Mailing Address 3536 Country Club Road

City Birmingham State AL Zip Code 35213

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

Name of Employer Bradley Arant Boult Cummings, LLP Occupation Attorney

Receipt For:  
 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  
 10 / 25 / 2012

**Transaction ID : 3513087**

Amount of Each Receipt this Period  
 250.00

Full Name (Last, First, Middle Initial)  
**B. Mr. Andrew Stern**

Mailing Address 2801 New Mexico Ave NW 306

City Washington State DC Zip Code 20007

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

Name of Employer Columbia Univeesity Occupation Senior Fellow

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2012

**Transaction ID : 3513100**

Amount of Each Receipt this Period  
 500.00

Full Name (Last, First, Middle Initial)  
**C. Mr. Scott Shenker**

Mailing Address 860 San Jude Ave

City Palo Alto State CA Zip Code 94306

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

Name of Employer ICSI Occupation Scientist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 26 / 2012

**Transaction ID : 3513891**

Amount of Each Receipt this Period  
 100000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100750.00
<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 70 OF 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Markus Andres</b>		Date of Receipt 10 / 26 / 2012 <b>Transaction ID : 3513938</b>
Mailing Address 205 Edgewater Circle		Amount of Each Receipt this Period 100.00
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		
Name of Employer none	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. Ms. Carolyn Frances Corwin</b>		Date of Receipt 10 / 26 / 2012 <b>Transaction ID : 3514205</b>
Mailing Address 2555 Pennsylvania Avenue, N.W. Apt. 606		Amount of Each Receipt this Period 750.00
City Washington, D.C.	State DC	Zip Code 20037
FEC ID number of contributing federal political committee. C		
Name of Employer Covington & Burling LLP	Occupation Lawyer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) <b>C. Ms. Irene Fischer-Davidson</b>		Date of Receipt 10 / 26 / 2012 <b>Transaction ID : 3514355</b>
Mailing Address 1733 NW 25TH AVE		Amount of Each Receipt this Period 500.00
City Portland	State OR	Zip Code 97210
FEC ID number of contributing federal political committee. C		
Name of Employer retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1700.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1350.00
<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 71 OF 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Mr. George Franks</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 26 / 2012 <b>Transaction ID : 3514386</b>
Mailing Address 9336 N Camino Del Plata		Amount of Each Receipt this Period 100.00
City Tucson	State AZ	Zip Code 85742
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer self	Occupation engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>B. d. rae korengold</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 26 / 2012 <b>Transaction ID : 3514594</b>
Mailing Address 80 depot rd.		Amount of Each Receipt this Period 150.00
City haydenville	State MA	Zip Code 01039
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer self, family	Occupation retired nurse/teache	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) <b>C. Jane O'Brien</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 26 / 2012 <b>Transaction ID : 3514813</b>
Mailing Address 19860 Pear Hill Rd		Amount of Each Receipt this Period 250.00
City Leonardtown	State MD	Zip Code 20650
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer self	Occupation business owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<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 72 OF 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Ms. Cynthia H. Roeser</b>		Date of Receipt
Mailing Address 215 W. 95th Street 17E		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City	State	Zip Code
New York	NY	10025
FEC ID number of contributing federal political committee.		Transaction ID : <b>3514956</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
Unemployed	Attorney	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Ms. Edna Caila Rossenas</b>		Date of Receipt
Mailing Address 1795 Shoreline Highway		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City	State	Zip Code
Muir Beach	CA	94965
FEC ID number of contributing federal political committee.		Transaction ID : <b>3514982</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
N/A	n/a	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Ms. Edna Caila Rossenas</b>		Date of Receipt
Mailing Address 1795 Shoreline Highway		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City	State	Zip Code
Muir Beach	CA	94965
FEC ID number of contributing federal political committee.		Transaction ID : <b>3514983</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="75.00"/>
Name of Employer	Occupation	
N/A	n/a	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="425.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>



**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 73 OF 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial)  
**A. Jennifer Rule**

Mailing Address 2125 West Concord Place

City Chicago	State IL	Zip Code 60647
-----------------	-------------	-------------------

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

Name of Employer N/A	Occupation stay home mother
-------------------------	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2012

**Transaction ID : 3514989**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**B. Soumitra Sengupta**

Mailing Address 137 11th Avenue

City Kirkland	State WA	Zip Code 98033
------------------	-------------	-------------------

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

Name of Employer Microsoft	Occupation Software Engineer
-------------------------------	---------------------------------

Receipt For:  
 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
10	/	26	/	2012

**Transaction ID : 3515031**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**c. Ms. patricia F. Shanks**

Mailing Address 783 CONTRA COSTA AVE

City Berkeley	State CA	Zip Code 94707
------------------	-------------	-------------------

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

Name of Employer retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2012

**Transaction ID : 3515040**

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2250.00
<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 74 OF 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Ms. Mary Ann Stein</b>		Date of Receipt
Mailing Address 5643 Bent Branch Rd		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City State Zip Code Bethesda MD 20816		<b>Transaction ID : 3515096</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Name of Employer Moriah Fund	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="20000.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Ms. Eleanor Swift</b>		Date of Receipt
Mailing Address 2959 Piedmont Ave.		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City State Zip Code Berkeley CA 94705		<b>Transaction ID : 3515130</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer University of California	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Ms. Judith Tumin</b>		Date of Receipt
Mailing Address 176 West 87th Street Apt. MA		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City State Zip Code New York NY 10024		<b>Transaction ID : 3515165</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer The Heschel School	Occupation Educator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="341.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="5300.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Ms. Patricia A Mullen</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 26 / 2012
Mailing Address 5331 Irving Ave. S.		<b>Transaction ID : 3515360</b>
City Minneapolis	State MN	Zip Code 55419
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. Ms. Stephanie Rogall</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 26 / 2012
Mailing Address 16107 huron dr		<b>Transaction ID : 3515371</b>
City sun city west	State AZ	Zip Code 85375
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer retired	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>C. Ms. Patsy Rogers</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 26 / 2012
Mailing Address P.O. Box 616		<b>Transaction ID : 3515372</b>
City New Suffolk	State NY	Zip Code 11956
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer Self	Occupation composer,teacher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<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 76 OF 127
	(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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Ms. Elizabeth M. M. Postell</b>		Date of Receipt
Mailing Address 1321 E. 56th Street, #1, Chicago, IL 60637		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City Chicago	State IL	Zip Code 60637
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 3515462</b>
Name of Employer none	Occupation retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="500.00"/>
	<input type="text" value="750.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Ms. Laura Kofoid</b>		Date of Receipt
Mailing Address 3920 North Lake Shore Drive Apartment 7		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2012"/>
City Chicago	State IL	Zip Code 60613
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 3515479</b>
Name of Employer Laudi Vidni	Occupation Business	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="1000.00"/>
	<input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Ms. Joyce R Michaelson</b>		Date of Receipt
Mailing Address 100 Warren Place		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City Montclair	State NJ	Zip Code 07042
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 3515539</b>
Name of Employer None	Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="250.00"/>
	<input type="text" value="250.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="1750.00"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**WOMEN VOTE!**

