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

Schedule E)	FOR SE OF FORM 24/48				
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼				
Congressional Black Caucus PAC					
	C C00147512				
Check if X 24-hour report 48-hour report New report Amends report filed	d on Mam / Dad / Yayayay				
Full Name of Payee	Date of Public Distribution/Dissemination				
Deep South Political Consulting	10 29 2018				
Mailing Address 909 Poydras St					
Ste 1825	Amount				
City State Zip Code	1952.58				
New Orleans LA 70112-4045	Transaction ID : VNV6Y9YFDJ9  Date of Disbursement or Obligation				
Purpose of Expenditure Mail Piece Production & Shipping  Category/ Type  006	10 26 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Name of Federal Candidate Support Offic	e Sought:				
Neguse, Joseph, , ,	President Senate State: CO				
Calendar Year-To-Date Per Election for Office Sought  Disb 2018	ursement For:  Primary				
Full Name of Payee	Date of Public Distribution/Dissemination				
Deep South Political Consulting	10 29 2018				
Mailing Address 909 Poydras St	10 20 2010				
Ste 1825	Amount				
City State Zip Code	2428.28				
New Orleans LA 70112-4045	Transaction ID : VNV6Y9YFDK7 Date of Disbursement or Obligation				
Purpose of Expenditure Mail Piece Production & Shipping  Category/ Type  006	10 26 / Y Y Y Y Y Y				
Name of Federal Candidate  Support  Office	ee Sought: X House District: 05				
SPAULDING, STEPHANY ROSE, , , Oppose	President Senate State: CO				
2010	pursement For: Primary X General				
Per Election for Office Sought 2428.28	Other (specify)				
(a) SUBTOTAL of Itemized Independent Expenditures	4380.86				
(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.					
Jenkins, Earl, R, ,  [Electronically Filed] Date	10 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				

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

Schedule E)	FOR SE OF FORM 24/48			
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
Congressional Black Caucus PAC	C C00147512			
Check if X 24-hour report 48-hour report New report Amends report filed	on Man / Dab / Yayayay			
Full Name of Payee  Deep South Political Consulting	Date of Public Distribution/Dissemination			
, ,	10 29 2018			
Mailing Address 909 Poydras St Ste 1825	Amount			
City State Zip Code	2021.45			
New Orleans LA 70112-4045	Transaction ID : VNV6Y9YFDM5 Date of Disbursement or Obligation			
Purpose of Expenditure Mail Piece Production & Shipping  Category/ Type  006	10 / 26 / 2018			
Name of Federal Candidate Support Office	Sought:   House District: 05			
HAYES, JAHANA, , ,	President Senate State: CT			
Calendar Year-To-Date Per Election for Office Sought  Disbu 2021.45	rsement For: Primary   General  Other (specify)			
Full Name of Payee	Date of Public Distribution/Dissemination			
Deep South Political Consulting	10 29 2018			
Mailing Address 909 Poydras St	Amount			
Ste 1825	Amount			
City State Zip Code	10291.72			
New Orleans LA 70112-4045	Transaction ID: VNV6Y9YFDN3  Date of Disbursement or Obligation			
Purpose of Expenditure Mail Piece Production & Shipping  Category/ Type  O06	10 26 Y Y Y Y Y Y Y			
Name of Federal Candidate Support Office	e Sought: X House District: 03			
HINSON, YVONNE HAYES, , ,	President Senate State: FL			
Calendar Year-To-Date Per Election for Office Sought  Disbut 2018	rsement For: Primary <b>X</b> General  Other (specify) ▶			
(a) SUBTOTAL of Itemized Independent Expenditures	12313.17			
(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.				
Jenkins, Earl, R, ,  [Electronically Filed] Date	0 31 2018			
Signature				

