

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 OR AMENDED (N) (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), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE)

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

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

5. Covering Period 06/01/2020 through 06/30/2020

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

Robinson, Denelle, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Robinson, Denelle, , ,

[Electronically Filed]

Date

07/20/2020

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

**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="2020"/> | | 525917.12 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 261057.93 | |
| (c) Total Receipts (from Line 19) | 2696325.00 | 10271844.81 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | 5306882.93 | 10797761.93 |
| 7. Total Disbursements (from Line 31)..... | 2679264.68 | 8170143.68 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | 2627618.25 | 2627618.25 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 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

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

WOMEN VOTE!

Report Covering the Period: From: M M / D D / Y Y Y Y Y 06 / 01 / 2020 To: M M / D D / Y Y Y Y Y 06 / 30 / 2020

| 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)..... | 531325.00 | 5410325.00 |
| (ii) Unitemized | 0.00 | 410.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 531325.00 | 5410735.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 165000.00 | 1111109.81 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 696325.00 | 6521844.81 |
| 12. Transfers From Affiliated/Other Party Committees..... | 2000000.00 | 3750000.00 |
| 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.)..... | 0.00 | 0.00 |
| 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)).....▶ | 2696325.00 | 10271844.81 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 2696325.00 | 10271844.81 |

DETAILED SUMMARY PAGE
of Disbursements

| 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 | 20883.93 | 974479.26 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 20883.93 | 974479.26 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 273551.29 | 960844.29 |
| 24. Independent Expenditures (use Schedule E) | 2384829.46 | 5437455.52 |
| 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 | 797364.61 |
| 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)) .. | 2679264.68 | 8170143.68 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 2679264.68 | 8170143.68 |

DETAILED SUMMARY PAGE
of Disbursements

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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) | 696325.00 | 6521844.81 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 696325.00 | 6521844.81 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 20883.93 | 974479.26 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 20883.93 | 974479.26 |

**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 29 |
| <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!

| | | |
|---|--|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Dunung, Sanjyot, , , | | Date of Receipt |
| Mailing Address 401 East 34th Street, S13-J | | <input type="text" value="06"/> / <input type="text" value="15"/> / <input type="text" value="2020"/> |
| City New York | State NY | Zip Code 10016 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 6506959 |
| Name of Employer (for Individual) Agkm | | Occupation (for Individual) Professional |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="2000.00"/> | Amount of Each Receipt this Period <input type="text" value="500.00"/> |
| <input type="checkbox"/> Memo Item | | |

| | | |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Magar, Helga, , , | | Date of Receipt |
| Mailing Address 1026 El Medio Ave. | | <input type="text" value="06"/> / <input type="text" value="08"/> / <input type="text" value="2020"/> |
| City Pacific Palisades | State CA | Zip Code 90272 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 6507170 |
| Name of Employer (for Individual) REQUESTED | | Occupation (for Individual) REQUESTED |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="300.00"/> | Amount of Each Receipt this Period <input type="text" value="100.00"/> |
| <input type="checkbox"/> Memo Item | | |

| | | |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Steinglass, David, , , | | Date of Receipt |
| Mailing Address 4935 Linnean Avenue NW | | <input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2020"/> |
| City Washington | State DC | Zip Code 20008 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 6507619 |
| Name of Employer (for Individual) Northlane Capital Partners | | Occupation (for Individual) Finance |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ <input type="text" value="50000.00"/> | Amount of Each Receipt this Period <input type="text" value="25000.00"/> |
| <input type="checkbox"/> Memo Item | | |

| | |
|--|---------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="25600.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

**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 29 |
| | <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 |

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NAME OF COMMITTEE (In Full)
WOMEN VOTE!