**A. Mr. Jason Kemp**  
Full Name (Last, First, Middle Initial)  
Mailing Address 16 Azalea Lane  
City Old Lyme State CT Zip Code 06371  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
State of CT Judicial Branch Empl  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 26 / 2012  
**Transaction ID : 3515862**  
Amount of Each Receipt this Period  
350.00

**B. jean W Shank**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 368  
City Port Orford State OR Zip Code 97465  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
n/a retired  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 27 / 2012  
**Transaction ID : 3516815**  
Amount of Each Receipt this Period  
100.00

**C. Ms. Susan W Evans**  
Full Name (Last, First, Middle Initial)  
Mailing Address 7816 DeSoto Memorial Highway  
City Bradenton State FL Zip Code 34209  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
retired Retired  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 27 / 2012  
**Transaction ID : 3516992**  
Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1450.00
<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 78 OF 127
	<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)  
**WOMEN VOTE!**

**A. Ms. alice coleman Schelling**  
Full Name (Last, First, Middle Initial)

Mailing Address 4506 Wetherill Rd

City Bethesda State MD Zip Code 20816

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

Name of Employer home Occupation retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 28 / 2012

**Transaction ID : 3518390**

Amount of Each Receipt this Period  
 500.00

**B. Andrea Whitman**  
Full Name (Last, First, Middle Initial)

Mailing Address 621 So. Burlingame Ave.

City Los Angeles State CA Zip Code 90049

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

Name of Employer Self Occupation Psychologist/Psychoa

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 28 / 2012

**Transaction ID : 3519169**

Amount of Each Receipt this Period  
 500.00

**C. Silas Norman**  
Full Name (Last, First, Middle Initial)

Mailing Address 6851 Woodbsnk Drive

City Bloomfield State MI Zip Code 48301

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

Name of Employer Wayne State U. Occupation Physician

Receipt For:  
 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  
 10 / 30 / 2012

**Transaction ID : 3520710**

Amount of Each Receipt this Period  
 150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1150.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Mr. Ronald D Abramson</b>			Date of Receipt
Mailing Address 1700 K Street, NW, #300			<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code	<b>Transaction ID : 3520720</b>
Washington	DC	20006	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="10000.00"/>
Name of Employer	Occupation		
Buchanan Ingersoll & Rooney	Attorney		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="41500.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Mr. Ronald D Abramson</b>			Date of Receipt
Mailing Address 1700 K Street, NW, #300			<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code	<b>Transaction ID : 3520722</b>
Washington	DC	20006	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="1000.00"/>
Name of Employer	Occupation		
Buchanan Ingersoll & Rooney	Attorney		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="41500.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Mr. Ronald D Abramson</b>			Date of Receipt
Mailing Address 1700 K Street, NW, #300			<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code	<b>Transaction ID : 3520724</b>
Washington	DC	20006	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="1000.00"/>
Name of Employer	Occupation		
Buchanan Ingersoll & Rooney	Attorney		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="41500.00"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="12000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 127
	<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)  
**WOMEN VOTE!**

**A. Mr. Ronald D Abramson**  
Full Name (Last, First, Middle Initial)

Mailing Address 1700 K Street, NW, #300

City Washington	State DC	Zip Code 20006
--------------------	-------------	-------------------

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

Name of Employer Buchanan Ingersoll & Rooney	Occupation Attorney
---	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
41500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

**Transaction ID : 3520726**

Amount of Each Receipt this Period  
750.00

**B. Ms. Barbara J. Meislin**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 1277

City Tiburon	State CA	Zip Code 94920
-----------------	-------------	-------------------

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

Name of Employer Self Employed	Occupation Author
-----------------------------------	----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

**Transaction ID : 3522482**

Amount of Each Receipt this Period  
750.00

**C. Ms. Margaret Allen**  
Full Name (Last, First, Middle Initial)

Mailing Address 311 Broxton Rd

City Baltimore	State MD	Zip Code 21212
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FEC ID number of contributing federal political committee. **C**

Name of Employer AGM Financial Services, Inc	Occupation Mortgage Banker
---	-------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

**Transaction ID : 3522971**

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2500.00
<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 81 OF 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Ms. Barbara A Huyler</b>		Date of Receipt
Mailing Address PO Box 577550		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
Chicago	IL	60657
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 3523415</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
UIC	Retired	<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Ms. Miranda Coffey</b>		Date of Receipt
Mailing Address 299 Corbett Ave.		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
San Francisco	CA	94114
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 3524110</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="200.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="350.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Ms. Judith B Wagner</b>		Date of Receipt
Mailing Address 4850 S. Dahlia Street		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
Littleton	CO	80121
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 3524631</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Cobiz Wealth	Investment Manager	<input type="text" value="5000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="43000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="5700.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Mr. Jonathan Berger</b>		Date of Receipt
Mailing Address 8233 Seminole Street		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City Philadelphia	State PA	Zip Code 19118
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 3524632</b>
Name of Employer REQUESTED		Amount of Each Receipt this Period
Occupation REQUESTED		<input type="text" value="5000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="5000.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Hank Goldberg</b>		Date of Receipt
Mailing Address 30 Compass Road		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City Ft. Lauderdale	State FL	Zip Code 33308
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 3524633</b>
Name of Employer REQUESTED		Amount of Each Receipt this Period
Occupation REQUESTED		<input type="text" value="25000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="25000.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Ms. Prudence R. Beidler</b>		Date of Receipt
Mailing Address 20 S. Stonegate rd		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City Lake Forest	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 3525072</b>
Name of Employer self		Amount of Each Receipt this Period
Occupation Volunteer		<input type="text" value="2000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="4500.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="32000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 127
	<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)  
**WOMEN VOTE!**

