24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
CAPE FOX PROFESSIONAL LICENSE	C C00622266
	G C00022200
Check if 24-hour report 48-hour report New report Amends report fill	led on 08 01 2016
Full Name of Payee	Date of Public Distribution/Dissemination
FCC x 0025778457	07 31 2016
Mailing Address 1131 bell st	Amount
9 City State Zip Code	780.00
Sacramento CA 95825	Transaction ID : WFT20166312118-1 Date of Disbursement or Obligation
Purpose of Expenditure Licensing Category/ Type	M M
Name of Federal Candidate Support Of	fice Sought: House District:
Marie Davis Oppose	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought Display	sbursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
Tych media llc x LPD	07 07 7 2007
Mailing Address Six row central #1100	Amount
City State Zip Code	160.00
Hartford CT 06103	Transaction ID: WFT2016711329-1 Date of Disbursement or Obligation
Purpose of Expenditure Disbursement Category/	M = M / D = D / Y = Y = Y
Type	
Dorro Nito	ffice Sought: House District: 01
Parra Nito Oppose	President Senate State: CA
	sbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	0
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	0
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.	
Marie Davis [Electronically Filed] Date	08 01 2016
Signature	