

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

 PAGE 1 OF 1
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Heartland Resurgence	FEC IDENTIFICATION NUMBER ▼ C C00544551
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 Multi Media Services		Date of Public Distribution/Dissemination M M M D D D Y Y Y Y Y Y 10 03 2016	
Mailing Address 915 King Street		Amount 61950.00	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.4258 Date of Disbursement or Obligation M M M D D D Y Y Y Y Y Y 10 03 2016
Purpose of Expenditure Advertising		Category/ Type 004	
Name of Federal Candidate Kander, Jason, ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: <u>MO</u>
Calendar Year-To-Date Per Election for Office Sought		213450.00	Disbursement For: ☐ Primary ☒ General 2016 ☐ Other (specify) ► _____

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

(a) SUBTOTAL of Itemized Independent Expenditures..... ►	61950.00
(b) SUBTOTAL of Unitemized Independent Expenditures ►	
(c) TOTAL Independent Expenditures..... ►	61950.00

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.

Hartley, Gregg, ,

[Electronically Filed]

Date

M M M

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Y Y Y Y Y Y

10

03

2016

Signature