**A. Mr. Paul Goldenberg**  
Full Name (Last, First, Middle Initial)

Mailing Address 1963 Tomin Road

City LaHabra Hts State CA Zip Code 90631

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

Name of Employer Paul's TV Occupation Businessman

Receipt For:  
 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  
 10 / 31 / 2012

**Transaction ID : 3525074**

Amount of Each Receipt this Period  
5000.00

**B. Ms. Marcie W. Love**  
Full Name (Last, First, Middle Initial)

Mailing Address 1175 Pelham Road

City Winnetka State IL Zip Code 60093

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

Name of Employer N/A Occupation Activist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2012

**Transaction ID : 3525920**

Amount of Each Receipt this Period  
3000.00

**C. Ms. Mary P. Tay Thomas**  
Full Name (Last, First, Middle Initial)

Mailing Address 10800 Hideaway Lake Drive

City Anchorage State AK Zip Code 99507

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

Name of Employer Was self employed before retirement Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
15000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2012

**Transaction ID : 3526279**

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	13000.00
<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 84 OF 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Ms. Elizabeth Kean</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 02 / 2012 <b>Transaction ID : 3526440</b>
Mailing Address 2 Starview Drive		Amount of Each Receipt this Period 350.00
City Oakland	State CA	Zip Code 94618
FEC ID number of contributing federal political committee. C		
Name of Employer San Francisco State University	Occupation Dean	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>B. Ms. Sabrina Steketee</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 26 / 2012 <b>Transaction ID : 3526539</b>
Mailing Address PO Box 566		Amount of Each Receipt this Period 1000.00
City Boulder	State MT	Zip Code 59632
FEC ID number of contributing federal political committee. C		
Name of Employer KEY Personnel, Inc.	Occupation Employment Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Mrs. Lilo J. Leeds</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 26 / 2012 <b>Transaction ID : 3527458</b>
Mailing Address P.O. Box 220417		Amount of Each Receipt this Period 5000.00
City Great Neck	State NY	Zip Code 11022
FEC ID number of contributing federal political committee. C		
Name of Employer Institute for Student Achievement	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6350.00
<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 85 OF 127
	<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)  
**WOMEN VOTE!**

**A. MARTHA Pomerleau**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2618 S. Scott St.  
 City Spokane State WA Zip Code 99203  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 25 / 2012  
**Transaction ID : 3527459**  
 Amount of Each Receipt this Period  
 350.00

**B. Ms. Eve Ilsen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1720 Lehigh St.  
 City Boulder State CO Zip Code 80305  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Aleph Alliance for Jewish Renewal Occupation rabbinic pastor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 25 / 2012  
**Transaction ID : 3527460**  
 Amount of Each Receipt this Period  
 72.00

**C. Ms. Sandy Fortier**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3265 N. Maple Rd  
 City Ann Arbor State MI Zip Code 48105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Employed Occupation Psychotherapist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2012  
**Transaction ID : 3527461**  
 Amount of Each Receipt this Period  
 5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5422.00  
**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 86 OF 127  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial)  
**A. Keeping America Competitive**

Mailing Address PO Box 58635

City Philadelphia      State PA      Zip Code 19102

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

Name of Employer      Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 02 / 2012  
**Transaction ID : 3527612**

Amount of Each Receipt this Period  
10000.00

Full Name (Last, First, Middle Initial)  
**B. Mr. Scott Shenker**

Mailing Address 860 San Jude Ave

City Palo Alto      State CA      Zip Code 94306

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

Name of Employer ICSI      Occupation Scientist

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
330000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 04 / 2012  
**Transaction ID : 3533939**

Amount of Each Receipt this Period  
30000.00

Full Name (Last, First, Middle Initial)  
**C. Ms. Alice Wingwall**

Mailing Address 2717 Russell Street

City Berkeley      State CA      Zip Code 94075

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

Name of Employer Self      Occupation Artist

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 02 / 2012  
**Transaction ID : 3535129**

Amount of Each Receipt this Period  
75.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 40075.00

**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 87 OF 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Ronald Abramson</b>		Date of Receipt
Mailing Address 1700 K Street, NW, #300		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2012"/>
City	State	Zip Code
Washington	DC	20006
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 3535145</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Buchanan Ingersoll & Rooney	Attorney	<input type="text" value="5000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="41500.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Ms. Irene Fischer-Davidson</b>		Date of Receipt
Mailing Address 1733 NW 25TH AVE		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2012"/>
City	State	Zip Code
Portland	OR	97210
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 3535267</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
retired	Retired	<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1700.00"/>	

Full Name (Last, First, Middle Initial) <b>c. Ms. Gladys G. Cofrin</b>		Date of Receipt
Mailing Address 14720 NW 13th PI		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2012"/>
City	State	Zip Code
Newberry	FL	32669
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 3535859</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Self Employed	Counselor	<input type="text" value="25000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="100000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="30500.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 127
	<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)  
**WOMEN VOTE!**

**A. America Votes Action Fund**

Full Name (Last, First, Middle Initial)  
Mailing Address 1155 Connecticut Avenue NW,  
Ste 600

City Washington State DC Zip Code 20003

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
310000.00

Date of Receipt  
11 / 05 / 2012  
**Transaction ID : 3535860**

Amount of Each Receipt this Period  
110000.00

**B. Michael A. Bloomberg**

Full Name (Last, First, Middle Initial)  
Mailing Address 17 E 79th St

City New York State NY Zip Code 10075

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

Name of Employer Occupation  
City of New York Mayor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  
11 / 05 / 2012  
**Transaction ID : 3536887**

Amount of Each Receipt this Period  
50000.00

**C. Ms. Abigail Disney**

Full Name (Last, First, Middle Initial)  
Mailing Address 4444 Lakeside Drive

City Burbank State CA Zip Code 91505

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

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
11 / 08 / 2012  
**Transaction ID : 3538014**

Amount of Each Receipt this Period  
10000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	170000.00
<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 89 OF 127
	<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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. Mr. Eric Wepsic</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 14 / 2012 <b>Transaction ID : 3538521</b>
Mailing Address 255 W 84th Street Apt 7C		Amount of Each Receipt this Period 8000.00
City New York	State NY	
Zip Code 10024		Aggregate Year-to-Date ▼ 8000.00
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Human Rights Campaign PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 19 / 2012 <b>Transaction ID : 4538521</b>
Mailing Address 1640 Rhode Island Ave, NW		Amount of Each Receipt this Period 100000.00
City Washington	State DC	
Zip Code 20036		Aggregate Year-to-Date ▼ 200000.00
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. DRIVE Committee</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 24 / 2012 <b>Transaction ID : 5538521</b>
Mailing Address 25 Louisiana Ave NW		Amount of Each Receipt this Period 150000.00
City Washington	State DC	
Zip Code 20001		Aggregate Year-to-Date ▼ 200000.00
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	258000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1233532.00

