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 M M / D D / Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
Screen Strategies Media	06 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 11150 Fairfax Blvd	Amount
Ste 505	
City State Zip Code Fairfax VA 22030	79555.00 Transaction ID : SE-6206
	Date of Disbursement or Obligation
Purpose of Expenditure Media Buy Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	e Sought: X House District: 02
Emily Cain Oppose	President Senate State: ME
Calendar Year-To-Date Per Election for Office Sought Disbut 2014	ursement For:
Full Name of Payee McKenna Philaja	Date of Public Distribution/Dissemination
Mailing Address 1777 Church Street NW	06 03 2014
Mailing Address 1777 Church Street, NW	Amount
City State Zip Code	10000.00
Washington DC 20036	Transaction ID : SE-6207 Date of Disbursement or Obligation
Purpose of Expenditure Category/	M M / D D / Y Y Y Y Y
Media Production Type	
Name of Federal Candidate Support Office	e Sought: X House District: 02
Emily Cain Oppose	President Senate State: ME
Calendar Year-To-Date Per Election for Office Sought Disbut 2014	ursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	89555.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	89555.00
	7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of eithe party committee) any political party committee or its agent.	•
Caroline Fines [Electronically Filed] Date	03 2014
Signature	