

# FEC FORM 5

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

1. (a) Name of Individual, Organization or Corporation INDEPENDENT WOMEN'S VOICE		3. FEC Identification Number <b>C</b> C90011115
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1875 I Street NW 5th Floor		
(c) City, State and ZIP Code WASHINGTON DC 20006		
2. <b>Corporate filers only</b>	Is the filer a qualified nonprofit corporation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Individual filers only</b>	Name of Employer	Occupation

4. TYPE OF REPORT (check appropriate boxes):

- (a)  April 15 Quarterly Report  24-Hour Notice  48-Hour Notice  
 July 15 Quarterly Report  
 October Quarterly Report  
 January 31 Year-End Report

(b) Is this Report an amendment? Yes  No

5. COVERING PERIOD: FROM  /  /   
 THROUGH  /  /

6. TOTAL CONTRIBUTIONS .....   
 7. TOTAL INDEPENDENT EXPENDITURES.....

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in constitution with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

**TYPE OR PRINT NAME OF PERSON COMPLETING FORM**

**SIGNATURE**

**DATE**

Heather R. Higgins

07/15/2011

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

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

**SCHEDULE 5-E**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)

INDEPENDENT WOMEN'S VOICE

Full Name (Last, First, Middle Initial) of Payee  
William W. Pascoe, III

Date

M M / D D / Y Y Y Y  
0 5 / 2 0 / 2 0 1 1

Mailing Address  
2101 Mill Road #413

Amount

2500.00

City State Zip Code  
Alexandria VA 22314

Purpose of Expenditure  
Creation and Production

Category/  
Type

Office Sought:  House State: NY  
 Senate District: 26  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
JANE CORWIN

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 9168.21

Disbursement For:  Primary  General  
2011  
 Other (specify) Special-General

Full Name (Last, First, Middle Initial) of Payee  
Victory Media Group

Date

M M / D D / Y Y Y Y  
0 5 / 2 0 / 2 0 1 1

Mailing Address  
1816 Garfield Avenue

Amount

4127.17

City State Zip Code  
Aurora IL 60506

Purpose of Expenditure  
List Rental

Category/  
Type

Office Sought:  House State: NY  
 Senate District: 26  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
JANE CORWIN

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 4127.17

Disbursement For:  Primary  General  
2011  
 Other (specify) Special-General

Full Name (Last, First, Middle Initial) of Payee  
Victory Media Group

Date

M M / D D / Y Y Y Y  
0 5 / 2 0 / 2 0 1 1

Mailing Address  
1816 Garfield Avenue

Amount

2541.04

City State Zip Code  
Aurora IL 60506

Purpose of Expenditure  
Phone Banks

Category/  
Type

Office Sought:  House State: NY  
 Senate District: 26  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
JANE CORWIN

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 6668.21

Disbursement For:  Primary  General  
2011  
 Other (specify) Special-General

(a) **SUBTOTAL** of Itemized Independent Expenditures .....

9168.21

(b) **SUBTOTAL** of Unitemized Independent Expenditures .....

(c) **TOTAL** Independent Expenditures .....  
(carry total from last page forward to Line 7)

**SCHEDULE 5-E**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)

INDEPENDENT WOMEN'S VOICE

Full Name (Last, First, Middle Initial) of Payee  
Victory Media Group

Date

M M / D D / Y Y Y Y  
0 5 / 2 1 / 2 0 1 1

Mailing Address  
1816 Garfield Avenue

Amount

2541.04

City State Zip Code  
Aurora IL 60506

Purpose of Expenditure  
Phone Banks & Calls

Category/  
Type

Office Sought:  House State: NY  
House  Senate District: 26  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
JANE CORWIN

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 20877.46

Disbursement For:  Primary  General  
 Other (specify) Special-General

Full Name (Last, First, Middle Initial) of Payee  
Victory Media Group

Date

M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 1 1

Mailing Address  
1816 Garfield Avenue

Amount

2541.04

City State Zip Code  
Aurora IL 60506

Purpose of Expenditure  
Phone Banks

Category/  
Type

Office Sought:  House State: NY  
House  Senate District: 26  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
JANE CORWIN

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 25959.54

Disbursement For:  Primary  General  
 Other (specify) Special-General

(a) SUBTOTAL of Itemized Independent Expenditures .....

5082.08

(b) SUBTOTAL of Unitemized Independent Expenditures .....

(c) TOTAL Independent Expenditures .....  
(carry total from last page forward to Line 7)

14250.29