**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 90 OF 127
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial) <b>A. EMILY's List</b>		Date of Receipt
Mailing Address 1120 Connecticut Avenue NW Ste 1100		<input type="text" value="M M"/> / <input type="text" value="D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City Washington	State DC	Zip Code 20036
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 45865456</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="450000.00"/>
		Transfer from Affiliate

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Receipt
Mailing Address		<input type="text" value="M M"/> / <input type="text" value="D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Amount of Each Receipt this Period
Name of Employer	Occupation	<input type="text"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text"/>

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt
Mailing Address		<input type="text" value="M M"/> / <input type="text" value="D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Amount of Each Receipt this Period
Name of Employer	Occupation	<input type="text"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="450000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="450000.00"/>

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial)

**A. Grove Insight**

Mailing Address 10 SE 10th Ave

City Portland State OR Zip Code 97214

Purpose of Disbursement  
Polling/Surveys

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 18 / 2012

**Transaction ID : SB21B-282**

Amount of Each Disbursement this Period

6580.00

Full Name (Last, First, Middle Initial)

**B. New Partners Consulting, Inc.**

Mailing Address 1250 I St NW  
Ste 200

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 18 / 2012

**Transaction ID : SB21B-289**

Amount of Each Disbursement this Period

269.20

Full Name (Last, First, Middle Initial)

**C. Project New America**

Mailing Address 191 University Blvd #831

City Denver State CO Zip Code 80206

Purpose of Disbursement  
Polling/Surveys

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 18 / 2012

**Transaction ID : SB21B-293**

Amount of Each Disbursement this Period

12600.00

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

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

19449.20

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial)

**A. Catalyst**

Mailing Address 1090 Vermont Ave, NW  
Suite 300

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Publication & Dues

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 25 / 2012

**Transaction ID : SB21B-312**

Amount of Each Disbursement this Period

1800.00

Full Name (Last, First, Middle Initial)

**B. Catalyst**

Mailing Address 1090 Vermont Ave, NW  
Suite 300

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Publication & Dues

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 25 / 2012

**Transaction ID : SB21B-310**

Amount of Each Disbursement this Period

6000.00

Full Name (Last, First, Middle Initial)

**C. Project New America**

Mailing Address 191 University Blvd #831

City Denver State CO Zip Code 80206

Purpose of Disbursement  
Polling/Surveys

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 25 / 2012

**Transaction ID : SB21B-311**

Amount of Each Disbursement this Period

12600.00

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

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

20400.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial)

**A. The Feldman Group Inc.**

Mailing Address 508-510 8th Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Polling/Surveys

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2012

Transaction ID : SB21B-323

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

**B. First Data Merchant Services**

Mailing Address PO Box 6010

City Hagerstown State MD Zip Code 21741

Purpose of Disbursement  
Credit Card Service Charges

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 02 / 2012

Transaction ID : SB21B-336

Amount of Each Disbursement this Period

17109.39

Full Name (Last, First, Middle Initial)

**C. Authorize.net**

Mailing Address 808 East Utah Valley Drive

City American Fork State UT Zip Code 84003

Purpose of Disbursement  
Credit Card Service Charges

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 02 / 2012

Transaction ID : SB21B-335

Amount of Each Disbursement this Period

351.50

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

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

27460.89

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial)

**A. Catalyst**

Mailing Address 1090 Vermont Ave, NW  
Suite 300

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Publication & Dues

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 08 / 2012

**Transaction ID : SB21B-331**

Amount of Each Disbursement this Period

12457.47

Full Name (Last, First, Middle Initial)

**B. Civitas Public Affairs**

Mailing Address 601 13th St NW  
Suite 730N

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 08 / 2012

**Transaction ID : SB21B-332**

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

**C. Leila Pedersen**

Mailing Address 800 4th Street SW  
Apt N604

City Washington State DC Zip Code 20024

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 15 / 2012

**Transaction ID : SB21B-333**

Amount of Each Disbursement this Period

348.07

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

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

12457.47

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial)

**A. Grove Insight**

Mailing Address 10 SE 10th Ave

City Portland State OR Zip Code 97214

Purpose of Disbursement  
Polling/Surveys

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
1	1		2	0		2	0		

Transaction ID : SB21B-334

Amount of Each Disbursement this Period

6	2	2	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Blueprint Interactive**

Mailing Address 2229 North Pollard Street

City Arlington State VA Zip Code 22207

Purpose of Disbursement  
Generic Web Ads Credit

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
1	0		2	2		2	0		

Transaction ID : SB21B-438

Amount of Each Disbursement this Period

-	1	2	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. The New Media Firm**

Mailing Address 1730 Rhode Island Avenue, NW  
Ste 410

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Direct Mail Expense Credit

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
1	0		3	1		2	0		

Transaction ID : SB21B-402

Amount of Each Disbursement this Period

-	5	6	7	2	8	3	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

4	4	5	2	7	1	7	0	0	0
---	---	---	---	---	---	---	---	---	---

1	2	4	2	9	4	7	3	0	0
---	---	---	---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**WOMEN VOTE!**

Full Name (Last, First, Middle Initial)

**A. Joanne Mercer**

Mailing Address 14 Chatham Ct.

City Newport Beach State CA Zip Code 92660

Purpose of Disbursement  
Refund

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

10 / 23 / 2012

**Transaction ID : SB28A-337**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. Margaret Kingdon**

Mailing Address 755 Otter Creek Drive

City Gerrardstown State WV Zip Code 25420

Purpose of Disbursement  
Refund

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

10 / 23 / 2012

**Transaction ID : SB28A-338**

Amount of Each Disbursement this Period

5000.00

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) ▼

Category/  
Type

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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

7500.00

7500.00



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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 97 OF 127
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**WOMEN VOTE!**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>the Strategy Group</b>	Nature of Debt (Purpose): IL-17 Mailhouse
Mailing Address 1606 20th Street NW Floor 3	
City State Washington DC Zip Code 20009	

Outstanding Balance Beginning This Period 33232.77	<b>Transaction ID : SD-1251</b>	
Amount Incurred This Period 0.00	Payment This Period 33232.77	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Adelstein Liston</b>	Nature of Debt (Purpose): WI-Sen TV Production
Mailing Address 222 W. Ontario St Ste 600	
City State Chicago IL Zip Code 60654	

