

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

NAME OF COMMITTEE (In Full) NEA Advocacy Fund			FEC IDENTIFICATION NUMBER ▼ C C00489815		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on					
Full Name of Payee Chambers Lopez Strategies LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 23 / 2014		
Mailing Address P.O. Box 5539			Amount 202492.41		
City Arlington		State VA	Zip Code 22205		Transaction ID : B532669
Purpose of Expenditure Production and time for TV ad		Category/ Type 004		Date of Disbursement or Obligation MM / DD / YYYY 09 / 23 / 2014	
Name of Federal Candidate Cory Gardner			Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: <u>CO</u>		
Calendar Year-To-Date Per Election for Office Sought 202492.41			Disbursement For: ☐ Primary ☒ General 2014 ☐ Other (specify) ▶ _____		
Full Name of Payee			Date of Public Distribution/Dissemination MM / DD / YYYY		
Mailing Address			Amount 		
City		State	Zip Code		Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure		Category/ Type			
Name of Federal Candidate			Office Sought: ☐ House District: _____ ☐ Oppose ☐ President ☐ Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶ 202492.41 (b) SUBTOTAL of Unitemized Independent Expenditures ▶ (c) TOTAL Independent Expenditures..... ▶ 202492.41					
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 <i>Michael Edwards</i>			Date MM / DD / YYYY 09 / 24 / 2014		
[Electronically Filed]					