

# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

PAGE 1 OF 3  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>The National Republican Trust PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00455378	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Facebook</b>			Date of Public Distribution/Dissemination 10 / 14 / 2016		
Mailing Address 1 Hacker Way			Amount 752.68		
City Menlo Park	State CA	Zip Code 94025-1456	Transaction ID : E9AFEE79163544DFDB93		
Purpose of Expenditure Online Ads		Category/Type	Date of Disbursement or Obligation 10 / 16 / 2016		
Name of Federal Candidate Clinton, Hillary, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought		22974.55	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <b>Facebook</b>			Date of Public Distribution/Dissemination 10 / 16 / 2016		
Mailing Address 1 Hacker Way			Amount 751.57		
City Menlo Park	State CA	Zip Code 94025-1456	Transaction ID : E4832A45C12E74DBEBEE		
Purpose of Expenditure Online Ads		Category/Type	Date of Disbursement or Obligation 10 / 16 / 2016		
Name of Federal Candidate Clinton, Hillary, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought		23726.12	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1504.25
(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.

Wheeler, Scott, , ,

[Electronically Filed]

Date

10 / 21 / 2016

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 2 OF 3  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>The National Republican Trust PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00455378
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY /  /

Full Name of Payee <b>Facebook</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 18 / 2016
Mailing Address 1 Hacker Way		Amount 789.39
City Menlo Park	State CA	Zip Code 94025-1456
Purpose of Expenditure Online Ads	Category/Type	Transaction ID : E8EBFAEE60E124712A42 Date of Disbursement or Obligation MM / DD / YYYY 10 / 19 / 2016
Name of Federal Candidate Clinton, Hillary, , ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 24515.51		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Facebook</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2016
Mailing Address 1 Hacker Way		Amount 759.91
City Menlo Park	State CA	Zip Code 94025-1456
Purpose of Expenditure Online Ads	Category/Type	Transaction ID : E2C3011AF16ED46EBB49 Date of Disbursement or Obligation MM / DD / YYYY 10 / 19 / 2016
Name of Federal Candidate Clinton, Hillary, , ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 25275.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1549.30
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
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Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Facebook</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 20 / 2016</b>	
Mailing Address <b>1 Hacker Way</b>		Amount <b>754.22</b>	
City <b>Menlo Park</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	Transaction ID : <b>EA87C45BB0FEA4FA8BA</b>
Purpose of Expenditure <b>Online Ads</b>	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 20 / 2016</b>	
Name of Federal Candidate <b>Clinton, Hillary, , ,</b>		<input type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: <b>00</b> <input checked="" type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____	
Calendar Year-To-Date Per Election for Office Sought <b>26029.64</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> 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		<input type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate    State: _____	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>754.22</b>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	<b>3807.77</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.

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**10 / 21 / 2016**

Signature