Outstanding Balance Beginning This Period 19445.00	<b>Transaction ID : SD-1253</b>	
Amount Incurred This Period 0.00	Payment This Period 19445.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Misson Control</b>	Nature of Debt (Purpose): WI-Sen Mailhouse
Mailing Address 114 A Mansfield Hollow Rd	
City State Zip Code Mansfield Center CT 06250	

Outstanding Balance Beginning This Period 162067.92	<b>Transaction ID : SD-1254</b>	
Amount Incurred This Period 0.00	Payment This Period 162067.92	Outstanding Balance at Close of This Period 0.00

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

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 98 OF 127
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**WOMEN VOTE!**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>The Pivot Group, Inc</b>	Nature of Debt (Purpose): AZ-08 Mailhouse
Mailing Address 1720 I St. NW Suite 550	
City State Zip Code Washington DC 20006	

Outstanding Balance Beginning This Period <input type="text" value="7029.12"/>	<b>Transaction ID : SD-1255</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="7029.12"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

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





**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>WOMEN VOTE!</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00473918
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M M</span> / <span style="border: 1px solid black; padding: 2px;">D D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Misson Control</b> <small>See Pre-Gen Report</small>	Date <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y</span> 10 / 18 / 2012
Mailing Address 114 A Mansfield Hollow Rd	Amount <span style="border: 1px solid black; padding: 2px;">54022.64</span>
City Mansfield Center State CT Zip Code 06250	
Purpose of Expenditure Mailhouse	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate Supported or Opposed by Expenditure: Tommy Thompson	Office Sought: <input type="checkbox"/> House State: WI <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2737258.92</span>	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

**Transaction ID : SE-6221**

Full Name (Last, First, Middle Initial) of Payee <b>Misson Control</b> <small>See Pre-Gen Report</small>	Date <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y</span> 10 / 18 / 2012
Mailing Address 114 A Mansfield Hollow Rd	Amount <span style="border: 1px solid black; padding: 2px;">54022.64</span>
City Mansfield Center State CT Zip Code 06250	
Purpose of Expenditure Mailhouse	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate Supported or Opposed by Expenditure: Tommy Thompson	Office Sought: <input type="checkbox"/> House State: WI <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2737258.92</span>	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

**Transaction ID : SE-6222**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">108045.28</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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.

*Caroline Fines*

Signature \_\_\_\_\_ [Electronically Filed] Date M M / D D / Y Y Y Y  
12 / 05 / 2012



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>WOMEN VOTE!</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00473918
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Stones' Phones Inc</b>		Date MM / DD / YYYY <b>10 / 18 / 2012</b>
Mailing Address 41-750 Rancho Las Palmas Drive Suite E-3		Amount <b>4699.35</b>
City Rancho Mirage      State CA      Zip Code 92270	<b>Transaction ID : SE-6225</b>	
Purpose of Expenditure Phone Banks	Category/ Type	Office Sought: <input type="checkbox"/> House      State: MA <input checked="" type="checkbox"/> Senate      District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Scott Brown		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>409943.43</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee <b>Moxie Media</b>		Date MM / DD / YYYY <b>10 / 18 / 2012</b>
Mailing Address PO Box 30084		Amount <b>34785.00</b>
City Seattle      State WA      Zip Code 30084	<b>Transaction ID : SE-6226</b>	
Purpose of Expenditure Mailhouse	Category/ Type	Office Sought: <input type="checkbox"/> House      State: NV <input checked="" type="checkbox"/> Senate      District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Dean Heller		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>940750.32</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<b>39484.35</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures.....	

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.

*Caroline Fines*      [Electronically Filed]      Date **12 / 05 / 2012**

Signature \_\_\_\_\_





**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>WOMEN VOTE!</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00473918
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>The Strategy Group</b> Reported as \$4,154.15		Date MM / DD / YYYY 10 / 19 / 2012
Mailing Address 1606 20th Street NW Floor 3		Amount 4153.25
City Washington	State DC	Zip Code 20009
Purpose of Expenditure Mailhouse	Category/ Type	<b>Transaction ID : SE-6229</b>
Name of Federal Candidate Supported or Opposed by Expenditure: Cheri Bustos		Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 17 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 274427.80		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee <b>Waterfront Strategies</b>		Date MM / DD / YYYY 10 / 19 / 2012
Mailing Address 3050 K Street NW Suite 100		Amount 319125.00
City Washington	State DC	Zip Code 20007
Purpose of Expenditure Media Buy	Category/ Type	<b>Transaction ID : SE-6230</b>
Name of Federal Candidate Supported or Opposed by Expenditure: Dean Heller		Office Sought: <input type="checkbox"/> House State: NV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 940750.32		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	323278.25
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures.....	

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.

*Caroline Fines*  
Signature [Electronically Filed] Date MM / DD / YYYY  
12 / 05 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>WOMEN VOTE!</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00473918
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Waterfront Strategies</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 19 / 2012
Mailing Address 3050 K Street NW Suite 100		Amount <span style="border: 1px solid black; padding: 2px;">4832.32</span>
City Washington State DC Zip Code 20007	<b>Transaction ID : SE-6231</b>	
Purpose of Expenditure Media Production	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input type="checkbox"/> House State: NV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Dean Heller		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">940750.32</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee <b>Misson Control</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 19 / 2012
Mailing Address 114 A Mansfield Hollow Rd		Amount <span style="border: 1px solid black; padding: 2px;">54114.00</span>
City Mansfield Center State CT Zip Code 06250	<b>Transaction ID : SE-6232</b>	
Purpose of Expenditure Mailhouse	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input type="checkbox"/> House State: WI <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tommy Thompson		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2737258.92</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">58946.32</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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.

*Caroline Fines*  
Signature [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
12 / 05 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>WOMEN VOTE!</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00473918
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Stones' Phones Inc</b>		Date <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>10 / 20 / 2012</b>
Mailing Address 41-750 Rancho Las Palmas Drive Suite E-3		Amount <span style="margin-left: 20px;">4503.00</span>
City Rancho Mirage State CA Zip Code 92270	<b>Transaction ID : SE-6233</b>	
Purpose of Expenditure Phone Banks	Category/Type	Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Scott Brown		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">409943.43</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee <b>Blueprint Interactive</b>		Date <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>10 / 22 / 2012</b>
Mailing Address 2229 North Pollard Street		Amount <span style="margin-left: 20px;">6000.00</span>
City Arlington State VA Zip Code 22207	<b>Transaction ID : SE-6234</b>	
Purpose of Expenditure On-line Buy	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 10 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Val Demings		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">246102.92</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="margin-left: 20px;">10503.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures.....	

