

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

NAME OF COMMITTEE (In Full) BELIEVE AGAIN
FEC IDENTIFICATION NUMBER C C00571711
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee ONMESSAGE, INC.
Mailing Address 705 MELVIN AVE # 105
City ANNAPOLIS State MD Zip Code 21401
Purpose of Expenditure MEDIA
Name of Federal Candidate BOBBY JINDAL Support
Calendar Year-To-Date Per Election for Office Sought 481487.32

Date of Public Distribution/Dissemination 07 / 01 / 2015
Amount 2000.00
Transaction ID : 1
Date of Disbursement or Obligation 07 / 01 / 2015
Office Sought: President
Disbursement For: Primary

Full Name of Payee ONMESSAGE, INC.
Mailing Address 705 MELVIN AVE # 105
City ANNAPOLIS State MD Zip Code 21401
Purpose of Expenditure MEDIA
Name of Federal Candidate BOBBY JINDAL Support
Calendar Year-To-Date Per Election for Office Sought 481487.32

Date of Public Distribution/Dissemination 07 / 01 / 2015
Amount 9560.38
Transaction ID : 1_B
Date of Disbursement or Obligation 07 / 01 / 2015
Office Sought: President
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 11560.38
(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 ROBERT YARBOROUGH [Electronically Filed] Date 07 / 01 / 2015

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

NAME OF COMMITTEE (In Full) BELIEVE AGAIN
FEC IDENTIFICATION NUMBER C C00571711
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee ONMESSAGE, INC.
Mailing Address 705 MELVIN AVE # 105
City ANNAPOLIS State MD Zip Code 21401
Purpose of Expenditure MEDIA Category/Type

Date of Public Distribution/Dissemination 07 / 01 / 2015
Amount 8894.94
Transaction ID : 1_B_B
Date of Disbursement or Obligation 07 / 01 / 2015

Name of Federal Candidate BOBBY JINDAL
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 481487.32

Office Sought: House Senate
President
Disbursement For: Primary General
Other (specify)

Full Name of Payee
Mailing Address
City State Zip Code
Purpose of Expenditure Category/Type

Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation

Name of Federal Candidate
Support Oppose
Calendar Year-To-Date Per Election for Office Sought

Office Sought: House Senate
President
Disbursement For: Primary General
Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 8894.94, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures 20455.32

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 ROBERT YARBOROUGH [Electronically Filed] Date 07 / 01 / 2015