

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

WOMEN VOTE!

ADDRESS (number and street) 1800 M Street, NW
Ste 375N
Washington DC 20036
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00473918

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 - Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 - Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P) General (12G) Runoff (12R)
 - Convention (12C) Special (12S)

Election on [MM] / [DD] / [YYYY] in the State of []

- (d) 30-Day POST-Election Report for the:
- General (30G) Runoff (30R) Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [MM] / [DD] / [YYYY] through [MM] / [DD] / [YYYY]

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Fines, Caroline, , ,

Type or Print Name of Treasurer

Signature of Treasurer *Fines, Caroline, , ,* [Electronically Filed] Date 08 / 20 / 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

WOMEN VOTE!

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		<input type="text" value="1068386.29"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="4496606.98"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="344571.23"/>	<input type="text" value="15014082.20"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="4841178.21"/>	<input type="text" value="16082468.49"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1137293.21"/>	<input type="text" value="12378583.49"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="3703885.00"/>	<input type="text" value="3703885.00"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

WOMEN VOTE!

Report Covering the Period: From: MM / DD / YYYY 07 / 01 / 2018 To: MM / DD / YYYY 07 / 31 / 2018

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	334100.00	6890665.00
(ii) Unitemized	532.00	5708.18
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	334632.00	6896373.18
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	603228.58
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	334632.00	7499601.76
12. Transfers From Affiliated/Other Party Committees.....	0.00	2100714.29
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	9939.23	5413766.15
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	344571.23	15014082.20
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	344571.23	15014082.20

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	94704.25	825142.43
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	94704.25	825142.43
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	734000.00
24. Independent Expenditures (use Schedule E)	1042588.96	6610313.10
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	4209127.96
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1137293.21	12378583.49
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1137293.21	12378583.49

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	334632.00	7499601.76
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	334632.00	7499601.76
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	94704.25	825142.43
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	94704.25	825142.43

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
WOMEN VOTE!

A. Chiu, Evelyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 358 Springfield Ave
 City Summit State NJ Zip Code 07901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REQUESTED Occupation (for Individual) REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 17 / 2018
Transaction ID : 5618229
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Magar, Helga, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1026 El Medio Ave.
 City Pacific Palisades State CA Zip Code 90272
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REQUESTED Occupation (for Individual) REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 07 / 10 / 2018
Transaction ID : 5610717
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Steele, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24561 La Hermosa
 City Laguna Niguel State CA Zip Code 92677
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not-Employed Occupation (for Individual) Not-Employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 07 / 15 / 2018
Transaction ID : 5616369
 Amount of Each Receipt this Period 2000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
WOMEN VOTE!

A. Silverman, Sarah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9301 Wilshire Blvd. #507
 City Beverly Hills State CA Zip Code 90210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not-Employed Occupation (for Individual) Not-Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 16 / 2018
Transaction ID : 5617534
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. Heil, Rosemary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2100 Bywood Drive
 City Oakland State CA Zip Code 94602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not-Employed Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 8000.00

Date of Receipt 07 / 02 / 2018
Transaction ID : 5599082
 Amount of Each Receipt this Period 8000.00
 Memo Item

C. Abramson, Ronald, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1700 K Street, NW, #300
 City Washington State DC Zip Code 20006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Buchanan Ingersoll & Rooney Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 18750.00

Date of Receipt 07 / 05 / 2018
Transaction ID : 5602185
 Amount of Each Receipt this Period 6250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	19250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 23
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOMEN VOTE!

A. Abramson, Ronald, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1700 K Street, NW, #300
 City Washington State DC Zip Code 20006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Buchanan Ingersoll & Rooney Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 18750.00

Date of Receipt 07 / 05 / 2018
Transaction ID : 5602186
 Amount of Each Receipt this Period 12500.00
 Memo Item

B. Hormel, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 Mission Street, Suite 1750
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Equidex Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 07 / 17 / 2018
Transaction ID : 5618232
 Amount of Each Receipt this Period 50000.00
 Memo Item

C. Eck, Dennis, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2877 Paradise Rd #1820
 City Las Vegas State NV Zip Code 89109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Investor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500000.00

Date of Receipt 07 / 10 / 2018
Transaction ID : 5609316
 Amount of Each Receipt this Period 250000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	312500.00
TOTAL This Period (last page this line number only).....▶	334100.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMEN VOTE!