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 Caroline Fines [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**12 / 05 / 2012**



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>WOMEN VOTE!</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00473918
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>The Pivot Group, Inc</b>		Date MM / DD / YYYY <b>10 / 23 / 2012</b>
Mailing Address 1720 I St. NW Suite 550		Amount <b>65289.18</b>
City Washington	State DC	
Zip Code 20006	<b>Transaction ID : SE-6237</b>	
Purpose of Expenditure Mailhouse	Category/ Type	Office Sought: <input type="checkbox"/> House    State: <u>MA</u> <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Scott Brown		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>409943.43</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Stones' Phones Inc</b>		Date MM / DD / YYYY <b>10 / 23 / 2012</b>
Mailing Address 41-750 Rancho Las Palmas Drive Suite E-3		Amount <b>4503.00</b>
City Rancho Mirage	State CA	
Zip Code 92270	<b>Transaction ID : SE-6238</b>	
Purpose of Expenditure Phone Banks	Category/ Type	Office Sought: <input type="checkbox"/> House    State: <u>MA</u> <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Scott Brown		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>409943.43</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>69792.18</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

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.

*Caroline Fines*

Signature

[Electronically Filed]

Date

MM / DD / YYYY  
**12 / 05 / 2012**



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>WOMEN VOTE!</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black;">C</span> C00473918       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Misson Control</b>	Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 0.8em;">M M M</span> / <span style="font-size: 0.8em;">D D D</span> / <span style="font-size: 0.8em;">Y Y Y Y Y Y</span>          10 / 24 / 2012       </div>			
Mailing Address 114 A Mansfield Hollow Rd	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 0.8em;">51156.00</span> </div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:45%;">City Mansfield Center</td> <td style="width:15%;">State CT</td> <td style="width:40%;">Zip Code 06250</td> </tr> </table>	City Mansfield Center	State CT	Zip Code 06250	<b>Transaction ID : SE-6241</b>
City Mansfield Center	State CT	Zip Code 06250		
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:45%;">Purpose of Expenditure Mailhouse</td> <td style="width:15%;">Category/ Type</td> <td style="width:40%;">Office Sought: <input type="checkbox"/> House    State: WI <input checked="" type="checkbox"/> Senate    District: <input type="checkbox"/> President</td> </tr> </table>	Purpose of Expenditure Mailhouse	Category/ Type	Office Sought: <input type="checkbox"/> House    State: WI <input checked="" type="checkbox"/> Senate    District: <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Purpose of Expenditure Mailhouse	Category/ Type	Office Sought: <input type="checkbox"/> House    State: WI <input checked="" type="checkbox"/> Senate    District: <input type="checkbox"/> President		
Name of Federal Candidate Supported or Opposed by Expenditure: Tommy Thompson	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 0.8em;">2737258.92</span> </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) of Payee <b>Stones' Phones Inc</b>	Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 0.8em;">M M M</span> / <span style="font-size: 0.8em;">D D D</span> / <span style="font-size: 0.8em;">Y Y Y Y Y Y</span>          10 / 25 / 2012       </div>			
Mailing Address 41-750 Rancho Las Palmas Drive Suite E-3	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 0.8em;">4503.00</span> </div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:45%;">City Rancho Mirage</td> <td style="width:15%;">State CA</td> <td style="width:40%;">Zip Code 92270</td> </tr> </table>	City Rancho Mirage	State CA	Zip Code 92270	<b>Transaction ID : SE-6242</b>
City Rancho Mirage	State CA	Zip Code 92270		
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:45%;">Purpose of Expenditure Phone Banks</td> <td style="width:15%;">Category/ Type</td> <td style="width:40%;">Office Sought: <input type="checkbox"/> House    State: MA <input checked="" type="checkbox"/> Senate    District: <input type="checkbox"/> President</td> </tr> </table>	Purpose of Expenditure Phone Banks	Category/ Type	Office Sought: <input type="checkbox"/> House    State: MA <input checked="" type="checkbox"/> Senate    District: <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Purpose of Expenditure Phone Banks	Category/ Type	Office Sought: <input type="checkbox"/> House    State: MA <input checked="" type="checkbox"/> Senate    District: <input type="checkbox"/> President		
Name of Federal Candidate Supported or Opposed by Expenditure: Scott Brown	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 0.8em;">409943.43</span> </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 0.8em;">55659.00</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 0.8em;"> </span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 0.8em;"> </span> </div>

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.

*Caroline Fines*  
 Signature \_\_\_\_\_ [Electronically Filed]    Date 
M M M / D D D / Y Y Y Y Y Y  
 12 / 05 / 2012





**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>WOMEN VOTE!</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00473918
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Adelstein Liston</b>		Date MM / DD / YYYY <b>10 / 30 / 2012</b>
Mailing Address 222 W. Ontario St Ste 600		Amount <b>306210.00</b>
City Chicago	State IL	Zip Code 60654
Purpose of Expenditure Media Buy	Category/Type	<b>Transaction ID : SE-6245</b>
Name of Federal Candidate Supported or Opposed by Expenditure: Tommy Thompson		Office Sought: <input type="checkbox"/> House    State: WI <input checked="" type="checkbox"/> Senate    District: <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
<b>2737258.92</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee <b>Adelstein Liston</b>		Date MM / DD / YYYY <b>10 / 30 / 2012</b>
Mailing Address 222 W. Ontario St Ste 600		Amount <b>204140.00</b>
City Chicago	State IL	Zip Code 60654
Purpose of Expenditure Media Buy	Category/Type	<b>Transaction ID : SE-6246</b>
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Baldwin		Office Sought: <input type="checkbox"/> House    State: WI <input checked="" type="checkbox"/> Senate    District: <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
<b>2737258.92</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<b>510350.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures.....	

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.

