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48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

| 1. NAME OF COMMITTEE IN FULL Brad Ashford for Congress | | | | |] | |
|---|---------------|------------------------------|--|----------------------------|---|--------|
| ADDRESS (number and street) | PO Box 24023 | | | | _ | |
| CITY STATE Omaha NE | | | ZIP COI 6812 | | - | |
| 2. NAME OF CANDIDATE Ashford, Brad, , , | | | 3. OFFICE SOUGHT (State and District) House NE 02 | | 4. FEC IDENTIFICATION NUMBER C00557181 | |
| 5. IS THIS AN AMENDMENT? | NO, THIS IS A | NEW FILING | YES, IT AMENDS THE | | //_ | |
| A. FULL NAME Gupta, Margaret, , | | Name of Employer COO | | Date (month, day, year) | Amount | |
| MAILING ADDRESS 11925 Triple Crown Rd | | Transaction ID : VNJ61F7PRC9 | | 10/23/2016 | 2700.00 | |
| CITY | STATE | ZIP CODE | Occupation | | — | |
| Reston | VA | 20191-3015 | Apex CoVantage | | | |
| B. FULL NAME | | | Name of Employer | | Date (month, day, year) | Amount |
| MAILING ADDRESS | | | - | | | |
| СІТҮ | STATE | ZIP CODE | Occupation | | _ | |
| C. FULL NAME | | Name of Employer | | Date (month, day, year) | Amount | |
| MAILING ADDRESS | | | _ | | | |
| СІТҮ | STATE | ZIP CODE | Occupation | | | |
| D. FULL NAME | | | Name of Employer | | Date (month, day, year) | Amount |
| MAILING ADDRESS | | | | | | |
| CITY | STATE | ZIP CODE | Occupation | | | |
| E. FULL NAME | | | Name of Employer | | Date (month, day, year) | Amount |
| MAILING ADDRESS | | | - | | | |
| СІТҮ | STATE | ZIP CODE | Occupation | | | |
| SIGNATURE (optional) Barrett, Frank, , , | | | [Electronically Filed] | DATE 10/24/2016 | For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100 | |