A. Steinglass, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4935 Linnean Avenue NW
 City Washington State DC Zip Code 20008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Northlane Capital Partners Occupation (for Individual) Finance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 06 / 12 / 2020
Transaction ID : 6507620
 Amount of Each Receipt this Period 25000.00
 Memo Item

B. Mosbacher, Diane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3570 Clay Street
 City San Francisco State CA Zip Code 94118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Psychiatrist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20000.00

Date of Receipt 06 / 17 / 2020
Transaction ID : 6511735
 Amount of Each Receipt this Period 10000.00
 Memo Item

C. Linden, Greg, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1415 E Valley Street
 City Seattle State WA Zip Code 98112
 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 ▼ 500.00

Date of Receipt 06 / 17 / 2020
Transaction ID : 6511755
 Amount of Each Receipt this Period 500.00
 Memo Item

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 35500.00 |
| 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 29 |
| | <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. Kaempfer, Joseph, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8301 Jeb Stuart Road
 City Potomac State MD Zip Code 20854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Kaempfer Company Occupation (for Individual) President, CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 06 / 18 / 2020
Transaction ID : 6511852
 Amount of Each Receipt this Period 50000.00
 Memo Item

B. Eck, Dennis, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 302 Marigold Avenue
 City Corona Del Mar State CA Zip Code 92625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eck Family, LLC Occupation (for Individual) Retailer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350000.00

Date of Receipt 06 / 18 / 2020
Transaction ID : 6511853
 Amount of Each Receipt this Period 100000.00
 Memo Item

C. Eck, Dennis, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 302 Marigold Avenue
 City Corona Del Mar State CA Zip Code 92625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eck Family, LLC Occupation (for Individual) Retailer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350000.00

Date of Receipt 06 / 18 / 2020
Transaction ID : 6511854
 Amount of Each Receipt this Period 50000.00
 Memo Item

| | |
|--|-----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 200000.00 |
| 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: PAGE 9 OF 29
(check only one)

| | | | | | | | | | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|
| <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. Snowdon, Edward, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Riverside Drive, Apt. 15C

| | | |
|------------------|-------------|-------------------|
| City New York | State NY | Zip Code 10024 |
|------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|--|
| Name of Employer (for Individual) Self-Employed | Occupation (for Individual) Theatrical Producer |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | / | 26 | / | 2020 |

Transaction ID : 6531299

Amount of Each Receipt this Period
125000.00

Memo Item

B. Snowdon, Edward, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Riverside Drive, Apt. 15C

| | | |
|------------------|-------------|-------------------|
| City New York | State NY | Zip Code 10024 |
|------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|--|
| Name of Employer (for Individual) Self-Employed | Occupation (for Individual) Theatrical Producer |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | / | 26 | / | 2020 |

Transaction ID : 6531300

Amount of Each Receipt this Period
125000.00

Memo Item

C. Piantanida, Vincent, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5106 Alum Rock Ave

| | | |
|------------------|-------------|-------------------|
| City San Jose | State CA | Zip Code 95127 |
|------------------|-------------|-------------------|

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 ▼
225.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | / | 18 | / | 2020 |

Transaction ID : 6533618

Amount of Each Receipt this Period
225.00

Memo Item

| | |
|---|-----------|
| SUBTOTAL of Receipts This Page (optional)..... | 250225.00 |
| 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 10 OF 29 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
WOMEN VOTE!

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Van Doosselaere, Rise, , ,

Mailing Address 421 Broome Street #3

| | | |
|------------------|-------------|-------------------|
| City New York | State NY | Zip Code 10013 |
|------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|---|
| Name of Employer (for Individual) Self-Employed | Occupation (for Individual) Yoga Teacher |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2020

Transaction ID : 6534661

Amount of Each Receipt this Period
20000.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

FEC ID number of contributing federal political committee. **C**

| | |
|-----------------------------------|-----------------------------|
| Name of Employer (for Individual) | Occupation (for Individual) |
|-----------------------------------|-----------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

