

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 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. 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) 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		09/13/2011

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
Victory Media Group

Date

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

Mailing Address
1816 Garfield Avenue

Amount

2265.60

City State Zip Code
Aurora IL 60506

Purpose of Expenditure
Automated Calls

Category/
Type

Office Sought: House State: NY
House Senate District: 09
 President

Name of Federal Candidate Supported or Opposed by Expenditure:
ROBERT L TURNER

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 2265.60

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 9 / 1 3 / 2 0 1 1

Mailing Address
1816 Garfield Avenue

Amount

1932.24

City State Zip Code
Aurora IL 60506

Purpose of Expenditure
Automated Calls

Category/
Type

Office Sought: House State: NY
House Senate District: 09
 President

Name of Federal Candidate Supported or Opposed by Expenditure:
ROBERT L TURNER

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 4197.84

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

(a) SUBTOTAL of Itemized Independent Expenditures

4197.84

(b) SUBTOTAL of Unitemized Independent Expenditures

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

4197.84