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

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
ColorOfChange PAC	
	C C00428557
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	Date of Public Distribution/Dissemination
Revolution Messaging	M M / D D / Y Y Y Y
Mailing Address 1730 Rhode Island Ave, NW	11 05 2016 Amount
City State Zip Code	1932.82
Washington DC 20036	Transaction ID : SE.5277 Date of Disbursement or Obligation
Purpose of Expenditure Online Advertising  Category/ Type	11 05 / 2016
Name of Federal Candidate Support Office	e Sought: House District:00
MURPHY, PATRICK E, , ,	President X Senate State: FL
Calendar Year-To-Date Per Election for Office Sought  Disbt 2016	ursement For: Primary   General  Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	
	Amount
City State Zip Code	
Purpose of Expenditure	Date of Disbursement or Obligation
Category/ Type	W - W / D - D / T - T - T - T
Name of Federal Candidate Support Offic	e Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Disb	ursement For: Primary General
Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	1932.82
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
(c) FOIRE independent Expenditures	1932.82
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.	
Goodman, Keith, , ,	
[Electronically Filed] Date	1 06 2016
Signature	