FEC ID number of contributing federal political committee. **C**

| | |
|-----------------------------------|-----------------------------|
| Name of Employer (for Individual) | Occupation (for Individual) |
|-----------------------------------|-----------------------------|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

| | |
|---|-----------|
| SUBTOTAL of Receipts This Page (optional)..... | 20000.00 |
| TOTAL This Period (last page this line number only)..... | 531325.00 |

**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 11 OF 29 |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" 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!

| | | |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SMART | | Date of Receipt |
| Mailing Address 1750 New York Avenue NW Suite 600 | | <input type="text" value="06"/> / <input type="text" value="10"/> / <input type="text" value="2020"/> |
| City Washington | State DC | Zip Code 20006 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 6499852 |
| Name of Employer (for Individual) | | Amount of Each Receipt this Period <input type="text" value="15000.00"/> |
| Occupation (for Individual) | | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="50000.00"/> | |

| | | |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SMART | | Date of Receipt |
| Mailing Address 1750 New York Avenue NW Suite 600 | | <input type="text" value="06"/> / <input type="text" value="10"/> / <input type="text" value="2020"/> |
| City Washington | State DC | Zip Code 20006 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 6499853 |
| Name of Employer (for Individual) | | Amount of Each Receipt this Period <input type="text" value="5000.00"/> |
| Occupation (for Individual) | | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="50000.00"/> | |

| | | |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SMART | | Date of Receipt |
| Mailing Address 1750 New York Avenue NW Suite 600 | | <input type="text" value="06"/> / <input type="text" value="10"/> / <input type="text" value="2020"/> |
| City Washington | State DC | Zip Code 20006 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 6499854 |
| Name of Employer (for Individual) | | Amount of Each Receipt this Period <input type="text" value="5000.00"/> |
| Occupation (for Individual) | | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ <input type="text" value="50000.00"/> | |

| | |
|--|---------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="25000.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

**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 12 OF 29 |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" 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 |

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. United Food and Commercial Workers

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1775 K Street NW

| | | |
|--------------------|-------------|-------------------|
| City Washington | State DC | Zip Code 20006 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | / | 25 | / | 2020 |

Transaction ID : 6531301

Amount of Each Receipt this Period
100000.00

Memo Item

B. United Food and Commercial Workers

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1775 K Street NW

| | | |
|--------------------|-------------|-------------------|
| City Washington | State DC | Zip Code 20006 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | / | 25 | / | 2020 |

Transaction ID : 6531302

Amount of Each Receipt this Period
25000.00

Memo Item

C. Working for Working Americans

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 212 Carpenters Union Way

| | | |
|-------------------|-------------|-------------------|
| City Las Vegas | State NV | Zip Code 89119 |
|-------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | / | 16 | / | 2020 |

Transaction ID : 6534631

Amount of Each Receipt this Period
15000.00

Memo Item

| | |
|---|-----------|
| SUBTOTAL of Receipts This Page (optional)..... | 140000.00 |
| TOTAL This Period (last page this line number only)..... | 165000.00 |

**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 13 OF 29 |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" 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. EMILY's List

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1800 M St NW
Suite 375N

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3750000.00

Date of Receipt
MM / DD / YYYY
06 / 15 / 2020

Transaction ID : 6152020

Amount of Each Receipt this Period
1000000.00

Memo Item

Transfer to Affiliate

B. EMILY's List

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1800 M St NW
Suite 375N

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3750000.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2020

Transaction ID : 6302020

Amount of Each Receipt this Period
1000000.00

Memo Item

Transfer to Affiliate

C.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

| | |
|---|------------|
| SUBTOTAL of Receipts This Page (optional)..... | 2000000.00 |
| TOTAL This Period (last page this line number only)..... | 2000000.00 |

