

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

 PAGE 1 OF 1
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Ending Spending Action Fund			FEC IDENTIFICATION NUMBER ▼ C C00489856		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on			M M M D D D Y Y Y Y Y Y		
Full Name of Payee CD, Inc.			Date of Public Distribution/Dissemination M M M D D D Y Y Y Y Y Y		
Mailing Address P. O. Box 1877			Amount 6500.00		
City Alexandria		State VA	Zip Code 22313		Transaction ID : SE.6179
Purpose of Expenditure online advertising		Category/Type		Date of Disbursement or Obligation M M M D D D Y Y Y Y Y Y	
Name of Federal Candidate David Perdue			☒ Support ☐ Oppose		
Calendar Year-To-Date Per Election for Office Sought			5677673.05		
			Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: GA		
			Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶ _____		

Full Name of Payee			Date of Public Distribution/Dissemination		
Mailing Address			Amount		
City		State	Zip Code		Date of Disbursement or Obligation
Purpose of Expenditure		Category/Type			
Name of Federal Candidate			☐ Support ☐ Oppose		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	6500.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	6500.00

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.

Nancy H. Watkins

Signature _____

[Electronically Filed]

Date

M M M

D D D

Y Y Y Y Y Y

10

31

2014