

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

NAME OF COMMITTEE (In Full) New Nation Rising
FEC IDENTIFICATION NUMBER C C00634964
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Deliver Strategies, LLC
Mailing Address PO Box 100970
City Arlington State VA Zip Code 22210-3970
Purpose of Expenditure Palm Cards - Non-Contribution Account Category/Type 006
Name of Federal Candidate NELSON, BILL, , Support
Calendar Year-To-Date Per Election for Office Sought 14310.37

Date of Public Distribution/Dissemination 10 / 18 / 2018
Amount 1073.77
Transaction ID : 500050462
Date of Disbursement or Obligation 10 / 18 / 2018
Office Sought: House District: 00
President Senate State: FL
Disbursement For: Primary General 2018

Full Name of Payee JPMorgan Chase Bank, N.A.
Mailing Address PO Box 659754
City San Antonio State TX Zip Code 78265-9754
Purpose of Expenditure Canvass Stipends - Non-Contribution Account Category/Type 001
Name of Federal Candidate NELSON, BILL, , Support
Calendar Year-To-Date Per Election for Office Sought 14310.37

Date of Public Distribution/Dissemination 11 / 01 / 2018
Amount 3310.60
Transaction ID : 500050477
Date of Disbursement or Obligation 11 / 01 / 2018
Office Sought: House District: 00
President Senate State: FL
Disbursement For: Primary General 2018

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 4384.37, (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.

Ogunnaike, Olufemi, , [Electronically Filed] Date 11 / 02 / 2018
Signature

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Full Name of Payee JPMorgan Chase Bank, N.A.
Mailing Address PO Box 659754
City San Antonio State TX Zip Code 78265-9754
Purpose of Expenditure Canvass Stipends - Non-Contribution Account Category/Type 001

Date of Public Distribution/Dissemination 11 / 01 / 2018
Amount 1210.50
Transaction ID : 500050488
Date of Disbursement or Obligation 11 / 01 / 2018

Name of Federal Candidate NELSON, BILL, , ,
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 14310.37

Office Sought: House District: 00
President Senate State: FL
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee JPMorgan Chase Bank, N.A.
Mailing Address PO Box 659754
City San Antonio State TX Zip Code 78265-9754
Purpose of Expenditure Canvass Stipends - Non-Contribution Account Category/Type 001

Date of Public Distribution/Dissemination 11 / 01 / 2018
Amount 1278.00
Transaction ID : 500050489
Date of Disbursement or Obligation 11 / 01 / 2018

Name of Federal Candidate NELSON, BILL, , ,
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 14310.37

Office Sought: House District: 00
President Senate State: FL
Disbursement For: Primary General 2018 Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 2488.50

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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Full Name of Payee JPMorgan Chase Bank, N.A.
Mailing Address PO Box 659754
City San Antonio State TX Zip Code 78265-9754
Purpose of Expenditure Canvass Stipends - Non-Contribution Account Category/Type 001

Date of Public Distribution/Dissemination 11 / 01 / 2018
Amount 300.40
Transaction ID : 500050492
Date of Disbursement or Obligation 11 / 01 / 2018

Name of Federal Candidate NELSON, BILL, , ,
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 14310.37

Office Sought: House District: 00
President Senate State: FL
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee Mission Control, Inc.
Mailing Address 624 Hebron Ave Ste 200
City Glastonbury State CT Zip Code 06033-5006
Purpose of Expenditure Palm Cards - Non-Contribution Account Category/Type 006

Date of Public Distribution/Dissemination 10 / 31 / 2018
Amount 1546.80
Transaction ID : 500050457
Date of Disbursement or Obligation 10 / 29 / 2018

Name of Federal Candidate NELSON, BILL, , ,
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 14310.37

Office Sought: House District: 00
President Senate State: FL
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1847.20
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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NAME OF COMMITTEE (In Full) New Nation Rising
FEC IDENTIFICATION NUMBER C C00634964
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Full Name of Payee The Spoken Hub LLC
Mailing Address 20 W 22Nd St Ste 706
City New York State NY Zip Code 10010-5857
Purpose of Expenditure Phone Banks - Non-Contribution Account
Category/Type 003
Name of Federal Candidate NELSON, BILL, , Support
Calendar Year-To-Date Per Election for Office Sought 14310.37

Date of Public Distribution/Dissemination 10/18/2018
Amount 264.00
Transaction ID : 500050363
Date of Disbursement or Obligation 10/18/2018
Office Sought: House District: 00
President Senate State: FL
Disbursement For: Primary General 2018

Full Name of Payee The Spoken Hub LLC
Mailing Address 20 W 22Nd St Ste 706
City New York State NY Zip Code 10010-5857
Purpose of Expenditure Phone Banks - Non-Contribution Account
Category/Type 003
Name of Federal Candidate NELSON, BILL, , Support
Calendar Year-To-Date Per Election for Office Sought 14310.37

Date of Public Distribution/Dissemination 10/21/2018
Amount 495.00
Transaction ID : 500050361
Date of Disbursement or Obligation 10/21/2018
Office Sought: House District: 00
President Senate State: FL
Disbursement For: Primary General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 759.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Full Name of Payee The Spoken Hub LLC
Mailing Address 20 W 22Nd St Ste 706
City New York State NY Zip Code 10010-5857
Purpose of Expenditure Phone Banks - Non-Contribution Account Category/Type 003
Name of Federal Candidate NELSON, BILL, , Support
Calendar Year-To-Date Per Election for Office Sought 14310.37

Date of Public Distribution/Dissemination 10/24/2018
Amount 660.00
Transaction ID : 500050360
Date of Disbursement or Obligation 10/24/2018
Office Sought: House District: 00
President Senate State: FL
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee The Spoken Hub LLC
Mailing Address 20 W 22Nd St Ste 706
City New York State NY Zip Code 10010-5857
Purpose of Expenditure Phone Banks - Non-Contribution Account Category/Type 003
Name of Federal Candidate NELSON, BILL, , Support
Calendar Year-To-Date Per Election for Office Sought 14310.37

Date of Public Distribution/Dissemination 10/30/2018
Amount 2494.80
Transaction ID : 500050500
Date of Disbursement or Obligation 10/30/2018
Office Sought: House District: 00
President Senate State: FL
Disbursement For: Primary General 2018 Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 3154.80, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures

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NAME OF COMMITTEE (In Full) New Nation Rising
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Full Name of Payee The Spoken Hub LLC
Mailing Address 20 W 22Nd St Ste 706
City New York State NY Zip Code 10010-5857
Purpose of Expenditure Phone Banks - Non-Contribution Account Category/Type 003
Name of Federal Candidate NELSON, BILL, , Support
Calendar Year-To-Date Per Election for Office Sought 14310.37

Date of Public Distribution/Dissemination 10/30/2018
Amount 1320.00
Transaction ID : 500050501
Date of Disbursement or Obligation 10/31/2018
Office Sought: House District: 00
President Senate State: FL
Disbursement For: Primary General 2018

Full Name of Payee
Mailing Address
City State Zip Code
Purpose of Expenditure Category/Type
Name of Federal Candidate Support Oppose
Calendar Year-To-Date Per Election for Office Sought

Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation
Office Sought: House District:
President Senate State:
Disbursement For: Primary General
Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 1320.00, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures 13953.87

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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