**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 06 / 02 / 2020 |
| Mailing Address 808 East Utah Valley Drive | | FEC Identification Number C [] Transaction ID : SB21B-1845 Amount of Each Disbursement this Period [] 80.50 |
| 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 06 / 03 / 2020 |
| Mailing Address PO Box 6010 | | FEC Identification Number C [] Transaction ID : SB21B-1846 Amount of Each Disbursement this Period [] 2359.93 |
| 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. Ballard Spahr LLP | | Date of Disbursement MM / DD / YYYY 06 / 11 / 2020 |
| Mailing Address 1909 K Street 12th Floor | | FEC Identification Number C [] Transaction ID : SB21B-1818 Amount of Each Disbursement this Period [] 193.50 |
| City Washington | State DC | Zip Code 20006 |
| Purpose of Disbursement Legal Services | | 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).....▶ | [] 2633.93 |
| 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!

A. The Strategy Group

Full Name (Last, First, Middle Initial)

Mailing Address 730 N Franklin Suite 404

City Chicago State IL Zip Code 60654

Purpose of Disbursement Media -Generic Mail/TV/Radio

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 06 / 11 / 2020

FEC Identification Number C

Transaction ID : SB21B-1822

Amount of Each Disbursement this Period 2000.00

Memo Item

B. Public Policy Polling

Full Name (Last, First, Middle Initial)

Mailing Address 2912 Highwoods Blvd

City Raleigh State NC Zip Code 27604

Purpose of Disbursement Polling/Surveys

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 06 / 24 / 2020

FEC Identification Number C

Transaction ID : SB21B-1837

Amount of Each Disbursement this Period 3000.00

Memo Item

C. Victoria Research

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 5902

City Takoma Park State MD Zip Code 20913

Purpose of Disbursement Polling/Surveys

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 06 / 24 / 2020

FEC Identification Number C

Transaction ID : SB21B-1838

Amount of Each Disbursement this Period 13250.00

Memo Item

| | |
|--|----------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 18250.00 |
| TOTAL This Period (last page this line number only).....▶ | 20883.93 |

**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 type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" 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. America Votes Action Fund | | Date of Disbursement MM / DD / YYYY 06 / 04 / 2020 |
| Mailing Address 1155 Connecticut Ave NW Ste 600 | | FEC Identification Number C [REDACTED] Transaction ID : SB23-1807 Amount of Each Disbursement this Period 25000.00 |
| City Washington | State DC | Zip Code 20036 |
| Purpose of Disbursement Committee Contribution | | 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. Latino Victory Project | | Date of Disbursement MM / DD / YYYY 06 / 25 / 2020 |
| Mailing Address 700 14th Street NW | | FEC Identification Number C [REDACTED] Transaction ID : SB23-1839 Amount of Each Disbursement this Period 193551.29 |
| City Washington | State DC | Zip Code 20005 |
| Purpose of Disbursement Committee Contribution | | 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. The Collective Super PAC | | Date of Disbursement MM / DD / YYYY 06 / 30 / 2020 |
| Mailing Address 410 1st Street SE, Ste. 310 | | FEC Identification Number C [REDACTED] Transaction ID : SB23-1841 Amount of Each Disbursement this Period 55000.00 |
| City Washington | State DC | Zip Code 20003 |
| Purpose of Disbursement Committee Contribution | | 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).....▶ | 273551.29 |
| TOTAL This Period (last page this line number only).....▶ | 273551.29 |

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

| | |
|---|-----------------------------------|
| (Use separate schedule(s) for each numbered line) | PAGE 17 OF 29 |
| | FOR LINE NUMBER: (check only one) |
| <input type="checkbox"/> | 9 |
| <input checked="" type="checkbox"/> | 10 |

NAME OF COMMITTEE (In Full)
WOMEN VOTE!