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

Sch	edule E)	BITOTIES	PAGE 3 OF 8 FOR SE OF FORM 24/48
	E OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Со	ngressional Black Caucus PAC		C C00147512
Chec	ck if <b>X</b> 24-hour report 48-hour report <b>X</b> New re	eport Amends repor	filed on fil
	Full Name of Payee Deep South Political Consulting		Date of Public Distribution/Dissemination
N	Mailing Address 909 Poydras St		10292018
	Ste 1825		
	City State New Orleans LA	Zip Code 70112-4045	8849.00 Transaction ID : VNV6Y9YFDT2
	Purpose of Expenditure Mail Piece Production & Shipping	Category/ Type 006	Date of Disbursement or Obligation  10 26 2018
1	Name of Federal Candidate	<b>x</b> Support	Office Sought:    House District: 06
L	MCBATH, LUCIA KAY, , ,	Oppose	President Senate State: GA
	Calendar Year-To-Date Per Election for Office Sought	23134.71	Disbursement For:  Primary  General  2018  Other (specify) ▶
	Full Name of Payee  Deep South Political Consulting  Mailing Address 909 Poydras St		Date of Public Distribution/Dissemination
Ι΄	5 000 i Oyulub Ot		Amount
-	Ste 1825 City State	Zip Code	16262.71
	New Orleans LA	70112-4045	Transaction ID : VNV6Y9YFDW8 Date of Disbursement or Obligation
	Purpose of Expenditure Mail Piece Production & Shipping	Category/ Type 006	10 / 26 / Y Y Y Y Y Y Y
Ī	Name of Federal Candidate	<b>x</b> Support	Office Sought:  House District: 02
	COLEMAN, LINDA, , ,	Oppose	President Senate State: NC
	Calendar Year-To-Date Per Election for Office Sought	16262.71	Disbursement For:  Primary  General 2018  Other (specify) ▶
(a	) SUBTOTAL of Itemized Independent Expenditures		25111.71
(b	) SUBTOTAL of Unitemized Independent Expenditures		<b>&gt;</b>
(с	r) TOTAL Independent Expenditures		<b>&gt;</b>
wi	nder penalty of perjury I certify that the independent expenditure th, or at the request or suggestion of, any candidate or authorize arty committee) any political party committee or its agent.		
		onically Filed] Date	10 31 2018
	Signature		

Schedule E)	Ones	PAGE 4 OF 8 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Congressional Black Caucus PAC		C C00147512
Check if 24-hour report 48-hour report New report	t Amends report filed	on M = M / D = D / Y = Y = Y
Full Name of Payee Deep South Political Consulting		Date of Public Distribution/Dissemination
Mailing Address 909 Poydras St		10 29 2018 Amount
Ste 1825		- Income
1 '	ip Code	4909.73
New Orleans LA 7	70112-4045	Transaction ID: VNV6Y9YFDY4 Date of Disbursement or Obligation
Purpose of Expenditure Mail Piece Production & Shipping	Category/ Type 006	10 / 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Office	Sought: X House District: 04
HORSFORD, STEVEN ALEXZANDER, , ,	Oppose	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought	4909.73 Disbur 2018	rsement For: Primary General  Other (specify)
Full Name of Payee		Date of Public Distribution/Dissemination
Deep South Political Consulting		10 29 2018
Mailing Address 909 Poydras St		
Ste 1825		Amount
City State Z	ip Code	1299.38
New Orleans LA	70112-4045	Transaction ID : VNV6Y9YFE00  Date of Disbursement or Obligation
Purpose of Expenditure Mail Piece Production & Shipping	Category/ Type 006	10 26 Y 2018
Name of Federal Candidate	<b>✗</b> Support Office	Sought: House District: 19
DELGADO, ANTONIO, , ,	Oppose	President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought	1299.38 Disbu 2018	rsement For:
(a) SUBTOTAL of Itemized Independent Expenditures	·····	6209.11
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	7 7 7
(c) TOTAL Independent Expenditures	······	7 7 7
Under penalty of perjury I certify that the independent expenditures rewith, or at the request or suggestion of, any candidate or authorized coparty committee) any political party committee or its agent.		
Jenkins, Earl, R, ,  [Electronical Signature]	ally Filed] Date 10	
- <del>y</del> <del>e</del>		

