

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Women's Campaign Forum

ADDRESS (number and street) 1900 L Street, NW Suite 500
 Check if different than previously reported. (ACC)
Washington DC 20036

2. **FEC IDENTIFICATION NUMBER** C00424150
3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period 09 01 2010 through 09 30 2010

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

Signature of Treasurer Electronically Filed by Siobhan Bennett Date 10 20 2010

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

Office Use Only									
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Women's Campaign Forum

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		21852.50
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	23370.78									
(c) Total Receipts (from Line 19)	11573.68	87599.52								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	34944.46	109452.02								
7. Total Disbursements (from Line 31)	18121.42	92628.98								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	16823.04	16823.04								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Women's Campaign Forum

Report Covering the Period:

From:

MM 09 DD 01 YY 20 YY 10

To:

MM 09 DD 30 YY 20 YY 10

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)	8066.68	43381.52
(ii) Unitemized	3507.00	44218.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	11573.68	87599.52
(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)	11573.68	87599.52
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (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))	11573.68	87599.52
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	11573.68	87599.52

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	11396.42	46453.98
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	11396.42	46453.98
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	39900.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	1725.00	6275.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	18121.42	92628.98
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	18121.42	92628.98

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 17

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)	11573.68	87599.52
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11573.68	87599.52
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	11396.42	46453.98
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	11396.42	46453.98

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 17
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Women's Campaign Forum

A. Full Name (Last, First, Middle Initial)
Lauren Mitchell

Mailing Address 12 W 96th St
#9C

City State Zip Code
New York NY 10025

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

Name of Employer Occupation
Dodger Theatricals Producer

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	8	/	2	0	1	0

Transaction ID: C6246467

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Caren Z. Turner, Esq.

Mailing Address 60 Madison Avenue
Turner Government & Public Affairs

City State Zip Code
Tenafly NJ 07670

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
625.02

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	1	/	2	0	1	0

Transaction ID: C6255073

Amount of Each Receipt this Period
208.34

C. Full Name (Last, First, Middle Initial)
Caren Z. Turner, Esq.

Mailing Address 60 Madison Avenue
Turner Government & Public Affairs

City State Zip Code
Tenafly NJ 07670

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
625.02

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	1	0

Transaction ID: C6288676

Amount of Each Receipt this Period
208.34

SUBTOTAL of Receipts This Page (optional) ► **2916.68**

TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 17
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Women's Campaign Forum

A.

Full Name (Last, First, Middle Initial) Sankey V Williams		Date of Receipt
Mailing Address 307 Brentford Rd		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 09 / 2010
City	State	Zip Code
Haverford	PA	19041-1718
FEC ID number of contributing federal political committee.		Transaction ID: C6246294
C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 5000.00
Name of Employer	Occupation	
University of Pennsylvania	Professor of Medicine	
Receipt For: 2010	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text"/> 5000.00	
<input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) Karen A. Willyoung		Date of Receipt
Mailing Address PO Box 2210		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 03 / 2010
City	State	Zip Code
Williamsville	NY	14231-2210
FEC ID number of contributing federal political committee.		Transaction ID: C6319516
C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 150.00
Name of Employer	Occupation	
Retired	Retired	
Receipt For: 2010	Aggregate Year-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text"/> 250.00	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 5150.00
TOTAL This Period (last page this line number only)	<input type="text"/> 8066.68

**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's Campaign Forum

A.	Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 53852 City Phoenix State AZ Zip Code 85072-3852 Purpose of Disbursement Merchant Services Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D365136 Date of Disbursement 09 / 07 / 2010 Amount of Each Disbursement this Period 19.51 001 Category/ Type
B.	Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 53852 City Phoenix State AZ Zip Code 85072-3852 Purpose of Disbursement Merchant Services Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D365138 Date of Disbursement 09 / 30 / 2010 Amount of Each Disbursement this Period 4.95 001 Category/ Type
C.	Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 53852 City Phoenix State AZ Zip Code 85072-3852 Purpose of Disbursement Merchant Services Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D365151 Date of Disbursement 09 / 13 / 2010 Amount of Each Disbursement this Period 1.31 001 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	25.77
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Women's Campaign Forum

A. Bankcard Merchant	Full Name (Last, First, Middle Initial)	Transaction ID: D365141																					
	Bankcard Merchant	Date of Disbursement																					
Mailing Address 7300 Chapman Hwy		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		0	2		2	0	1	0														
City Knoxville State TN Zip Code 37920-6612		Amount of Each Disbursement this Period																					
Purpose of Disbursement Merchant Services Fees		<table border="1"> <tr> <td>20.35</td> </tr> </table>		20.35																			
20.35																							
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Category/Type																					
Disbursement For: 2010		001																					
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		Type																					
<input type="checkbox"/> Other (specify) ▼																							
State: District:																							