| | | | |
|---|-------------|------------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Dixon / Davis Media Group, LLC | | | Nature of Debt (Purpose): IE IA Senate - Media Production |
| Mailing Address 1028 33rd St NW Ste 300 | | | |
| City Washington | State DC | Zip Code 20007-3571 | |

| | | |
|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="20818.00"/> | Transaction ID : VN5BQ9HCA51 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="20818.00"/> | Outstanding Balance at Close of This Period <input type="text" value="0.00"/> |

| | | | |
|--|-------|----------|---------------------------|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor | | | Nature of Debt (Purpose): |
| Mailing Address | | | |
| City | State | Zip Code | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period <input type="text"/> | Transaction ID : | |
| Amount Incurred This Period <input type="text"/> | Payment This Period <input type="text"/> | Outstanding Balance at Close of This Period <input type="text"/> |

| | | | |
|--|-------|----------|---------------------------|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor | | | Nature of Debt (Purpose): |
| Mailing Address | | | |
| City | State | Zip Code | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period <input type="text"/> | Transaction ID : | |
| Amount Incurred This Period <input type="text"/> | Payment This Period <input type="text"/> | Outstanding Balance at Close of This Period <input type="text"/> |

| | |
|--|-----------------------------------|
| 1) SUBTOTALS This Period This Page (optional)..... ▶ | <input type="text" value="0.00"/> |
| 2) TOTALS This Period (last page this line number only)..... ▶ | <input type="text" value="0.00"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶ | <input type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶ | <input type="text"/> |

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 Dixon / Davis Media Group, LLC
Mailing Address 1028 33rd St NW Ste 300
City Washington State DC Zip Code 20007-3571
Purpose of Expenditure Media Production Category/Type 004
Name of Federal Candidate: MAURO, EDDIE J, , Support Oppose
Office Sought: House Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 1144622.11
Disbursement For: Primary General 2020

Full Name of Payee AL Media
Mailing Address 222 W Ontario St Ste 600
City Chicago State IL Zip Code 60654-3655
Purpose of Expenditure Media Buy Category/Type 004
Name of Federal Candidate: RUSSO, CLAIRE, , Support Oppose
Office Sought: House Senate State: VA
Calendar Year-To-Date Per Election for Office Sought 497394.00
Disbursement For: Primary General 2020

(a) SUBTOTAL of Itemized Independent Expenditures 99412.00
(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.

Robinson, Denelle, ,

[Electronically Filed]

Date 07 / 20 / 2020

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 AL Media
Mailing Address 222 W Ontario St Ste 600
City Chicago State IL Zip Code 60654-3655
Purpose of Expenditure Media Production
Category/Type 004
Date of Public Distribution/Dissemination 06/02/2020
Amount 19300.00
Transaction ID : VN7A7AFAQW9
Date of Disbursement or Obligation 06/04/2020
Name of Federal Candidate: RUSSO, CLAIRE, ,
Support Oppose
Office Sought: House Senate State: VA
District: 05
Calendar Year-To-Date Per Election for Office Sought 497394.00
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee Oak Strategies
Mailing Address 1425 K St NW
City Washington State DC Zip Code 20005-3500
Purpose of Expenditure Mailhouse
Category/Type 004
Date of Public Distribution/Dissemination 06/03/2020
Amount 48554.17
Transaction ID : VN7A7AFAS50
Date of Disbursement or Obligation 06/04/2020
Name of Federal Candidate: FARKAS, EVELYN, ,
Support Oppose
Office Sought: House Senate State: NY
District: 17
Calendar Year-To-Date Per Election for Office Sought 279183.99
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 67854.17
(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.

Robinson, Denelle, , [Electronically Filed] Date 07/20/2020
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
AL Media
Memo Item

Date of Public Distribution/Dissemination
06 / 04 / 2020

Mailing Address
222 W Ontario St
Ste 600

Amount
16500.00

City State Zip Code
Chicago IL 60654-3655

Transaction ID : VN7A7AFVD9
Date of Disbursement or Obligation

Purpose of Expenditure
Media Production
Category/Type
004

06 / 04 / 2020

Name of Federal Candidate:
RUSSO, CLAIRE, ,
Support Oppose

Office Sought: House District: 05
President Senate State: VA

Calendar Year-To-Date
Per Election for Office Sought
497394.00

Disbursement For: Primary General
2020 Other (specify)