Full Name (Last, First, Middle Initial) A. Authorize.net		Date of Disbursement MM / DD / YYYY 07 / 03 / 2018
Mailing Address 808 East Utah Valley Drive		FEC Identification Number C [] Transaction ID : SB21B-1391 Amount of Each Disbursement this Period [] 81.25
City American Fork	State UT	Zip Code 84003
Purpose of Disbursement Credit Card Service Charges		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. First Data Merchant Services		Date of Disbursement MM / DD / YYYY 07 / 03 / 2018
Mailing Address PO Box 6010		FEC Identification Number C [] Transaction ID : SB21B-1390 Amount of Each Disbursement this Period [] 1823.00
City Hagerstown	State MD	Zip Code 21741
Purpose of Disbursement Credit Card Service Charges		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Anzalone Liszt Grove Research, Inc.		Date of Disbursement MM / DD / YYYY 07 / 12 / 2018
Mailing Address 260 Commerce Street 4th Fl		FEC Identification Number C [] Transaction ID : SB21B-1367 Amount of Each Disbursement this Period [] 17800.00
City Montgomery	State AL	Zip Code 36104
Purpose of Disbursement Polling/Surveys		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 19704.25
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMEN VOTE!

Full Name (Last, First, Middle Initial) A. Normington, Petts & Associates		Date of Disbursement MM / DD / YYYY 07 / 12 / 2018
Mailing Address 1100 H Street NW Suite 900		FEC Identification Number C [REDACTED] Transaction ID : SB21B-1368 Amount of Each Disbursement this Period 8800.00
City Washington	State DC	Zip Code 20036
Purpose of Disbursement Polling/Surveys		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. The Feldman Group Inc.		Date of Disbursement MM / DD / YYYY 07 / 19 / 2018
Mailing Address 1990 M St. NW Suite 510		FEC Identification Number C [REDACTED] Transaction ID : SB21B-1369 Amount of Each Disbursement this Period 11100.00
City Washington	State DC	Zip Code 20036
Purpose of Disbursement Polling/Surveys		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. EMRZ LLC		Date of Disbursement MM / DD / YYYY 07 / 19 / 2018
Mailing Address 5903 Swayden Lane		FEC Identification Number C [REDACTED] Transaction ID : SB21B-1370 Amount of Each Disbursement this Period 11250.00
City Austin	State TX	Zip Code 78745
Purpose of Disbursement Consulting Research		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	31150.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WOMEN VOTE!

Full Name (Last, First, Middle Initial) A. EMRZ LLC		Date of Disbursement MM / DD / YYYY 07 / 19 / 2018	
Mailing Address 5903 Swayden Lane		FEC Identification Number C [REDACTED] Transaction ID : SB21B-1371 Amount of Each Disbursement this Period [REDACTED] 11250.00	
City Austin State TX Zip Code 78745	Purpose of Disbursement Consulting Research Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type <input type="checkbox"/> Memo Item
Full Name (Last, First, Middle Initial) B. AFL-CIO		Date of Disbursement MM / DD / YYYY 07 / 26 / 2018	
Mailing Address 815 16th St., NW		FEC Identification Number C [REDACTED] Transaction ID : SB21B-1380 Amount of Each Disbursement this Period [REDACTED] 25000.00	
City Washington State DC Zip Code 20006	Purpose of Disbursement Polling Membership Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type <input type="checkbox"/> Memo Item
Full Name (Last, First, Middle Initial) C. Hart Research Associates		Date of Disbursement MM / DD / YYYY 07 / 26 / 2018	
Mailing Address 1724 Connecticut Ave, NW		FEC Identification Number C [REDACTED] Transaction ID : SB21B-1381 Amount of Each Disbursement this Period [REDACTED] 7600.00	
City Washington State DC Zip Code 20009	Purpose of Disbursement Polling/Surveys Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type <input type="checkbox"/> Memo Item
SUBTOTAL of Disbursements This Page (optional)..... ▶		[REDACTED] 43850.00	
TOTAL This Period (last page this line number only)..... ▶		[REDACTED] 94704.25	