Schedule E)	MONES	PAGE 5 OF 8 FOR SE OF FORM 24/48			
AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼			
Congressional Black Caucus PAC		C C00147512			
check if X 24-hour report 48-hour report New	v report Amends report	t filed on			
Full Name of Payee		Date of Public Distribution/Dissemination			
Fuse Advertising, Inc.		10 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 802 N 1st St		Amount			
City State	Zip Code	14285.71			
Saint Louis MO	63102-2529	Transaction ID : VNV6Y9YFJP3  Date of Disbursement or Obligation			
Purpose of Expenditure Digital Advertising	Category/ Type 006	10 30 2018			
Name of Federal Candidate	<b>✗</b> Support	Office Sought: X House District: 25			
HILL, KATHERINE LAUREN, , ,	Oppose	President Senate State: CA			
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary   ✓ General  Other (specify)   ✓			
Full Name of Payee		Date of Public Distribution/Dissemination			
Fuse Advertising, Inc.		10 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 802 N 1st St		Amount			
City State	Zip Code	14285.71			
Saint Louis MO	63102-2529	Transaction ID: VNV6Y9YFJR9  Date of Disbursement or Obligation			
Purpose of Expenditure Digital Advertising	Category/ Type 006	10 30 / Y Y Y Y Y			
Name of Federal Candidate	<b>x</b> Support	Office Sought:  House District: 06			
MCBATH, LUCIA KAY, , ,	Oppose	President Senate State: GA			
Calendar Year-To-Date Per Election for Office Sought	23134.71	Disbursement For: Primary			
(a) SUBTOTAL of Itemized Independent Expenditures		28571.42			
(c) COLICINE OF HOMESON MASSING EXPONENTIAL SOCIETY		20371.42			
(b) SUBTOTAL of Unitemized Independent Expenditures		<b>&gt;</b>			
(c) TOTAL Independent Expenditures		<b>&gt;</b>			
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.					
Jenkins, Earl, R, ,  [Ele	ectronically Filed] Date	10 / 31 / 2018			
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Scl	hedule E)	I EXI ENDI	TOTILO			PAGE 6 OF 8 FOR SE OF FORM 24/48	
	ME OF COMMITTEE (In Full)				FEC IDE	NTIFICATION NUMBER ▼	
C	ongressional Black Caucus PAC				C co	00147512	
Che	Check if X 24-hour report 48-hour report New report Amends report filed on						
T	Full Name of Payee Fuse Advertising, Inc.			Date	M = M /	Distribution/Dissemination	
ŀ	Mailing Address 802 N 1st St			Amo	10 ount	31 2018	
ŀ	City	State	Zip Code			4 4005 74	
	Saint Louis	MO	63102-2529			14285.71 : VNV6Y9YFJS6 ement or Obligation	
	Purpose of Expenditure Digital Advertising		Category/ Type 006		M M / 10	30 / 2018	
ŀ	Name of Federal Candidate		<b>x</b> Support	Office Soug	ıht:	House District: 12	
	KELLY, BRENDAN, , ,		Oppose	Presid		Senate State: IL	
	Calendar Year-To-Date Per Election for Office Sought	7 7	14285.71	Disburseme	ent For: Other (spec	Primary <b>✗</b> General cify) ▶	
	Full Name of Payee Fuse Advertising, Inc.			Date	of Public I	Distribution/Dissemination  31 2018	
-	Mailing Address 802 N 1st St			Amo		31 2016	
ŀ	City	State	Zip Code	$ \Gamma$		14285.71	
	Saint Louis	МО	63102-2529			VNV6Y9YFJT4 sement or Obligation	
	Purpose of Expenditure Digital Advertising		Category/ Type 006		10	30 / 2018	
ľ	Name of Federal Candidate		<b>x</b> Support	Office Soug	ght:	House District: 13	
	LONDRIGAN, BETSY DIRKSEN, , ,		Oppose	Presi	dent	Senate State: IL	
	Calendar Year-To-Date Per Election for Office Sought	, , ,	14285.71	Disburseme 2018	ent For:	Primary <b>x</b> General cify) ▶	
(	a) SUBTOTAL of Itemized Independent Expenditure	s		. [		28571.42	
(	b) SUBTOTAL of Unitemized Independent Expendite	ures			7		
(	c) TOTAL Independent Expenditures			· [	-7-	4	
W	Inder penalty of perjury I certify that the independe vith, or at the request or suggestion of, any candidate arty committee) any political party committee or its a	te or authorized					