Full Name of Payee
Oak Strategies
Memo Item

Date of Public Distribution/Dissemination
06 / 05 / 2020

Mailing Address
1425 K St NW

Amount
48554.17

City State Zip Code
Washington DC 20005-3500

Transaction ID : VN7A7AFAWH2
Date of Disbursement or Obligation

Purpose of Expenditure
Mailhouse
Category/Type
004

06 / 04 / 2020

Name of Federal Candidate:
FARKAS, EVELYN, ,
Support Oppose

Office Sought: House District: 17
President Senate State: NY

Calendar Year-To-Date
Per Election for Office Sought
279183.99

Disbursement For: Primary General
2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures
65054.17

(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.

Robinson, Denelle, ,
[Electronically Filed]
Signature

Date
07 / 20 / 2020

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 Oak Strategies
Mailing Address 1425 K St NW
City Washington State DC Zip Code 20005-3500
Purpose of Expenditure Mailhouse Category/Type 004
Name of Federal Candidate: FARKAS, EVELYN, , Support
Office Sought: House District: 17 State: NY
Calendar Year-To-Date Per Election for Office Sought 279183.99
Disbursement For: Primary

Full Name of Payee Oak Strategies
Mailing Address 1425 K St NW
City Washington State DC Zip Code 20005-3500
Purpose of Expenditure Mailhouse Category/Type 004
Name of Federal Candidate: SCHLEIFER, ADAM, , Oppose
Office Sought: House District: 17 State: NY
Calendar Year-To-Date Per Election for Office Sought 279183.99
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 39217.86
(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.

Robinson, Denelle, ,

[Electronically Filed]

Date 07 / 20 / 2020

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
Oak Strategies
Mailing Address
1425 K St NW
City
Washington State
DC Zip Code
20005-3500
Purpose of Expenditure
Mailhouse Category/Type
004

Date of Public Distribution/Dissemination
06 / 09 / 2020
Amount
25321.50
Transaction ID : VN7A7AFB4J7
Date of Disbursement or Obligation
06 / 11 / 2020

Name of Federal Candidate:
SCHLEIFER, ADAM, ,
Support Oppose
Office Sought: House District: 17
President Senate State: NY

Disbursement For: Primary General
2020 Other (specify)

Full Name of Payee
Waterfront Strategies
Mailing Address
3050 K St NW
Ste 100
City
Washington State
DC Zip Code
20007-5161
Purpose of Expenditure
Media Buy TV Category/Type
004

Date of Public Distribution/Dissemination
06 / 09 / 2020
Amount
453249.76
Transaction ID : VN7A7AFB4M3
Date of Disbursement or Obligation
06 / 08 / 2020

Name of Federal Candidate:
ERNST, JONI K, ,
Support Oppose
Office Sought: House District: 00
President Senate State: IA

Disbursement For: Primary General
2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 478571.26
(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.

Robinson, Denelle, , [Electronically Filed] Date 07 / 20 / 2020
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 Dixon / Davis Media Group, LLC
Mailing Address 1028 33rd St NW Ste 300
City Washington State DC Zip Code 20007-3571
Purpose of Expenditure Media Production Category/Type 004
Name of Federal Candidate: ERNST, JONI K, , Support Oppose
Office Sought: House Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 1878487.64
Disbursement For: Primary General 2020

Full Name of Payee AL Media
Mailing Address 222 W Ontario St Ste 600
City Chicago State IL Zip Code 60654-3655
Purpose of Expenditure Media Production Category/Type 004
Name of Federal Candidate: RUSSO, CLAIRE, , Support Oppose
Office Sought: House Senate State: VA
Calendar Year-To-Date Per Election for Office Sought 497394.00
Disbursement For: Primary General 2020

(a) SUBTOTAL of Itemized Independent Expenditures 56018.00
(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.