B. Bankcard Merchant	Full Name (Last, First, Middle Initial)	Transaction ID: D365142																					
	Bankcard Merchant	Date of Disbursement																					
Mailing Address 7300 Chapman Hwy		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		0	2		2	0	1	0														
City Knoxville State TN Zip Code 37920-6612		Amount of Each Disbursement this Period																					
Purpose of Disbursement Merchant Services Fees		<table border="1"> <tr> <td>9.00</td> </tr> </table>		9.00																			
9.00																							
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Category/Type																					
Disbursement For: 2010		001																					
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		Type																					
<input type="checkbox"/> Other (specify) ▼																							
State: District:																							

C. Bankcard Merchant	Full Name (Last, First, Middle Initial)	Transaction ID: D365146																					
	Bankcard Merchant	Date of Disbursement																					
Mailing Address 7300 Chapman Hwy		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	3		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		0	3		2	0	1	0														
City Knoxville State TN Zip Code 37920-6612		Amount of Each Disbursement this Period																					
Purpose of Disbursement Merchant Services Fees		<table border="1"> <tr> <td>35.40</td> </tr> </table>		35.40																			
35.40																							
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Category/Type																					
Disbursement For: 2010		001																					
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		Type																					
<input type="checkbox"/> Other (specify) ▼																							
State: District:																							

SUBTOTAL of Disbursements This Page (optional)	▶	64.75
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Women's Campaign Forum

A.	Full Name (Last, First, Middle Initial) Blue State Digital	Transaction ID: D365134 Date of Disbursement
	Mailing Address 734 15th St NW Blue State Digital	<input type="text" value="09"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20005-1021	Amount of Each Disbursement this Period
	Purpose of Disbursement Website Maintenance	<input type="text" value="397.50"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Democracy Engine c/o ActBlue	Transaction ID: D365163 Date of Disbursement
	Mailing Address 14 Arrow St Ste 11	<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City Cambridge State MA Zip Code 02138-5106	Amount of Each Disbursement this Period
	Purpose of Disbursement Website expence	<input type="text" value="2550.00"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Gordon & Schwenkmeyer, Inc.	Transaction ID: D365205 Date of Disbursement
	Mailing Address 300 N Sepulveda Blvd Gordon & Schwenkmeyer, Inc.	<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City El Segundo State CA Zip Code 90245-4477	Amount of Each Disbursement this Period
	Purpose of Disbursement Telemarketing Fees	<input type="text" value="8347.42"/>
	Candidate Name	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="11294.92"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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)

PAGE 11 / 17

<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's Campaign Forum

A.	Full Name (Last, First, Middle Initial) Wachovia Bank		Transaction ID: D365143	
	Mailing Address PO Box 40031 Wachovia Bank, Regional Servicente		Date of Disbursement 09 / 10 / 2010	
	City Roanoke	State VA	Zip Code 24022-0031	Amount of Each Disbursement this Period 10.98
	Purpose of Disbursement Bank Fees		001	
	Candidate Name		Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	State:	District:		

SUBTOTAL of Disbursements This Page (optional)

10.98

TOTAL This Period (last page this line number only)

11396.42

**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)

PAGE 12 / 17

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

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NAME OF COMMITTEE (In Full)
Women's Campaign Forum

<p>A. Full Name (Last, First, Middle Initial) Betty Sutton for Congress</p> <p>Mailing Address 1700 W Market St #155</p> <p>City Akron State OH Zip Code 44313</p> <p>Purpose of Disbursement Federal Contribution</p> <p>Candidate Name Betty Sutton</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: OH District: 13</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D365202</p> <p>Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Busby for Congress 2010</p> <p>Mailing Address 1531 GRAND AVENUE SUITE D</p> <p>City SAN MARCOS State CA Zip Code 92078</p> <p>Purpose of Disbursement Federal contribution</p> <p>Candidate Name Ms. Francine Busby</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District: 50</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D354935</p> <p>Date of Disbursement 09 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Joyce Johnson for Congress</p> <p>Mailing Address Park West Finance Station PO Box 20445</p> <p>City New York State NY Zip Code 10025</p> <p>Purpose of Disbursement Federal Contribution</p> <p>Candidate Name Joyce Johnson</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 15</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D354889</p> <p>Date of Disbursement 09 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Women's Campaign Forum

A. Full Name (Last, First, Middle Initial) Kuster for Congress <hr/> Mailing Address PO BOX 1498 <hr/> City CONCORD State NH Zip Code 03302 <hr/> Purpose of Disbursement Federal Contribution Candidate Name Ms. Ann McLane-Kuster <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 02 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D359422 Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2010
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011

