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						
Check if 24-hour report 48-hour report New report Amends report filed on							
Full Name of Payee	Date of Public Distribution/Dissemination						
AFSCME Special Account	10 08 2018						
Mailing Address 1625 L St NW	Amount						
	201500						
City State Zip Code Washington DC 20036-5665	2815.80 Transaction ID : VSG8M9YW9C6						
	Date of Disbursement or Obligation						
Purpose of Expenditure In-Kinded Voter Outreach Calls Category/ Type 004	10 08 / 2018						
Name of Federal Candidate Support Office	e Sought: House District:						
Nelson, Bill, , ,	President X Senate State: FL						
Calendar Year-To-Date Per Election for Office Sought Calendar Year-To-Date Disbut							
	Other (specify) -						
Full Name of Payee Facebook	Date of Public Distribution/Dissemination						
Mailing Address 1 Hacker Way	10 15 2018						
1 Hacker Way	Amount						
City State Zip Code	7605.50						
Menlo Park CA 94025-1456	Transaction ID : VSG8M9YW927 Date of Disbursement or Obligation						
Purpose of Expenditure Estimated Cost for Digital Advertising Category/ Category/	M M / D D / Y Y Y Y						
Estimated Cost for Digital Advertising Odd Type 004	10 15 2018						
Name of Federal Candidate Support Office	e Sought: 🗶 House District: 01						
Chabot, Steve, , ,	President Senate State: OH						
	ursement For: Primary 🗶 General						
Per Election for Office Sought 22194.81 2018	Other (specify)						
(a) SUBTOTAL of Itemized Independent Expenditures	10421.30						
(b) SUBTOTAL of Unitemized Independent Expenditures							
(c) TOTAL Independent Expenditures							
	7 7						
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, , ,	M / D D / Y Y Y						
[Electronically Filed] Date 1	0 16 2018						
Signature							

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	II EXI END	ITOTILO		PAGE 2 OF 4 FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)			FEC	DIDENTIFICATION NUMBER ▼		
For Our Future			С	C00620971		
Check if 24-hour report 48-hour report						
Full Name of Payee			Date of Pu	ublic Distribution/Dissemination		
Facebook			M 10	/ 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 1 Hacker Way			Amount			
City	State	Zip Code		37500.00		
Menlo Park	CA	94025-1456		on ID: VSG8M9YW919 sbursement or Obligation		
Purpose of Expenditure Estimated Cost for Digital Advertising		Category/ Type 004	10	16 2018		
Name of Federal Candidate		x Support	Office Sought:	House District:		
Nelson, Bill, , ,		Oppose	President	Senate State: FL		
Calendar Year-To-Date Per Election for Office Sought	, , ,	631771.89	Disbursement For 2018 Other	r: Primary 🗶 General (specify) ▶		
Full Name of Payee	_		Date of Pu	ublic Distribution/Dissemination		
Fieldworks LLC			10	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address PO Box 9897			Amount			
City	State	Zip Code		182663.00		
Washington	DC	20016-8897		n ID : VSG8M9YW943 isbursement or Obligation		
Purpose of Expenditure Canvassing Services		Category/ Type 004	10	04 2018		
Name of Federal Candidate		x Support	Office Sought:	House District:		
Rosen, Jacky, , ,		Oppose	President	Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought	7 7	291159.42	Disbursement Fo 2018 Other	r: Primary ✗ General (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditure	es		•	220163.00		
(b) SUBTOTAL of Unitemized Independent Expenditures						
				45 45		
(c) TOTAL Independent Expenditures			•	41141141		
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, , , Signature	[Electron	ically Filed] Date	10 1	6 2018		
Oignature						

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

	Siledule Ly	FOR SE OF FORM 24/48			
	ME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
_	or Our Future	C C00620971			
Ch	neck if 24-hour report 48-hour report New report Amends report filed	on Man / Dad / Yayayay			
	Full Name of Payee	Date of Public Distribution/Dissemination			
	Hustle, Inc.	10 16 2018			
	Mailing Address 343 Sansome St	Amount			
	FI 6	2000000			
	City State Zip Code San Francisco CA 94104-1303	20000.00 Transaction ID : VSG8M9YW935 Date of Disbursement or Obligation			
	Purpose of Expenditure Digital Communications Category/ Type 004	10 16 2018			
	Name of Federal Candidate Support Office	e Sought: House District:			
	Nelson, Bill, , ,	President State: FL			
	Calendar Year-To-Date Per Election for Office Sought Disbrace 2018				
		Other (specify) ►			
	Full Name of Payee Image Plus Graphics, Inc.	Date of Public Distribution/Dissemination			
	Mailing Address 1440 NE 131st St	10 15 2018 Amount			
	City State Zip Code	4399.97			
	North Miami FL 33161-4424	Transaction ID : VSG8M9YW8Z4 Date of Disbursement or Obligation			
	Purpose of Expenditure Printing and Shipping - Canvassing Literature Category/ Type 004	10 15 2018			
	Name of Federal Candidate Support Offic	e Sought: House District:			
	Nelson, Bill, , ,	President Senate State: FL			
	Calendar Year-To-Date Per Election for Office Sought Disb 2018	ursement For: Primary			
	(a) SUBTOTAL of Itemized Independent Expenditures	24399.97			
(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.					
		M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	Signature	2010			

PAGE 3

OF

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 4 OF 4 FOR SE OF FORM 24/48				
NAME OF COMMITTEE (In Full)	EC IDENTIFICATION NUMBER ▼				
For Our Future	C00620971				
Check if 24-hour report					
Full Name of Payee Date of F	Public Distribution/Dissemination				
Image Plus Graphics, Inc.	M / D D / Y Y Y Y				
Mailing Address 1440 NE 131st St Amount					
City State Zip Code	2199.99				
North Miami FL 33161-4424 Transact	tion ID: VSG8M9YW902 Disbursement or Obligation				
Purpose of Expenditure Printing and Shipping - Canvassing Literature Category/ Type 004					
Name of Federal Candidate Support Office Sought:	House District:				
Scott, Rick, , , President					
Calendar Year-To-Date Per Election for Office Sought Disbursement F 2018 Othe	for: Primary x General er (specify) ▶				
Full Name of Payee Date of	Public Distribution/Dissemination				
Mailing Address	, , , , , , , , , , , , , , , , , , , ,				
Amount					
City State Zip Code	7				
	Disbursement or Obligation				
Purpose of Expenditure Category/ Type	M / D = D / Y = Y = Y				
Name of Federal Candidate Support Office Sought:	House District:				
Oppose President	Senate State:				
Calendar Year-To-Date Per Election for Office Sought Other	For: Primary General er (specify) ▶				
	(1)/				
(a) SUBTOTAL of Itemized Independent Expenditures	2199.99				
(b) SUBTOTAL of Unitemized Independent Expenditures	7 1 7 1 7				
(c) TOTAL Independent Expenditures	257184.26				
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.					
[Electronically Filed] Date 10	16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Signature					