

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) <input type="checkbox"/> 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 <div>C C90009317</div>
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 07 / 01 / 2016

THROUGH 09 / 30 / 2016

6. TOTAL CONTRIBUTIONS.....

7. 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 any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE _____

[Electronically Filed]

Kitch, Gail, , ,

Kitch, Gail, , ,

10/14/2016

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 4
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
Mission Control, Inc.

Date of Public Distribution/Dissemination

MM / DD / YYYY
07 / 08 / 2016Mailing Address 624 Hebron Ave
Bldg 3 Suite 200

Amount

8210.86

Transaction ID : F57.4116

Purpose of Expenditure
Printing and Production of letterCategory/
Type 004Office Sought: ☐ House State: _____
☐ Senate District: _____
☒ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
TRUMP, DONALD J., , ,Check One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought 14771.86Disbursement For: ☒ Primary ☐ General
2016
☐ Other (specify) ▶Full Name (Last, First, Middle Initial) of Payee
Mission Control, Inc.

Date of Public Distribution/Dissemination

MM / DD / YYYY
08 / 12 / 2016Mailing Address 624 Hebron Ave
Bldg 3 Suite 200

Amount

7037.88

Transaction ID : F57.4162

Purpose of Expenditure
Printing and Production of letterCategory/
Type 004Office Sought: ☐ House State: _____
☐ Senate District: _____
☒ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
TRUMP, DONALD J., , ,Check One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought 22364.14Disbursement For: ☒ Primary ☐ General
2016
☐ Other (specify) ▶Full Name (Last, First, Middle Initial) of Payee
Political Data Inc

Date of Public Distribution/Dissemination

MM / DD / YYYY
07 / 08 / 2016

Mailing Address 12501 Imperial Hwy, 200

Amount

554.40

Transaction ID : F57.4135

Purpose of Expenditure
CA voter file matchingCategory/
Type 004Office Sought: ☐ House State: _____
☐ Senate District: _____
☒ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
TRUMP, DONALD J., , ,Check One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought 15326.26Disbursement For: ☒ Primary ☐ General
2016
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 15803.14

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures.....▶
(carry total from last page forward to Line 7)

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 3 OF 4
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NAME OF FILER (In Full)

WOMEN'S VOICES WOMEN VOTE ACTION FUND

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

Quad Graphics

Date of Public Distribution/Dissemination

MM / DD / YYYY
07 / 08 / 2016

Mailing Address 4371 County Line Rd

Amount

City State Zip Code
Chalfont PA 18914

6561.00

Transaction ID : F57.4115

Purpose of Expenditure
Outbound PostageCategory/
Type 004Office Sought: ☐ House State: _____
☐ Senate District: _____
☒ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
TRUMP, DONALD J., , ,Check One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought 6561.00Disbursement For: ☒ Primary ☐ General
2016
☐ Other (specify) ▶

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

The Pivot Group, Inc.

Date of Public Distribution/Dissemination

MM / DD / YYYY
09 / 08 / 2016Mailing Address 1720 I St., NW
Suite 550

Amount

City State Zip Code
Washington DC 20006

23522.44

Transaction ID : F57.4156

Purpose of Expenditure
Printing and ProductionCategory/
Type 004Office Sought: ☐ House State: _____
☐ Senate District: _____
☒ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
TRUMP, DONALD J., , ,Check One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought 23522.44Disbursement For: ☐ Primary ☒ General
2016
☐ Other (specify) ▶

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

The Pivot Group, Inc.

Date of Public Distribution/Dissemination

MM / DD / YYYY
09 / 08 / 2016Mailing Address 1720 I St., NW
Suite 550

Amount

City State Zip Code
Washington DC 20006

29404.20

Transaction ID : F57.4157

Purpose of Expenditure
Mailing and DeliveryCategory/
Type 004Office Sought: ☐ House State: _____
☐ Senate District: _____
☒ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
TRUMP, DONALD J., , ,Check One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought 52926.64Disbursement For: ☐ Primary ☒ General
2016
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 59487.64

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures.....▶
(carry total from last page forward to Line 7)

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 4 OF 4
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NAME OF FILER (In Full)

WOMEN'S VOICES WOMEN VOTE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee
The Voter Participation Center

Date of Public Distribution/Dissemination

MM / DD / YYYY
09 / 30 / 2016Mailing Address
1707 L Street, NW
Suite 300

Amount

City State Zip Code
Washington DC 20036Amount
2978.12

Transaction ID : F57.4166

Purpose of Expenditure
Data, lists and postageCategory/
Type 004Office Sought: ☐ House State: _____
☐ Senate District: _____
☒ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
TRUMP, DONALD J., , ,Check One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought

25342.26

Disbursement For: ☒ 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

Amount

Purpose of Expenditure

Category/
TypeOffice Sought: ☐ House State: _____
☐ Senate District: _____
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: ☐ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office SoughtDisbursement For: ☐ 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

Amount

Purpose of Expenditure

Category/
TypeOffice Sought: ☐ House State: _____
☐ Senate District: _____
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: ☐ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office SoughtDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 2978.12

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶ 78268.90
(carry total from last page forward to Line 7)