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) WOMEN VOTE!	FEC IDENTIFICATION NUMBER ▼ C C00473918
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Deliver Strategies, LLC	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 4301 Fairfax Dr Ste 550	Amount <input type="text"/> 21416.04 Transaction ID : VN7A7AAYG25 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City Arlington State VA Zip Code 22203-1627	
Purpose of Expenditure Mailhouse Category/Type <input type="text"/> 004	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose DAVIDS, SHARICE, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 03 State: KS
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 708092.40	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item Deliver Strategies, LLC	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 4301 Fairfax Dr Ste 550	Amount <input type="text"/> 21937.02 Transaction ID : VN7A7AAZ298 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City Arlington State VA Zip Code 22203-1627	
Purpose of Expenditure Mailhouse Category/Type <input type="text"/> 004	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose DAVIDS, SHARICE, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 03 State: KS
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 708092.40	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 43353.06
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

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.

Fines, Caroline, , ,

[Electronically Filed]

Date

/ /

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) WOMEN VOTE!	FEC IDENTIFICATION NUMBER ▼ C C00473918
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Deliver Strategies, LLC			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 4301 Fairfax Dr Ste 550			Amount <input type="text"/>		
City Arlington	State VA	Zip Code 22203-1627	Transaction ID : VN7A7AAZ9X9		
Purpose of Expenditure Mailhouse		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: DAVIDS, SHARICE, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>03</u> State: <u>KS</u>		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input type="checkbox"/> Memo Item Hamburger Gibson Creative			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 5614 Connecticut Ave NW # 219			Amount <input type="text"/>		
City Washington	State DC	Zip Code 20015-2604	Transaction ID : VN7A7AARVV7		
Purpose of Expenditure Media Production		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: DAVIDS, SHARICE, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>03</u> State: <u>KS</u>		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

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Fines, Caroline, , ,

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
WOMEN VOTE!
FEC IDENTIFICATION NUMBER
C C00473918

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Hamburger Gibson Creative
Mailing Address: 5614 Connecticut Ave NW # 219
City: Washington State: DC Zip Code: 20015-2604
Purpose of Expenditure: Media Production
Category/Type: 004
Date of Public Distribution/Dissemination: 07/31/2018
Amount: 8050.00
Transaction ID: VN7A7AAZ2A6
Date of Disbursement or Obligation: 07/31/2018
Name of Federal Candidate: DAVIDS, SHARICE, , ,
Support: [X] Oppose: []
Office Sought: House [X] Senate [] President []
District: 03 State: KS
Calendar Year-To-Date Per Election for Office Sought: 708092.40
Disbursement For: Primary [X] General [] Other (specify)

Full Name of Payee: Lockwood Strategy Inc.
Mailing Address: 1 Thomas Cir NW FI 7
City: Washington State: DC Zip Code: 20005-5802
Purpose of Expenditure: Media Production
Category/Type: 004
Date of Public Distribution/Dissemination: 07/13/2018
Amount: 13500.00
Transaction ID: VN7A7AATJG6
Date of Disbursement or Obligation: 07/03/2018
Name of Federal Candidate: DAVIDS, SHARICE, , ,
Support: [X] Oppose: []
Office Sought: House [X] Senate [] President []
District: 03 State: KS
Calendar Year-To-Date Per Election for Office Sought: 708092.40
Disbursement For: Primary [X] General [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 21550.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....
(c) TOTAL Independent Expenditures

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Fines, Caroline, , , [Electronically Filed] Date 08/02/2018
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
WOMEN VOTE!
FEC IDENTIFICATION NUMBER
C C00473918

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee Memo Item
Lockwood Strategy Inc.
Mailing Address 1 Thomas Cir NW FI 7
City Washington State DC Zip Code 20005-5802
Purpose of Expenditure Media Buy Digital Category/Type 004

Date of Public Distribution/Dissemination
07 / 13 / 2018
Amount
20000.00
Transaction ID : VN7A7AATJH4
Date of Disbursement or Obligation
07 / 03 / 2018