*Caroline Fines*  
Signature \_\_\_\_\_ Date **12 / 05 / 2012**  
[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>WOMEN VOTE!</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00473918
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Adelstein Liston</b> Reported as \$8,067		Date MM / DD / YYYY <b>10 / 30 / 2012</b>
Mailing Address 222 W. Ontario St Ste 600		Amount <b>9272.00</b>
City Chicago	State IL    Zip Code 60654	
Purpose of Expenditure Media Production	Category/Type	<b>Transaction ID : SE-6247</b>
Name of Federal Candidate Supported or Opposed by Expenditure: Tommy Thompson		Office Sought: <input type="checkbox"/> House    State: WI <input checked="" type="checkbox"/> Senate    District: <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <b>2737258.92</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee <b>Adelstein Liston</b>		Date MM / DD / YYYY <b>10 / 30 / 2012</b>
Mailing Address 222 W. Ontario St Ste 600		Amount <b>5378.00</b>
City Chicago	State IL    Zip Code 60654	
Purpose of Expenditure Media Production	Category/Type	<b>Transaction ID : SE-6248</b>
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Baldwin		Office Sought: <input type="checkbox"/> House    State: WI <input checked="" type="checkbox"/> Senate    District: <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <b>2737258.92</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>14650.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

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Signature Caroline Fines    [Electronically Filed]    Date MM / DD / YYYY **12 / 05 / 2012**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>WOMEN VOTE!</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00473918
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>The Pivot Group</b>		Date MM / DD / YYYY <b>10 / 30 / 2012</b>
Mailing Address 1720 I Street NW Ste 550		Amount <b>34324.64</b>
City Washington	State DC	Zip Code 20006
Purpose of Expenditure Mailhouse	Category/ Type	<b>Transaction ID : SE-6249</b>
Name of Federal Candidate Supported or Opposed by Expenditure: Gloria Negrete Mcleod		Office Sought: <input type="checkbox"/> House    State: CA <input checked="" type="checkbox"/> Senate    District: 35 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
<b>136106.90</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee <b>Waterfront Strategies</b>		Date MM / DD / YYYY <b>10 / 30 / 2012</b>
Mailing Address 3050 K Street NW Suite 100		Amount <b>99900.00</b>
City Washington	State DC	Zip Code 20007
Purpose of Expenditure Media Buy	Category/ Type	<b>Transaction ID : SE-6250</b>
Name of Federal Candidate Supported or Opposed by Expenditure: Dean Heller		Office Sought: <input type="checkbox"/> House    State: NV <input checked="" type="checkbox"/> Senate    District: <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
<b>940750.32</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>134224.64</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

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.

*Caroline Fines*  
Signature \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY **12 / 05 / 2012**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>WOMEN VOTE!</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00473918
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Waterfront Strategies</b>		Date MM / DD / YYYY 10 / 30 / 2012
Mailing Address 3050 K Street NW Suite 100		Amount 93778.45
City Washington	State DC	
Zip Code 20007	<b>Transaction ID : SE-6251</b>	
Purpose of Expenditure Media Buy	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House    State: AZ <input type="checkbox"/> Senate    District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Jonathan Paton		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 232513.90		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee <b>Shorr Johnson Magnus</b>		Date MM / DD / YYYY 10 / 30 / 2012
Mailing Address 1800 S Street		Amount 6186.33
City Washington	State DC	
Zip Code 20009	<b>Transaction ID : SE-6252</b>	
Purpose of Expenditure Media Production	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House    State: AZ <input type="checkbox"/> Senate    District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Jonathan Paton		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 232513.90		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	99964.78
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures.....	

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*Caroline Fines*

[Electronically Filed]

Date

MM / DD / YYYY
12 / 05 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>WOMEN VOTE!</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00473918
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Waterfront Strategies</b>		Date MM / DD / YYYY <b>10 / 30 / 2012</b>
Mailing Address 3050 K Street NW Suite 100		Amount <b>96390.00</b>
City Washington	State DC	Zip Code 20007
Purpose of Expenditure Media Buy	Category/Type	<b>Transaction ID : SE-6253</b>
Name of Federal Candidate Supported or Opposed by Expenditure: Vernon Parker		Office Sought: <input checked="" type="checkbox"/> House    State: <u>AZ</u> <input type="checkbox"/> Senate    District: <u>09</u> <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
<b>99953.28</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee <b>Murphy Vogel Askew Reilly LLC</b>		Date MM / DD / YYYY <b>10 / 30 / 2012</b>
Mailing Address 901 N. Washington St Suite 400		Amount <b>3563.28</b>
City Alexandria	State VA	Zip Code 22314
Purpose of Expenditure Media Production	Category/Type	<b>Transaction ID : SE-6254</b>
Name of Federal Candidate Supported or Opposed by Expenditure: Vernon Parker		Office Sought: <input checked="" type="checkbox"/> House    State: <u>AZ</u> <input type="checkbox"/> Senate    District: <u>09</u> <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
<b>99953.28</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>99953.28</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	

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.

*Caroline Fines*  
Signature \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY  
**12 / 05 / 2012**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>WOMEN VOTE!</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00473918
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>The New Media Firm Inc</b>		Date MM / DD / YYYY <b>10 / 31 / 2012</b>
Mailing Address 1730 Rhode Island Ave NW Suite 213		Amount <b>2836.41</b>
City Washington      State DC      Zip Code 20036	<b>Transaction ID : SE-6255</b>	
Purpose of Expenditure On-line Production	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House      State: NH <input type="checkbox"/> Senate      District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Frank Guinta		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>70478.64</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee <b>The New Media Firm Inc</b>		Date MM / DD / YYYY <b>10 / 31 / 2012</b>
Mailing Address 1730 Rhode Island Ave NW Suite 213		Amount <b>2836.42</b>
City Washington      State DC      Zip Code 20036	<b>Transaction ID : SE-6256</b>	
Purpose of Expenditure On-line Production	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House      State: NH <input type="checkbox"/> Senate      District: 02 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Charles Bass		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>68964.10</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>5672.83</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	

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 Caroline Fines      [Electronically Filed]      Date MM / DD / YYYY **12 / 05 / 2012**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>WOMEN VOTE!</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00473918
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Adelstein Liston</b>		Date MM / DD / YYYY <b>11 / 01 / 2012</b>
Mailing Address 222 W. Ontario St Ste 600		Amount <b>18352.00</b>
City Chicago	State IL	
Zip Code 60654	<b>Transaction ID : SE-6257</b>	
Purpose of Expenditure Radio Buy	Category/ Type	Office Sought: <input type="checkbox"/> House    State: WI <input checked="" type="checkbox"/> Senate    District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tommy Thompson		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>2737258.92</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee <b>Adelstein Liston</b>		Date MM / DD / YYYY <b>11 / 01 / 2012</b>
Mailing Address 222 W. Ontario St Ste 600		Amount <b>7341.00</b>
City Chicago	State IL	
Zip Code 60654	<b>Transaction ID : SE-6258</b>	
Purpose of Expenditure Radio Buy	Category/ Type	Office Sought: <input type="checkbox"/> House    State: WI <input checked="" type="checkbox"/> Senate    District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Baldwin		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>2737258.92</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>25693.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	

