

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

PAGE 1 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) WOMEN VOTE!	FEC IDENTIFICATION NUMBER C C00473918
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee The Pivot Group, Inc		Date 10 / 18 / 2012
Mailing Address 1720 I St. NW Suite 550		Amount 65289.18
City Washington	State DC	Zip Code 20006
Purpose of Expenditure Mailhouse	Category/Type	Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Scott Brown		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 331145.25		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : SE-6202

Full Name (Last, First, Middle Initial) of Payee Stones' Phones Inc Estimate		Date 10 / 18 / 2012
Mailing Address 41-750 Rancho Las Palmas Drive Suite E-3		Amount 4699.35
City Rancho Mirage	State CA	Zip Code 92270
Purpose of Expenditure Phone Banks	Category/Type	Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Scott Brown		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 331145.25		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : SE-6203

(a) SUBTOTAL of Itemized Independent Expenditures.....	69988.53
(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.

Caroline Fines
Signature _____ Date 10 / 18 / 2012
[Electronically Filed]

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) WOMEN VOTE!	FEC IDENTIFICATION NUMBER C C00473918
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Mission Control Inc		Date 10 / 18 / 2012
Mailing Address 114 A Mansfield Hollow Rd		Amount 14841.44
City Mansfield Center	State CT	Zip Code 06250
Purpose of Expenditure Mailhouse	Category/Type	Transaction ID : SE-6205
Name of Federal Candidate Supported or Opposed by Expenditure: Frank Guinta		Office Sought: <input checked="" type="checkbox"/> House State: <u>NH</u> <input type="checkbox"/> Senate District: <u>01</u> <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 52655.79		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Mission Control Inc		Date 10 / 18 / 2012
Mailing Address 114 A Mansfield Hollow Rd		Amount 14384.92
City Mansfield Center	State CT	Zip Code 06250
Purpose of Expenditure Mailhouse	Category/Type	Transaction ID : SE-6206
Name of Federal Candidate Supported or Opposed by Expenditure: Charles Bass		Office Sought: <input checked="" type="checkbox"/> House State: <u>NH</u> <input type="checkbox"/> Senate District: <u>02</u> <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 51757.76		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	29226.36
(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.

Caroline Fines
Signature _____ [Electronically Filed] Date 10 / 18 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) WOMEN VOTE!	FEC IDENTIFICATION NUMBER C C00473918
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Moxie Media		Date 10 / 18 / 2012
Mailing Address PO Box 30084		Amount 34785.00
City Seattle	State WA	Zip Code 30084
Purpose of Expenditure Mailhouse	Category/Type	Transaction ID : SE-6207
Name of Federal Candidate Supported or Opposed by Expenditure: Dean Heller		Office Sought: <input type="checkbox"/> House State: NV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 257737.00		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee		Date
Mailing Address		Amount
City	State	Zip Code
Purpose of Expenditure	Category/Type	Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	34785.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	133999.89

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 _____ [Electronically Filed] Date 10 / 18 / 2012