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

NAME OF COMMITTEE (In Full)
PACRONYM

FEC IDENTIFICATION NUMBER ▼
C C00646877

Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Lockwood Strategy Labs
[MEMO ITEM] *

Mailing Address 1050 Connecticut Ave NW
66016

City	State	Zip Code
Washington	DC	20036-5303

Purpose of Expenditure
Media Buy - Estimate

Category/Type

Name of Federal Candidate
BIDEN, JOSEPH R JR, , ,
☒ Support
☐ Oppose

Date of Public Distribution/Dissemination
08 / 06 / 2020

Amount
15000.00

Transaction ID : VVAHVAQ3862
Date of Disbursement or Obligation
M M / D D / Y Y Y Y

Office Sought: ☐ House District: 00
☒ President ☐ Senate State: 00

Calendar Year-To-Date
Per Election for Office Sought
6244322.70

Disbursement For: ☐ Primary ☒ General
2020
☐ Other (specify) ▶ _____

Full Name of Payee
Lockwood Strategy Labs
[MEMO ITEM] *

Mailing Address 1050 Connecticut Ave NW
66016

City	State	Zip Code
Washington	DC	20036-5303

Purpose of Expenditure
Video and Graphic Production - Estimate

Category/Type

Name of Federal Candidate
BIDEN, JOSEPH R JR, , ,
☒ Support
☐ Oppose

Date of Public Distribution/Dissemination
08 / 06 / 2020

Amount
1636.49

Transaction ID : VVAHVAQ3870
Date of Disbursement or Obligation
M M / D D / Y Y Y Y

Office Sought: ☐ House District: 00
☒ President ☐ Senate State: 00

Calendar Year-To-Date
Per Election for Office Sought
6244322.70

Disbursement For: ☐ Primary ☒ General
2020
☐ Other (specify) ▶ _____

(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.

Bowen, Amanda, , ,
_____ [Electronically Filed] Date 08 / 07 / 2020
Signature

FEC Schedule E (Form 24/28) Rev. 09/2013