Robinson, Denelle, ,

[Electronically Filed]

Date 07 / 20 / 2020

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
Oak Strategies
Mailing Address
1425 K St NW
City
Washington State
DC Zip Code
20005-3500
Purpose of Expenditure
Mailhouse Category/Type
004

Date of Public Distribution/Dissemination
06 / 12 / 2020
Amount
29413.39
Transaction ID : VN7A7AFBA65
Date of Disbursement or Obligation
06 / 12 / 2020

Name of Federal Candidate:
FARKAS, EVELYN, ,
Support Oppose
Office Sought:
House Senate State: NY
District: 17

Disbursement For:
Primary General
Other (specify)

Full Name of Payee
Oak Strategies
Mailing Address
1425 K St NW
City
Washington State
DC Zip Code
20005-3500
Purpose of Expenditure
Mailhouse Category/Type
004

Date of Public Distribution/Dissemination
06 / 12 / 2020
Amount
9804.47
Transaction ID : VN7A7AFBA73
Date of Disbursement or Obligation
06 / 12 / 2020

Name of Federal Candidate:
SCHLEIFER, ADAM, ,
Support Oppose
Office Sought:
House Senate State: NY
District: 17

Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 39217.86
(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.

Robinson, Denelle, , [Electronically Filed] Date 07 / 20 / 2020
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
Oak Strategies
Mailing Address
1425 K St NW
City
Washington State
DC Zip Code
20005-3500
Purpose of Expenditure
Mailhouse Category/Type
004

Date of Public Distribution/Dissemination
06 / 12 / 2020
Amount
25321.50
Transaction ID : VN7A7AFBA81
Date of Disbursement or Obligation
06 / 12 / 2020

Name of Federal Candidate:
SCHLEIFER, ADAM, ,
Support Oppose
Calendar Year-To-Date
Per Election for Office Sought
279183.99

Office Sought:
House District: 17
President Senate State: NY
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
Oak Strategies
Mailing Address
1425 K St NW
City
Washington State
DC Zip Code
20005-3500
Purpose of Expenditure
Mailhouse Category/Type
004

Date of Public Distribution/Dissemination
06 / 12 / 2020
Amount
2665.66
Transaction ID : VN7A7AFBA651
Date of Disbursement or Obligation
06 / 12 / 2020

Name of Federal Candidate:
FARKAS, EVELYN, ,
Support Oppose
Calendar Year-To-Date
Per Election for Office Sought
279183.99

Office Sought:
House District: 17
President Senate State: NY
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 27987.16
(b) SUBTOTAL of Unitemized Independent Expenditures.....
(c) TOTAL Independent Expenditures

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Robinson, Denelle, ,

[Electronically Filed]

Date 07 / 20 / 2020

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 Oak Strategies <input type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Mailing Address 1425 K St NW | Amount <input type="text"/> 1777.10 Transaction ID : VN7A7AFBA811 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/> |
| City Washington State DC Zip Code 20005-3500 | |
| Purpose of Expenditure Mailhouse Category/Type 004 | |
| Name of Federal Candidate: SCHLEIFER, ADAM, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 17 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY |
| Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 279183.99 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ |

| | |
|---|--|
| Full Name of Payee AL Media <input type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Mailing Address 222 W Ontario St Ste 600 | Amount <input type="text"/> 19300.00 Transaction ID : VN7A7AFBFS5 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/> |
| City Chicago State IL Zip Code 60654-3655 | |
| Purpose of Expenditure Media Production Category/Type 004 | |
| Name of Federal Candidate: RUSSO, CLAIRE, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA |
| Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 497394.00 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ |

| | |
|---|-------------------------------|
| (a) SUBTOTAL of Itemized Independent Expenditures | <input type="text"/> 21077.10 |
| (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.