Name of Federal Candidate:
DAVIDS, SHARICE, , ,
Support Oppose
Office Sought: House Senate State: KS
District: 03

Disbursement For: Primary General
2018 Other (specify)

Full Name of Payee Memo Item
Lockwood Strategy Inc.
Mailing Address 1 Thomas Cir NW FI 7
City Washington State DC Zip Code 20005-5802
Purpose of Expenditure Media Buy Digital Category/Type 004

Date of Public Distribution/Dissemination
07 / 26 / 2018
Amount
5000.00
Transaction ID : VN7A7AAXV78
Date of Disbursement or Obligation
07 / 26 / 2018

Name of Federal Candidate:
DAVIDS, SHARICE, , ,
Support Oppose
Office Sought: House Senate State: KS
District: 03

Disbursement For: Primary General
2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 25000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Fines, Caroline, , ,

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Date 08 / 02 / 2018

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WOMEN VOTE!	FEC IDENTIFICATION NUMBER ▼ C C00473918
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Waterfront Strategies		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 3050 K St NW Ste 100		Amount <input type="text"/>	
City Washington	State DC	Zip Code 20007-5161	Transaction ID : VN7A7AARVS1
Purpose of Expenditure Media Buy TV		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: DAVIDS, SHARICE, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>KS</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item Waterfront Strategies		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 3050 K St NW Ste 100		Amount <input type="text"/>	
City Washington	State DC	Zip Code 20007-5161	Transaction ID : VN7A7AAZ2B4
Purpose of Expenditure Media Buy TV		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: DAVIDS, SHARICE, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>KS</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

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Date / /

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**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) WOMEN VOTE!	FEC IDENTIFICATION NUMBER ▼ C C00473918
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Wildfire Contact	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 290 Broadway Ste 132	Amount <input type="text"/> 2504.01 Transaction ID : VN7A7AATJJ2 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City Methuen State MA Zip Code 01844-6827	
Purpose of Expenditure Mailhouse Category/Type 004	
Name of Federal Candidate: SCHRIER, KIM DR., , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 08 State: WA
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 334496.56	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item Wildfire Contact	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 290 Broadway Ste 132	Amount <input type="text"/> 44237.51 Transaction ID : VN7A7AATJK0 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City Methuen State MA Zip Code 01844-6827	
Purpose of Expenditure Mailhouse Category/Type 004	
Name of Federal Candidate: SCHRIER, KIM DR., , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 08 State: WA
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 334496.56	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 46741.52
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

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.

Fines, Caroline, , ,

[Electronically Filed]

Date / /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
WOMEN VOTE!
FEC IDENTIFICATION NUMBER
C C00473918

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Wildfire Contact
Mailing Address: 290 Broadway, Ste 132, Methuen, MA 01844-6827
Purpose of Expenditure: Mailhouse
Category/Type: 004
Date of Public Distribution/Dissemination: 07/17/2018
Amount: 43402.84
Transaction ID: VN7A7AAVA51
Date of Disbursement or Obligation: 07/19/2018
Name of Federal Candidate: SCHRIER, KIM DR., , , Support
Office Sought: House, District: 08, State: WA
Calendar Year-To-Date Per Election for Office Sought: 334496.56
Disbursement For: Primary

Full Name of Payee: Wildfire Contact
Mailing Address: 290 Broadway, Ste 132, Methuen, MA 01844-6827
Purpose of Expenditure: Mailhouse
Category/Type: 004
Date of Public Distribution/Dissemination: 07/20/2018
Amount: 43402.84
Transaction ID: VN7A7AAW4Q9
Date of Disbursement or Obligation: 07/19/2018
Name of Federal Candidate: SCHRIER, KIM DR., , , Support
Office Sought: House, District: 08, State: WA
Calendar Year-To-Date Per Election for Office Sought: 334496.56
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 86805.68
(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.

