24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

| Schedule E) | PAGE 1 OF 3 FOR SE OF FORM 24/48 | | | | | |
|---|--|--|--|--|--|--|
| NAME OF COMMITTEE (In Full) | FEC IDENTIFICATION NUMBER ▼ | | | | | |
| WOMEN SPEAK OUT PAC | C C00530766 | | | | | |
| | | | | | | |
| Check if 24-hour report | | | | | | |
| Full Name of Payee Campaign Graphics | Date of Public Distribution/Dissemination | | | | | |
| | 09 01 2016 | | | | | |
| Mailing Address 1229 N. Wakonda Street | Amount | | | | | |
| City State Zip 0 | Code 441.89 | | | | | |
| Flagstaff AZ 8600 | O4 Transaction ID : SE.6314 Date of Disbursement or Obligation | | | | | |
| Purpose of Expenditure Lapel stickers and shirts for canvassers NC | ttegory/ Type 006 09 01 2016 | | | | | |
| Name of Federal Candidate | Support Office Sought: House District: | | | | | |
| HILLARY RODHAM CLINTON | Oppose President Senate State: NC | | | | | |
| Calendar Year-To-Date Per Election for Office Sought | Disbursement For: Primary General 2016 Other (specify) | | | | | |
| Full Name of Payee | Date of Public Distribution/Dissemination | | | | | |
| Campaign Graphics | 09 / 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | | | |
| Mailing Address 1229 N. Wakonda Street | Amount | | | | | |
| City State Zip | Code 441.89 | | | | | |
| Flagstaff AZ 860 | 7004 Transaction ID : SE.6316 Date of Disbursement or Obligation | | | | | |
| Purpose of Expenditure Lapel stickers and shirts for canvassers NC Cat | tegory/ 006 09 01 2016 | | | | | |
| Name of Federal Candidate | Support Office Sought: House District: | | | | | |
| DEBORAH K ROSS | Oppose President Senate State: NC | | | | | |
| Calendar Year-To-Date Per Election for Office Sought | Disbursement For: Primary General 2016 Other (specify) ▶ | | | | | |
| • | | | | | | |
| (a) SUBTOTAL of Itemized Independent Expenditures | 883.78 | | | | | |
| (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. | | | | | | |
| Emily Buchanan [Electronically | Filed] Date 09 02 2016 | | | | | |
| Signature | | | | | | |

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

PAGE OF FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ WOMEN SPEAK OUT PAC C00530766 ¥ 48-hour report Amends report filed on Check if 24-hour report X New report Full Name of Payee Date of Public Distribution/Dissemination HWS Headway Work Force Solutions 01 2016 09 Mailing Address 421 Fayetteville St #1020 Amount State Zip Code City 46500.00 NC 27601 Transaction ID: SE.6306 Raleigh Date of Disbursement or Obligation Purpose of Expenditure Category/ Projected payroll for canvassers 9/1/16-9/31/16 NC 001 09 01 2016 Type Name of Federal Candidate Office Sought: Support House District: HILLARY RODHAM CLINTON NC Oppose President Senate State: Disbursement For: Primary **✗** General Calendar Year-To-Date 2016 113860.19 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination **HWS Headway Work Force Solutions** 01 2016 Mailing Address 421 Fayetteville St #1020 Amount City State Zip Code 46500.00 NC 27601 Transaction ID: SE.6308 Raleigh Date of Disbursement or Obligation Purpose of Expenditure Category/ 001 Projected payroll for canvassers 9/1/16-9/31/16 NC 2016 09 01 Type Name of Federal Candidate Support Office Sought: House District: **DEBORAH K ROSS** NC X Oppose President Senate State: Primary **X** General Calendar Year-To-Date Disbursement For: 2016 92485.19 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 93000.00 (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. Emily Buchanan [Electronically Filed] 09 02 2016 Date Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

| | Siledule Ly | | | FOR SE OF | FORM 24/48 | |
|---|--|-------------------|---|------------------------------|------------------|--|
| NAME OF COMMITTEE (In Full) | | | | DENTIFICATIO | N NUMBER ▼ | |
| V | VOMEN SPEAK OUT PAC | | С | C00530766 | | |
| Ch | neck if 24-hour report 48-hour report New report Amends re | port filed o | on M M | / D = D / | Y = Y = Y = Y | |
| | Full Name of Payee | | Date of Publi | ic Distribution/ | Dissemination | |
| | HWS Headway Work Force Solutions | | M M M | / 01 / | 2016 | |
| | Mailing Address 421 Fayetteville St #1020 | | Amount | | | |
| | City State Zip Code | | | | 5000.00 | |
| | Raleigh NC 27601 | | Transaction ID : SE.6310 Date of Disbursement or Obligation | | | |
| | Purpose of Expenditure Projected Mileage for canvassers 9/1/16-9/31/16 NC Category/ Type 00 |)2 | 09 | / 01 / | 2016 | |
| | Name of Federal Candidate Support | Office | Sought: | House | District: | |
| | HILLARY RODHAM CLINTON Oppose | x | President | Senate | State: NC | |
| | Calendar Year-To-Date Per Election for Office Sought 118860.19 | Disbur 2016 | sement For: | Primary | x General | |
| | E II Name of Proces | | Other (sp | | | |
| Full Name of Payee HWS Headway Work Force Solutions Date of Public Distr | | | | | Y Y Y Y Y | |
| | Mailing Address 421 Fayetteville St #1020 | | 09 Amount | 01 | 2016 | |
| | City State Zip Code | | | | 5000.00 | |
| | Raleigh NC 27601 | - | Transaction I | D: SE.6312 oursement or C | Obligation | |
| | Purpose of Expenditure Projected Mileage for canvassers 9/1/16-9/31/16 NC Category/ Type 00: | 2 | M 09 | 01 | 2016 | |
| | Name of Federal Candidate Support | Office | Sought: | House | District: | |
| | DEBORAH K ROSS Oppose | | President | x Senate | State: NC | |
| | Calendar Year-To-Date Per Election for Office Sought 97485.19 | Disbur 2016 | rsement For: Other (s | Primary pecify) | ✗ General | |
| | (a) SUBTOTAL of Itemized Independent Expenditures | ····· > | - | 7 | 10000.00 | |
| | (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. | | | | | | |
| | Emily Buchanan [Electronically Filed] | ate 09 | | / Y Y 201 | Y | |
| | Signature | A10 03 | 02 | 201 | | |
| | | | | | | |

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