	Jenkins, Earl, R, , Signature	[Electron	ically Filed] Date	10	31	2018	
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Schedule E)	JENT EXI END	ITORES		PAGE 7 OF 8 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC I	DENTIFICATION NUMBER ▼
Congressional Black Caucus PAC	,		С	C00147512
Check if 24-hour report 48-hour report	New rep	ort Amends repo	rt filed on	/ D = D / Y = Y = Y
Full Name of Payee Fuse Advertising, Inc.			Date of Publ	lic Distribution/Dissemination
Mailing Address 802 N 1st St			10 Amount	31 2018
			,	
City	State	Zip Code		14285.72
Saint Louis	МО	63102-2529		ID: VNV6Y9YFJV2 oursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 006	10	30 / 2018
Name of Federal Candidate		<b>✗</b> Support	Office Sought:	<b>✗</b> House District:01
PUREVAL, AFTAB, , ,		Oppose	President	Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		14285.72	Disbursement For: 2018 Other (s	Primary <b>X</b> General specify) ▶
Full Name of Payee			Date of Pub	lic Distribution/Dissemination
Fuse Advertising, Inc.			10	31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 802 N 1st St			Amount	
City	State	Zip Code		14285.72
Saint Louis	MO	63102-2529		ID: VNV6Y9YFJW0 oursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 006	10 <sup>M</sup>	30 / 2018
Name of Federal Candidate		<b>✗</b> Support	Office Sought:	■ House District: 02
LURIA, ELAINE, , ,		Oppose	President	Senate State: VA
Calendar Year-To-Date Per Election for Office Sought		14285.72	Disbursement For: 2018 Other (s	Primary <b>X</b> General specify) ▶
(a) SUBTOTAL of Itemized Independent Exper	nditures		•	28571.44
(b) SUBTOTAL of Unitermized Independent Exp	penditures		•	
(c) TOTAL Independent Expenditures			•	79.
Under penalty of perjury I certify that the inde with, or at the request or suggestion of, any caparty committee) any political party committee	andidate or authorized			
Jenkins, Earl, R, , Signature	[Electron	nically Filed] Date	10 / 31	2018
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Schedule E)	DENT EXIEND	HOHLO		PAGE 8 OF 8 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC ID	ENTIFICATION NUMBER ▼
Congressional Black Caucus PAC				C00147512
Check if 24-hour report 48-hour repor	t New rep	port Amends repo	ort filed on	D = D / Y = Y = Y = Y
Full Name of Payee Fuse Advertising, Inc.			M = M /	Distribution/Dissemination
Mailing Address 802 N 1st St			Amount	31 2018
City Saint Louis	State MO	Zip Code 63102-2529	Transaction	14285.72 D : VNV6Y9YFJY6
Purpose of Expenditure Digital Advertising	IVIO	Category/		rsement or Obligation
Name of Federal Candidate		Type Support	Office Sought:	7
SPANBERGER, ABIGAIL, , ,		Oppose	President	Senate State: VA
Calendar Year-To-Date Per Election for Office Sought		14285.72	Disbursement For: 2018 Other (sp.	Primary <b>✗</b> General ecify) ▶
Full Name of Payee			Date of Public	Distribution/Dissemination
Mailing Address			Amount	
City	State	Zip Code		
Purpose of Expenditure		Category/ Type	Date of Disbu	resement or Obligation
Name of Federal Candidate		Support Oppose	Office Sought:	House District:
Calendar Year-To-Date Per Election for Office Sought	7 7		Disbursement For:  Other (sp	Primary General
(a) SUBTOTAL of Itemized Independent Expe	nditures		. •	14285.72
(b) SUBTOTAL of Unitemized Independent Ex	penditures		· •	7 1 2
(c) TOTAL Independent Expenditures			<b>)</b>	148014.85
Under penalty of perjury I certify that the indewith, or at the request or suggestion of, any committee) any political party committee	andidate or authorized			
Jenkins, Earl, R, , Signature	[Electron	nically Filed] Date	9 10 / 31	2018