Robinson, Denelle, , ,

[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: Waterfront Strategies
Mailing Address: 3050 K St NW, Ste 100, Washington, DC
Purpose of Expenditure: Media Buy TV
Category/Type: 004
Amount: 453249.76
Transaction ID: VN7A7AFBFR7
Date of Disbursement or Obligation: 06/16/2020
Name of Federal Candidate: ERNST, JONI K,
Support: [], Oppose: [x]
Office Sought: [] House, [x] Senate
District: 00, State: IA
Disbursement For: [] Primary, [x] General 2020

Full Name of Payee: AL Media
Mailing Address: 222 W Ontario St, Ste 600, Chicago, IL
Purpose of Expenditure: Media Buy
Category/Type: 004
Amount: 87000.00
Transaction ID: VN7A7AFBMJO
Date of Disbursement or Obligation: 06/18/2020
Name of Federal Candidate: RUSSO, CLAIRE,
Support: [x], Oppose: []
Office Sought: [x] House, [] Senate
District: 05, State: VA
Disbursement For: [x] Primary, [] General 2020

(a) SUBTOTAL of Itemized Independent Expenditures: 540249.76
(b) SUBTOTAL of Unitemized Independent Expenditures:
(c) TOTAL Independent Expenditures:

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Robinson, Denelle, ,

[Electronically Filed]

Date: 07/20/2020

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
Dixon / Davis Media Group, LLC
Memo Item

Date of Public Distribution/Dissemination
06 / 18 / 2020

Mailing Address
1028 33rd St NW
Ste 300

Amount
19607.00

City
Washington

State
DC

Zip Code
20007-3571

Transaction ID : VN7A7AFBMK8
Date of Disbursement or Obligation

Purpose of Expenditure
Media Production

Category/Type
004

06 / 18 / 2020

Name of Federal Candidate:
ERNST, JONI K, ,
Support Oppose

Office Sought:
House Senate
District: 00
State: IA

Calendar Year-To-Date
Per Election for Office Sought
1878487.64

Disbursement For:
Primary General
Other (specify)

Full Name of Payee
Waterfront Strategies
Memo Item

Date of Public Distribution/Dissemination
06 / 23 / 2020

Mailing Address
3050 K St NW
Ste 100

Amount
453249.76

City
Washington

State
DC

Zip Code
20007-5161

Transaction ID : VN7A7AFC318
Date of Disbursement or Obligation

Purpose of Expenditure
Media Buy TV

Category/Type
004

06 / 18 / 2020

Name of Federal Candidate:
ERNST, JONI K, ,
Support Oppose

Office Sought:
House Senate
District: 00
State: IA

Calendar Year-To-Date
Per Election for Office Sought
1878487.64

Disbursement For:
Primary General
Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 472856.76, (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.

Robinson, Denelle, ,
[Electronically Filed]
Signature

Date
07 / 20 / 2020

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
Waterfront Strategies
Mailing Address
3050 K St NW
Ste 100
City
Washington
State
DC
Zip Code
20007-5161
Purpose of Expenditure
Media Buy TV
Category/Type
004
Date of Public Distribution/Dissemination
06 / 30 / 2020
Amount
477313.36
Transaction ID : VN7A7AFCSY3
Date of Disbursement or Obligation
06 / 29 / 2020

Name of Federal Candidate:
ERNST, JONI K, ,
Support
Oppose
Office Sought:
House
Senate
District: 00
State: IA
Calendar Year-To-Date
Per Election for Office Sought
1878487.64
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
Mailing Address
City
State
Zip Code
Purpose of Expenditure
Category/Type
Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation

Name of Federal Candidate:
Support
Oppose
Office Sought:
House
Senate
District:
State:
Calendar Year-To-Date
Per Election for Office Sought
Disbursement For:
Primary
General
Other (specify)

Table with 2 columns: Description and Amount.
(a) SUBTOTAL of Itemized Independent Expenditures 477313.36
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures 2384829.46

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.

Robinson, Denelle, ,

[Electronically Filed]

Date

07 / 20 / 2020

Signature