

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 C C00000000
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 4400 Jenifer Street NW Suite 240		
(c) City, State and ZIP Code Washington DC 20015		
2. Corporate filers only Is the filer a qualified nonprofit corporation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Individual filers only Name of Employer		Occupation

4. TYPE OF REPORT (check appropriate boxes):	
(a) <input type="checkbox"/> April 15 Quarterly Report <input checked="" type="checkbox"/> 24-Hour Notice <input type="checkbox"/> 48-Hour Notice <input type="checkbox"/> July 15 Quarterly Report <input type="checkbox"/> October Quarterly Report <input type="checkbox"/> January 31 Year-End Report	
(b) Is this Report an amendment? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
5. COVERING PERIOD: FROM ^M 05 / ^D 15 / ^Y 2010 THROUGH ^M 05 / ^D 16 / ^Y 2010	
6. TOTAL CONTRIBUTIONS00	
7. TOTAL INDEPENDENT EXPENDITURES..... 22500.00	

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 Higgins		05/16/2010

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

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

1003031393

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

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
05 / 15 / 2010

Mailing Address
1816 Garfield

Amount

14000.00

City State Zip Code
Aurora IL 60506

Purpose of Expenditure
Phone Bank - In Support of Tim Burns

Category/
Type

Office Sought: ☒ House State: PA
House ☐ Senate District: 12
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
Timothy Raymond Burns

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 14000.00

Disbursement For: ☐ Primary ☐ General
2010
☐ Other (specify) Special

Full Name (Last, First, Middle Initial) of Payee
Antietam Communications

Date

M M / D D / Y Y Y Y
05 / 15 / 2010

Mailing Address
2101 Mill Rd
Suite 314

Amount

8500.00

City State Zip Code
Alexandria VA 22314

Purpose of Expenditure
Voter List Rental - In Support of Tim Burns

Category/
Type

Office Sought: ☒ House State: PA
House ☐ Senate District: 12
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
Timothy Raymond Burns

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 22500.00

Disbursement For: ☐ Primary ☐ General
2010
☐ Other (specify) Special

(a) SUBTOTAL of Itemized Independent Expenditures 22500.00

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

(c) TOTAL Independent Expenditures 22500.00
(carry total from last page forward to Line 7)

10030331394

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

Date of Receipt

☐ Hand Delivered

Postmarked

☐ USPS First Class Mail

Postmarked (R/C)

☐ USPS Registered/Certified

Postmarked

☐ USPS Priority Mail

Delivery Confirmation™ or Signature Confirmation™ Label ☐

Postmarked

☐ USPS Express Mail

☐ Postmark Illegible

☐ No Postmark

Shipping Date

☐ Overnight Delivery Service (Specify):

Next Business Day Delivery ☐

Date of Receipt

☐ Received from House Records & Registration Office

Date of Receipt

☐ Received from Senate Public Records Office

Date of Receipt

☐ Received from Electronic Filing Office

Date of Receipt or Postmarked

☒ Other (Specify): *Webform #434*

5/16/10


PREPARER

5/17/10
DATE PREPARED

(3/2005)

10030351395