Fines, Caroline, , ,

[Electronically Filed]

Date

08 / 02 / 2018

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) WOMEN VOTE!	FEC IDENTIFICATION NUMBER ▼ C C00473918
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Wildfire Contact	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 290 Broadway Ste 132	Amount <input type="text"/> 44237.51 Transaction ID : VN7A7AAWW80 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City Methuen State MA Zip Code 01844-6827	
Purpose of Expenditure Mailhouse Category/Type 004	
Name of Federal Candidate: SCHRIER, KIM DR., , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 08 State: WA
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 334496.56	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item Wildfire Contact	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 290 Broadway Ste 132	Amount <input type="text"/> 27323.26 Transaction ID : VN7A7AAXD45 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City Methuen State MA Zip Code 01844-6827	
Purpose of Expenditure Mailhouse Category/Type 004	
Name of Federal Candidate: SCHRIER, KIM DR., , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 08 State: WA
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 334496.56	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 71560.77
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

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.

Fines, Caroline, , ,

[Electronically Filed]

Date / /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
WOMEN VOTE!
FEC IDENTIFICATION NUMBER
C C00473918

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Wildfire Contact
Mailing Address: 290 Broadway, Ste 132, Methuen, MA 01844-6827
Purpose of Expenditure: Mailhouse
Category/Type: 004
Date of Public Distribution/Dissemination: 07/25/2018
Amount: 9107.75
Transaction ID: VN7A7AAXD53
Date of Disbursement or Obligation: 07/26/2018
Name of Federal Candidate: ROSSI, DINO, , ,
Office Sought: House, District: 08, State: WA
Disbursement For: Primary

Full Name of Payee: Wildfire Contact
Mailing Address: 290 Broadway, Ste 132, Methuen, MA 01844-6827
Purpose of Expenditure: Mailhouse
Category/Type: 004
Date of Public Distribution/Dissemination: 07/27/2018
Amount: 20336.45
Transaction ID: VN7A7AAXV86
Date of Disbursement or Obligation: 07/26/2018
Name of Federal Candidate: ROSSI, DINO, , ,
Office Sought: House, District: 08, State: WA
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures: 29444.20
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Fines, Caroline, , ,

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Date 08/02/2018

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**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) WOMEN VOTE!	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00473918 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Wildfire Contact	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 27 / 2018
Mailing Address 290 Broadway Ste 132	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 20336.46 </div>
City State Zip Code Methuen MA 01844-6827	
Purpose of Expenditure Mailhouse Category/Type 004	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose SCHRIER, KIM DR., , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 08 State: WA
Calendar Year-To-Date Per Election for Office Sought 334496.56	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item Wildfire Contact	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 30 / 2018
Mailing Address 290 Broadway Ste 132	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 29878.68 </div>
City State Zip Code Methuen MA 01844-6827	
Purpose of Expenditure Mailhouse Category/Type 004	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose SCHRIER, KIM DR., , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 08 State: WA
Calendar Year-To-Date Per Election for Office Sought 334496.56	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">50215.14</div>
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>
(c) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>

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Fines, Caroline, , ,

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Date

M M / D D / Y Y Y Y Y Y
08 / 02 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
WOMEN VOTE!
FEC IDENTIFICATION NUMBER
C C00473918

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Wildfire Contact
Mailing Address: 290 Broadway, Ste 132, Methuen, MA 01844-6827
Purpose of Expenditure: Mailhouse
Category/Type: 004
Name of Federal Candidate: ROSSI, DINO, , ,
Office Sought: House, District: 08, State: WA
Amount: 9959.56
Transaction ID: VN7A7AAYTM7
Date of Disbursement or Obligation: 07/26/2018
Disbursement For: Primary

Full Name of Payee: Wildfire Contact
Mailing Address: 290 Broadway, Ste 132, Methuen, MA 01844-6827
Purpose of Expenditure: Mailhouse
Category/Type: 004
Name of Federal Candidate: SCHRIER, KIM DR., , ,
Office Sought: House, District: 08, State: WA
Amount: 39769.69
Transaction ID: VN7A7AAZ9Y7
Date of Disbursement or Obligation: 07/26/2018
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures: 49729.25
(b) SUBTOTAL of Unitemized Independent Expenditures:
(c) TOTAL Independent Expenditures: 1042588.96

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.

Fines, Caroline, , ,

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Date 08/02/2018

Signature