

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation WOMEN'S VOICES WOMEN VOTE ACTION FUND		
(b) Address (number and street) ☐ check if different than previously reported 1707 L STREET NW SUITE 300		
(c) City, State and ZIP Code WASHINGTON DC 20036		3. FEC Identification Number C C90009317
2. Occupation and Name of Employer (for Individual Filers Only)		

4. TYPE OF REPORT (check appropriate boxes):

(a) ☐ April 15 Quarterly Report

☒ July 15 Quarterly Report

☐ 24-Hour Report

☐ October 15 Quarterly Report

☐ 48-Hour Report

☐ January 31 Year-End Report

b) Is this Report an amendment? ☒ No ☐ Yes, it amends the report filed on

/ /

5. COVERING PERIOD:

FROM

/ /

THROUGH

/ /

6. TOTAL CONTRIBUTIONS.....

0.00

7. TOTAL INDEPENDENT EXPENDITURES

41968.97

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 any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

[Electronically Filed]

Lisa Phillips

Lisa Phillips

07/15/2016

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 2 OF 2
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

WOMEN'S VOICES WOMEN VOTE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee

The Pivot Group, Inc.

Date of Public Distribution/Dissemination

MM / DD / YYYY
04 / 19 / 2016

Mailing Address 1720 I St., NW

Suite 550

Amount

32000.36

City

State

Zip Code

Washington

DC

20006

Transaction ID : F57.4105

Purpose of Expenditure
Communication - Mail piecesCategory/
Type 004

Office Sought:

☐ House

State: MD

☒ Senate

District: _____

☐ President

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
DONNA FERN EDWARDSCalendar Year-To-Date Per Election
for Office Sought

32000.36

Disbursement For: 2016

☒ Primary☐ General☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

The Voter Participation Center

Date of Public Distribution/Dissemination

MM / DD / YYYY
06 / 30 / 2016

Mailing Address 1707 L Street, NW

Suite 300

Amount

9968.61

City

State

Zip Code

Washington

DC

20036

Transaction ID : F57.4155

Purpose of Expenditure
List cost, legal fees, staff and consultant timeCategory/
Type 001

Office Sought:

☐ House

State: MD

☒ Senate

District: _____

☐ President

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
DONNA FERN EDWARDSCalendar Year-To-Date Per Election
for Office Sought

41968.97

Disbursement For: 2016

☒ Primary☐ General☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Date of Public Distribution/Dissemination

MM / DD / YYYY

Mailing Address

Amount

City

State

Zip Code

Purpose of Expenditure

Category/
Type

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☐ President

Check One:

☐ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Calendar Year-To-Date Per Election
for Office SoughtDisbursement For: ☐ Primary ☐ General☐ Other (specify) ▶

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

41968.97

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

41968.97

(carry total from last page forward to Line 7)