

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 7
FOR SE OF FORM 24/48

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 M M / D D / Y Y Y Y Y Y					
Full Name of Payee Agency Strategies			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 23 / 2024		
Mailing Address 600 E Court Ave			Amount 33333.10		
City Des Moines		State IA	Zip Code 50309-2058		
Purpose of Expenditure Mailhouse		Category/ Type 004	Transaction ID : 500017189 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 17 / 2024		
Name of Federal Candidate Harris, Kamala, , ,			☒ Support ☐ Oppose Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: 00		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
Full Name of Payee Agency Strategies			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 23 / 2024		
Mailing Address 600 E Court Ave			Amount 33333.10		
City Des Moines		State IA	Zip Code 50309-2058		
Purpose of Expenditure Mailhouse		Category/ Type 004	Transaction ID : 500017190 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 17 / 2024		
Name of Federal Candidate TRUMP, DONALD, J., ,			☐ Support ☒ Oppose Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: 00		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			66666.20		
(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. Signature <u>Robinson, Denelle, , ,</u> Date M M / D D / Y Y Y Y Y Y 10 / 24 / 2024					

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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 M M / D D / Y Y Y Y Y Y					
Full Name of Payee Agency Strategies			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 23 / 2024		
Mailing Address 600 E Court Ave			Amount 33333.10		
City Des Moines		State IA	Zip Code 50309-2058		Transaction ID : 500017197
Purpose of Expenditure Mailhouse		Category/ Type 004		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 17 / 2024	
Name of Federal Candidate HOVDE, ERIC, , ,			☐ Support ☒ Oppose		Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: WI
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
Full Name of Payee Agency Strategies			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 23 / 2024		
Mailing Address 600 E Court Ave			Amount 33333.10		
City Des Moines		State IA	Zip Code 50309-2058		Transaction ID : 500017198
Purpose of Expenditure Mailhouse		Category/ Type 004		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 17 / 2024	
Name of Federal Candidate BALDWIN, TAMMY, , ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: WI
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			66666.20		
(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.					
Signature Robinson, Denelle, , ,			Date M M / D D / Y Y Y Y Y Y 10 / 24 / 2024		

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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		MM / DD / YYYY

Full Name of Payee Ralston Lapp Guinn Media		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 23 / 2024
Mailing Address 1054 31st St NW Ste 430		Amount 3942.14
City Washington	State DC	Zip Code 20007-6042
Purpose of Expenditure TV Media Production	Category/ Type	Transaction ID : 500017199 Date of Disbursement or Obligation MM / DD / YYYY 10 / 24 / 2024
Name of Federal Candidate Harris, Kamala, , ,		Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: 00
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee Ralston Lapp Guinn Media		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 23 / 2024
Mailing Address 1054 31st St NW Ste 430		Amount 1941.65
City Washington	State DC	Zip Code 20007-6042
Purpose of Expenditure TV Media Production	Category/ Type	Transaction ID : 500017200 Date of Disbursement or Obligation MM / DD / YYYY 10 / 24 / 2024
Name of Federal Candidate TRUMP, DONALD, J., ,		Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: 00
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	5883.79
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Robinson, Denelle, , ,

Signature

Date

MM / DD / YYYY
10 / 24 / 2024

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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 M M / D D / Y Y Y Y Y Y					
Full Name of Payee The Pivot Group			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 23 / 2024		
Mailing Address 712 H St NE Unit 606			Amount 72916.00		
City Washington		State DC	Zip Code 20002-3627		Transaction ID : 500017191
Purpose of Expenditure Mailhouse		Category/ Type 004		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 22 / 2024	
Name of Federal Candidate TRUMP, DONALD, J., ,			☐ Support ☒ Oppose		Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: 00
Calendar Year-To-Date Per Election for Office Sought			11637519.14 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
Full Name of Payee The Pivot Group			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 23 / 2024		
Mailing Address 712 H St NE Unit 606			Amount 35913.85		
City Washington		State DC	Zip Code 20002-3627		Transaction ID : 500017192
Purpose of Expenditure Mailhouse		Category/ Type 004		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 22 / 2024	
Name of Federal Candidate Harris, Kamala, , ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: 00
Calendar Year-To-Date Per Election for Office Sought			11637519.14 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			108829.85		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
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Signature Robinson, Denelle, , ,			Date M M / D D / Y Y Y Y Y Y 10 / 24 / 2024		

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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		MM / DD / YYYY

Full Name of Payee Wavelength Strategy LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 23 / 2024
Mailing Address 712 H St NE Unit 526		Amount 83750.00
City Washington	State DC	Zip Code 20002-3627
Purpose of Expenditure TV Buy	Category/ Type 004	Transaction ID : 500017166 Date of Disbursement or Obligation MM / DD / YYYY 10 / 22 / 2024
Name of Federal Candidate Harris, Kamala, , ,		Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: 00
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee Wavelength Strategy LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 23 / 2024
Mailing Address 712 H St NE Unit 526		Amount 41250.00
City Washington	State DC	Zip Code 20002-3627
Purpose of Expenditure TV Buy	Category/ Type 004	Transaction ID : 500017193 Date of Disbursement or Obligation MM / DD / YYYY 10 / 22 / 2024
Name of Federal Candidate TRUMP, DONALD, J., ,		Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: 00
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	125000.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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Robinson, Denelle, , ,

Signature

Date

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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		MM / DD / YYYY

Full Name of Payee Wavelength Strategy LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 23 / 2024
Mailing Address 712 H St NE Unit 526		Amount 25000.00
City Washington	State DC	Zip Code 20002-3627
Purpose of Expenditure Digital Media Buy	Category/ Type 004	Transaction ID : 500017194 Date of Disbursement or Obligation MM / DD / YYYY 10 / 23 / 2024
Name of Federal Candidate Harris, Kamala, , ,		Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: 00
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee Wavelength Strategy LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 23 / 2024
Mailing Address 712 H St NE Unit 526		Amount 25000.00
City Washington	State DC	Zip Code 20002-3627
Purpose of Expenditure Digital Media Buy	Category/ Type 004	Transaction ID : 500017195 Date of Disbursement or Obligation MM / DD / YYYY 10 / 23 / 2024
Name of Federal Candidate TRUMP, DONALD, J., ,		Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: 00
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	50000.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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Robinson, Denelle, , ,

Signature

Date

MM / DD / YYYY
10 / 24 / 2024

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Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y					
Full Name of Payee Wavelength Strategy LLC			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y Y Y 10 / 23 / 2024		
Mailing Address 712 H St NE Unit 526			Amount 375000.00		
City Washington		State DC	Zip Code 20002-3627		Transaction ID : 500017196
Purpose of Expenditure Digital Media Buy		Category/Type 004		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y Y Y 10 / 22 / 2024	
Name of Federal Candidate Harris, Kamala, , ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: 00
Calendar Year-To-Date Per Election for Office Sought			11637519.14		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶
Full Name of Payee			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y Y Y		
Mailing Address			Amount 		
City		State	Zip Code		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y Y Y
Purpose of Expenditure		Category/Type			
Name of Federal Candidate			☐ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☐ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought					Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			375000.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶			798046.04		
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.					
Signature Robinson, Denelle, , ,			Date M M M / D D D / Y Y Y Y Y Y Y Y 10 / 24 / 2024		