24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
For Our Future	
	C C00620971
Check if X 24-hour report 48-hour report New report Amends report filed	on Mam / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
El Toro	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 124 N 1st St	11 01 2018 Amount
City State Zip Code	20000.00
Louisville KY 40202-1357	Transaction ID: VSG8M9Z0G61 Date of Disbursement or Obligation
Purpose of Expenditure Estimated Cost for Digital Advertising Category/ Type 004	11 01 / 2018
Name of Federal Candidate Support Office	e Sought: X House District: 01
Chabot, Steve, , ,	President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought Disbut 2018	ursement For: Primary General Other (specify) ▶
Full Name of Payee Facebook	Date of Public Distribution/Dissemination
	10 31 2018
Mailing Address 1 Hacker Way	Amount
City State Zip Code	37500.00
Menlo Park CA 94025-1456	Transaction ID: VSG8M9Z0G45 Date of Disbursement or Obligation
Purpose of Expenditure Estimated Cost for Digital Advertising Category/ Type 004	10 31 2018
Name of Fodoval Condidate	
Nelson Bill	e Sought: House District:
Oppose	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought Disb 2018	ursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	57500.00
(a) SUBTOTAL OF REMIZED INDEPENDENT Expenditures	57500.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Gallegos, Sky, , , [Electronically Filed] Date	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)		FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼			
For Our Future		C C00620971	
		<u> </u>	
Check if 24-hour report 48-hour report New report Amends report filed on 48-hour report			
Full Name of Payee Facebook	Date	of Public Distribution/Dissemination	
Facebook	N.	11 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 1 Hacker Way	Amou	int	
City State Zip C	ode	13046.00	
		saction ID: VSG8M9Z0G53 of Disbursement or Obligation	
Purpose of Expenditure Estimated Cost for Digital Advertising Cate	gory/ Type 004	11 / 01 / 2018	
Name of Federal Candidate	Support Office Sough	nt: Nouse District: 01	
Chabot, Steve, , ,	X Oppose Preside	ent Senate State: OH	
Calendar Year-To-Date Per Election for Office Sought 706	Disbursemer 2018	nt For:	
Full Name of Payee	Date	of Public Distribution/Dissemination	
	Г	M M	
Mailing Address			
	Amou	unt	
City State Zip C	ode		
	Date	of Disbursement or Obligation	
Purpose of Expenditure Cate		M = M / D = D / Y = Y = Y	
Name of Federal Candidate	Support Office Sough	ht: House District:	
	Oppose Presid	lent Senate State:	
Calendar Year-To-Date	Disbursemer		
Per Election for Office Sought		Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures		13046.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures	· .	70546.00	
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.			
Gallegos, Sky, , , [Electronically F	Ciled] Date 11	01 2018	
Signature			