B. Full Name (Last, First, Middle Initial) PAULA BROOKS FOR CONGRESS <hr/> Mailing Address 222 EAST 11TH AVENUE <hr/> City COLUMBUS State OH Zip Code 43201 <hr/> Purpose of Disbursement Federal Contribution Candidate Name Paula Brooks <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 12 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D365162 Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011

C. Full Name (Last, First, Middle Initial) ROBIN CARNAHAN FOR SENATE <hr/> Mailing Address PO BOX 50378 <hr/> City CLAYTON State MO Zip Code 63105 <hr/> Purpose of Disbursement Federal Contribution Candidate Name Robin Carnahan <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D356697 Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011

SUBTOTAL of Disbursements This Page (optional) ▶	2500.00
TOTAL This Period (last page this line number only) ▶	5000.00

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Women's Campaign Forum

A. Full Name (Last, First, Middle Initial) Campaign to Elect Virginia Sweet Mailing Address 2040 Glen Eagle Lane City Birmingham State AL Zip Code 35242 Purpose of Disbursement Non-Federal Contribution Candidate Name Virginia Sweet Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 43 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D365199 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2010
	Amount of Each Disbursement this Period 100.00 Category/Type 011

B. Full Name (Last, First, Middle Initial) Citizens for Carole Cheney Mailing Address PO Box 325 City Lombard State IL Zip Code 60148 Purpose of Disbursement Non-Federal Contribution Candidate Name Carole Cheney Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D365170 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2010
	Amount of Each Disbursement this Period 100.00 Category/Type 011

C. Full Name (Last, First, Middle Initial) Committee to Elect Elizabeth Double Mailing Address 708 NW 3rd Ave City Galva State IL Zip Code 61434 Purpose of Disbursement Non-Federal Contribution Candidate Name Elizabeth Double Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D365174 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2010
	Amount of Each Disbursement this Period 100.00 Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Women's Campaign Forum

A.	Full Name (Last, First, Middle Initial) Friends of April Vargas	Transaction ID: D365180 Date of Disbursement
	Mailing Address 377 12th St.	<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City Montara State CA Zip Code 94037	Amount of Each Disbursement this Period
	Purpose of Disbursement Non-Federal Contribution	<input type="text" value="150.00"/>
	Candidate Name April Vargas	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Friends of Velda Jones-Potter	Transaction ID: D354936 Date of Disbursement
	Mailing Address P.O. Box 9612	<input type="text" value="09"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City Wilmington State DE Zip Code 19809	Amount of Each Disbursement this Period
	Purpose of Disbursement Non-federal contribution	<input type="text" value="500.00"/>
	Candidate Name Velda Jones-Porter	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DE District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Hava Holzhauser, Democrat for State Representative	Transaction ID: D365194 Date of Disbursement
	Mailing Address P.O. Box 272441	<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City Boca Raton State FL Zip Code 33427	Amount of Each Disbursement this Period
	Purpose of Disbursement Non-Federal Contribution	<input type="text" value="100.00"/>
	Candidate Name Hava Holtzhauer	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 87	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="750.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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)

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<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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Women's Campaign Forum

A.

Full Name (Last, First, Middle Initial)
Loranne Ausley for CFO

Transaction ID: D365201
Date of Disbursement

Mailing Address PO Box 10083

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	0

City Tallahassee State FL Zip Code 32301

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement
Non-Federal Contribution

011
Category/
Type

Candidate Name
Loranne Ausley

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: FL District:

B.

Full Name (Last, First, Middle Initial)
Millie Herrera Campaign

Transaction ID: D365183
Date of Disbursement

Mailing Address PO Box 830714

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	0

City Miami State FL Zip Code 33283

Amount of Each Disbursement this Period

100.00

Purpose of Disbursement
Non-Federal Contribution

011
Category/
Type

Candidate Name
Millie Herrera

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: FL District: 11

C.

Full Name (Last, First, Middle Initial)
Friends of Robin Kelly

Transaction ID: D365200
Date of Disbursement

Mailing Address PO Box 6953

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	0

City Chicago State IL Zip Code 60605

Amount of Each Disbursement this Period

200.00

Purpose of Disbursement
Non-Federal Contribution

011
Category/
Type

Candidate Name
Robin Kelly

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: IL District:

SUBTOTAL of Disbursements This Page (optional)

550.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 17 / 17

<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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Women's Campaign Forum

A.

Full Name (Last, First, Middle Initial)
Shiva Farivar For Irvine City Council 2010

Transaction ID: D365176

Date of Disbursement

Mailing Address 5405 Alton Parkway, Suite A-268

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	0

City Irvine State CA Zip Code 92604

Amount of Each Disbursement this Period

125.00

Purpose of Disbursement
Non-Federal Contribution

011
Category/ Type

Candidate Name
Shiva Farivar

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: CA District:

SUBTOTAL of Disbursements This Page (optional) ►

125.00

TOTAL This Period (last page this line number only) ►

1725.00