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*Caroline Fines*  
Signature \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY  
**12 / 05 / 2012**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>WOMEN VOTE!</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00473918
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Adelstein Liston</b>		Date <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>11 / 01 / 2012</b>
Mailing Address 222 W. Ontario St Ste 600		Amount <span style="margin-left: 20px;">5506.00</span>
City Chicago	State IL	
Zip Code 60654	<b>Transaction ID : SE-6259</b>	
Purpose of Expenditure Radio Buy	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">12000.00</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Adelstein Liston</b>		Date <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>11 / 01 / 2012</b>
Mailing Address 222 W. Ontario St Ste 600		Amount <span style="margin-left: 20px;">5506.00</span>
City Chicago	State IL	
Zip Code 60654	<b>Transaction ID : SE-6260</b>	
Purpose of Expenditure Radio Buy	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Mitt Romney		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">12000.00</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="margin-left: 20px;">11012.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures.....	

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 Caroline Fines [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**12 / 05 / 2012**



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>WOMEN VOTE!</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00473918
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Adelstein Liston</b>		Date MM / DD / YYYY <b>11 / 01 / 2012</b>
Mailing Address 222 W. Ontario St Ste 600		Amount <b>1648.00</b>
City Chicago	State IL      Zip Code 60654	
Purpose of Expenditure Radio Production	Category/Type	<b>Transaction ID : SE-6261</b>
Name of Federal Candidate Supported or Opposed by Expenditure: Tommy Thompson		Office Sought: <input type="checkbox"/> House      State: WI <input checked="" type="checkbox"/> Senate      District: <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <b>2737258.92</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee <b>Adelstein Liston</b>		Date MM / DD / YYYY <b>11 / 01 / 2012</b>
Mailing Address 222 W. Ontario St Ste 600		Amount <b>659.00</b>
City Chicago	State IL      Zip Code 60654	
Purpose of Expenditure Radio Production	Category/Type	<b>Transaction ID : SE-6262</b>
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Baldwin		Office Sought: <input type="checkbox"/> House      State: WI <input checked="" type="checkbox"/> Senate      District: <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <b>2737258.92</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>2307.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

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*Caroline Fines*

Signature \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY **12 / 05 / 2012**



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>WOMEN VOTE!</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00473918
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>The Pivot Group</b>		Date MM / DD / YYYY <b>11 / 01 / 2012</b>
Mailing Address 1720 I Street NW Ste 550		Amount <b>34324.64</b>
City Washington	State DC	Zip Code 20006
Purpose of Expenditure Mailhouse	Category/ Type	<b>Transaction ID : SE-6265</b>
Name of Federal Candidate Supported or Opposed by Expenditure: Gloria Negrete Mcleod		Office Sought: <input type="checkbox"/> House    State: CA <input checked="" type="checkbox"/> Senate    District: 35 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
<b>136106.90</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee <b>Adelstein Liston</b>		Date MM / DD / YYYY <b>11 / 02 / 2012</b>
Mailing Address 222 W. Ontario St Ste 600		Amount <b>10000.00</b>
City Chicago	State IL	Zip Code 60654
Purpose of Expenditure Media Buy	Category/ Type	<b>Transaction ID : SE-6266</b>
Name of Federal Candidate Supported or Opposed by Expenditure: Tommy Thompson		Office Sought: <input type="checkbox"/> House    State: WI <input checked="" type="checkbox"/> Senate    District: <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
<b>2737258.92</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<b>134324.64</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures.....	

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*Caroline Fines*  
Signature \_\_\_\_\_ Date **12 / 05 / 2012**

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>WOMEN VOTE!</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00473918
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Adelstein Liston</b>		Date MM / DD / YYYY <b>11 / 02 / 2012</b>
Mailing Address 222 W. Ontario St Ste 600		Amount <b>5000.00</b>
City Chicago	State IL      Zip Code 60654	
Purpose of Expenditure Media Production	Category/Type	<b>Transaction ID : SE-6267</b>
Name of Federal Candidate Supported or Opposed by Expenditure: Tommy Thompson		Office Sought: <input type="checkbox"/> House      State: WI <input checked="" type="checkbox"/> Senate      District: <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <b>2737258.92</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee <b>Adelstein Liston</b>		Date MM / DD / YYYY <b>11 / 02 / 2012</b>
Mailing Address 222 W. Ontario St Ste 600		Amount <b>1666.67</b>
City Chicago	State IL      Zip Code 60654	
Purpose of Expenditure Online Ads	Category/Type	<b>Transaction ID : SE-6268</b>
Name of Federal Candidate Supported or Opposed by Expenditure: Tommy Thompson		Office Sought: <input type="checkbox"/> House      State: WI <input checked="" type="checkbox"/> Senate      District: <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <b>2737258.92</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<b>6666.67</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures.....	

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*Caroline Fines*  
Signature \_\_\_\_\_ [Electronically Filed]      Date MM / DD / YYYY  
**12 / 05 / 2012**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>WOMEN VOTE!</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00473918
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Adelstein Liston</b>		Date MM / DD / YYYY <b>11 / 02 / 2012</b>
Mailing Address 222 W. Ontario St Ste 600		Amount <b>3333.33</b>
City Chicago	State IL	
Zip Code 60654	<b>Transaction ID : SE-6269</b>	
Purpose of Expenditure Online Ads	Category/ Type	Office Sought: <input type="checkbox"/> House    State: <u>WI</u> <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Baldwin		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>2737258.92</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee <b>Winning Connections</b>		Date MM / DD / YYYY <b>11 / 04 / 2012</b>
Mailing Address 317 Pennsylvania Avenue, SE 2nd Floor		Amount <b>30000.00</b>
City Washington	State DC	
Zip Code 20003	<b>Transaction ID : SE-6270</b>	
Purpose of Expenditure Phone Banks	Category/ Type	Office Sought: <input type="checkbox"/> House    State: <u>MO</u> <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Claire McCaskill		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>572322.10</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>33333.33</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	

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*Caroline Fines*  
Signature \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY  
**12 / 05 / 2012**



