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

Schedule E) FOR SE OF FORM 24/48									
NAME OF COMMITTEE (In Full)									
Τ	he National Republican Trust PAC								
			C C00455378						
Check if 24-hour report									
	Full Name of Payee	Date of Public Distribution/Dissemination							
	Capitol Media Group, LLC	08 06 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
	Mailing Address 2100 M Street, NW, Suite 170-340	Amount							
	City State	2500.00							
	Washington DC	Zip Code 20037-1207	Transaction ID : EB731E12669FA45EF87D Date of Disbursement or Obligation						
	Purpose of Expenditure Online Ad	Category/ Type	08 17 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
	Name of Federal Candidate	Support Of	fice Sought: House District: 00						
	Hillary Clinton	X Oppose	resident Senate State:						
	Calendar Year-To-Date Per Election for Office Sought	7532.24 Dis	sbursement For: Primary General Other (specify) ▶						
	Full Name of Payee		Date of Public Distribution/Dissemination						
	Capitol Media Group, LLC	08 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
	Mailing Address 2100 M Street, NW, Suite 170-340		Amount						
	City State	Zip Code	1000.00						
	Washington DC	20037-1207	Transaction ID: E4AE34606E211412DB9A Date of Disbursement or Obligation						
	Purpose of Expenditure Online Ad	Category/ Type	08 / 29 / 2016						
	Name of Federal Candidate	Support Of	fice Sought: House District: 00						
	Hillary Clinton	X Oppose	➤ President Senate State:						
	Calendar Year-To-Date Per Election for Office Sought		sbursement For: Primary General						
	1		Other (specify) -						
	(a) SUBTOTAL of Itemized Independent Expenditures	·····	3500.00						
(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.									
	Scott Wheeler [Electron	nically Filed] Date	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
	Signature	_ · · · Date	20.0						

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	NOLIVI EXPEND	ITOTILS		PAGE 2 OF 3 FOR SE OF FORM 24/48				
NAME OF COMMITTEE (In Full)								
The National Republican Trust	C	C00455378						
Check if 24-hour report								
Full Name of Payee Capitol Media Group, LLC			M = M	c Distribution/Dissemination				
Mailing Address 2100 M Street, NW, Suite 170-340				08 20 2016 Amount				
City	State Zip Code			3000.00				
Washington	DC	20037-1207		ID: E0DB6085A4CB24D09A82 ursement or Obligation				
Purpose of Expenditure Online Ad		Category/ Type	08	23 2016				
Name of Federal Candidate		Support	Office Sought:	House District:00				
Hillary Clinton		X Oppose	✗ President	Senate State:				
Calendar Year-To-Date Per Election for Office Sought		10532.24	Disbursement For: 2016 Other (sp	Primary ✗ General Decify) ▶				
Full Name of Payee			Date of Publi	ic Distribution/Dissemination				
Capitol Media Group, LLC			08	20 / 2016				
Mailing Address 2100 M Street, NW, Sui	te 170-340		Amount					
City	State	Zip Code		250.00				
Washington	DC	20037-1207		Transaction ID : EFA2F8839309C4924B85 Date of Disbursement or Obligation				
Purpose of Expenditure Online Ad		Category/ Type	09 09	02 2016				
Name of Federal Candidate		Support	Office Sought:	House District: 00				
Hillary Clinton		X Oppose	✗ President	Senate State:				
Calendar Year-To-Date Per Election for Office Sought		11032.24	Disbursement For: 2016 Other (sp	Primary X General pecify) ▶				
(a) SUBTOTAL of Itemized Independent Ex	penditures		>	3250.00				
(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.								
Scott Wheeler Signature	[Electron	nically Filed] Date	9 09 09	2016				
Oignaturo								

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

	iedule L)			FOR S	E OF FORM 24/48		
NAME OF COMMITTEE (In Full) The National Benublican Trust DAC							
ın	ne National Republican Trust PAC		C C00455378				
Check if 24-hour report X 48-hour report New report Amends report filed on							
T	Full Name of Payee Capitol Media Group, LLC			Date of Public Distribution/Dissemination			
				08 / 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	Mailing Address 2100 M Street, NW, Suite 170-340		Amou				
	City State		250.00				
- 1	Washington DC	Zip Code 20037-1207		Transaction ID : E341B0606F1024027836 Date of Disbursement or Obligation			
	Purpose of Expenditure Online Ad	Category/ Type		09 / 02) / Y Y Y Y		
T	Name of Federal Candidate	Support	Office Sough	nt: Hous	se District:00		
	Hillary Clinton	X Oppose	x Preside	ent Sena	ite State:		
	Calendar Year-To-Date Per Election for Office Sought		Disbursemen 2016		imary X General		
H				other (specify)			
	Full Name of Payee Capitol Media Group, LLC [MEMO ITEM] x			of Public Distrib			
	Mailing Address 2100 M Street, NW, Suite 170-340		Amou		2010		
	City State	Zip Code	$\dashv \sqcap$		4200.00		
	Washington DC	20037-1207		action ID : E47F of Disbursemen	4F656293942D4AD5 t or Obligation		
	Purpose of Expenditure Online Ad	Category/ Type		M = M / D = D / Y = Y = Y			
	Name of Federal Candidate	Support	Office Sough	nt: Hous	se District: 00		
	Hillary Clinton	X Oppose	✗ Preside	ent Sena	ate State:		
	Calendar Year-To-Date Per Election for Office Sought	15232.24	Disbursemen 2016 O	nt For: Pr	imary 🗶 General		
(a	a) SUBTOTAL of Itemized Independent Expenditures		· [1711	250.00		
(b) SUBTOTAL of Unitemized Independent Expenditures							
(c	c) TOTAL Independent Expenditures		· [7000.00		
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.							
	Scott Wheeler [Electron	nically Filed] Date	M = M /	09 / Y	2016		
	Signature		لنب				

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