24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48				
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼				
WOMEN VOTE!					
	C C00473918				
Check if 24-hour report 48-hour report New report Amends report filed on					
Full Name of Payee	Date of Public Distribution/Dissemination				
The New Media Firm	07 29 2014				
Mailing Address 1730 Rhode Island Avenue, NW					
Ste 213	Amount				
City State Zip Code	51585.14				
Washington DC 20036	Transaction ID : SE-6208 Date of Disbursement or Obligation				
Purpose of Expenditure Radio Buy Category/ Type	M M / D D / Y Y Y Y				
Name of Federal Candidate Support Offic	e Sought: X House District: 14				
Brenda Lawrence Oppose	President Senate State: MI				
Calendar Year-To-Date Per Election for Office Sought Disb 243361.55 Disb 2014	ursement For:				
Full Name of Payee	Date of Public Distribution/Dissemination				
The New Media Firm	07 29 2014				
Mailing Address 1730 Rhode Island Avenue, NW					
Ste 213	Amount				
City State Zip Code	25407.61				
Washington DC 20036	Transaction ID : SE-6209 Date of Disbursement or Obligation				
Purpose of Expenditure Category/	M M / D D / Y Y Y Y				
Radio Buy Type					
Name of Federal Candidate Support Office	e Sought: X House District: 14				
Hansen Clarke Oppose	President Senate State: MI				
	ursement For: X Primary General				
Per Election for Office Sought 243361.55	Other (specify) Other				
(a) SUBTOTAL of Itemized Independent Expenditures	76992.75				
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL 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.					
Buto	07 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Signature					

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	EXI ENDI	TOTILO		PAGE 2 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN VOTE!				C C00473918
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M / D D / Y B Y B Y B Y
Full Name of Payee The New Media Firm				of Public Distribution/Dissemination
Mailing Address 1730 Rhode Island Avenue, NW			Amou	
	Ste 213			
1 '	State Zip Code DC 20036			1876.00 action ID : SE-6210 of Disbursement or Obligation
Purpose of Expenditure Radio Production		Category/ Type		M / D D / Y Y Y Y Y
Name of Federal Candidate		Support	Office Sough	t: X House District: 14
Brenda Lawrence		Oppose	Preside	NAI .
Calendar Year-To-Date Per Election for Office Sought	2	43361.55	Disbursemen 2014 O	t For:
Full Name of Payee The New Media Firm				of Public Distribution/Dissemination
Mailing Address 1730 Rhode Island Avenue, NW			Amou	
Ste 213				
City S Washington	State DC	Zip Code 20036		924.00 ction ID : SE-6211 of Disbursement or Obligation
Purpose of Expenditure Radio Production		Category/ Type	Date (DISBUISEMENT OF CONTINUENT OF
Name of Federal Candidate		Support	Office Sough	t: X House District: 14
Hansen Clarke		X Oppose	Preside	ent Senate State: MI
Calendar Year-To-Date Per Election for Office Sought		243361.55	Disbursemen 2014 O	t For: X Primary General
(a) SUBTOTAL of Itemized Independent Expenditures				2800.00
(b) SUBTOTAL of Uniternized Independent Expenditure	es			
(c) TOTAL Independent Expenditures			•	7 7
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	[Electroni	ically Filed] Date	07	29 2014
5				

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	EXI END	TOTILO		PAGE 3 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN VOTE!				C C00473918
Check if 24-hour report 48-hour report	X New repo	ort Amends repo		M = M / D = D / Y = Y = Y = Y
Full Name of Payee			Date	of Public Distribution/Dissemination
Moxie Media			[07
Mailing Address PO Box 30084			Amou	unt
City	State	Zip Code	$-\Gamma$	14481.36
Seattle	WA 98113			saction ID : SE-6212 of Disbursement or Obligation
Purpose of Expenditure Mailhouse		Category/ Type		M M / D D / Y Y Y Y Y
Name of Federal Candidate		Support	Office Soug	ht: X House District: 14
Hansen Clarke		X Oppose	Presid	
Calendar Year-To-Date Per Election for Office Sought	, 2	243361.55	Disbursement 2014	nt For:
Full Name of Payee			Date	of Public Distribution/Dissemination
Moxie Media				07
Mailing Address PO Box 30084			Amo	unt
City	State	Zip Code	— I .	46257.69
Seattle	WA	98113		action ID : SE-6213 of Disbursement or Obligation
Purpose of Expenditure Mailhouse		Category/ Type] [M = M / D = D / Y = Y = Y
Name of Federal Candidate		X Support	Office Soug	ht: House District:
Colleen Wakako Hanabusa		Oppose	Presid	dent Senate State: HI
Calendar Year-To-Date Per Election for Office Sought		338573.60	Disburseme 2014	nt For:
(a) SUBTOTAL of Itemized Independent Expenditures.				60739.05
				7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditure	es		•	
(c) TOTAL Independent Expenditures			· [140531.80
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its ac	or authorized			
Caroline Fines	[Electron	ically Filed] Date	M M /	29 / 2014
Signature				