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

Schedule E)				PAGE 1 OF 9 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	X New repo	ort Amends repo		M = M / D = D / Y = Y = Y
Full Name of Payee America Votes			Date	of Public Distribution/Dissemination
			[	09 28 2020
Mailing Address 1155 Connecticut Ave NW			Amor	unt
Ste 600				
City	State DC	Zip Code	Tran	492.66 saction ID : VSG8MA1A9H0
Washington		20036-4324		of Disbursement or Obligation
Purpose of Expenditure Phone Bank (Estimate)		Category/ Type	$\exists \mid \llbracket$	M = M / D = D / Y = Y = Y
Name of Federal Candidate		<b>✗</b> Support	Office Soug	ht: House District:
BIDEN, JOSEPH R JR, , ,		Oppose	<b>x</b> Presid	
Calendar Year-To-Date		500700.04	Disburseme	ent For: Primary Seneral
Per Election for Office Sought	7	598792.01		Other (specify)
Full Name of Payee			Date	of Public Distribution/Dissemination
Toskr, Inc				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1330 Broadway			Amo	unt
FI 3				unt
City	State	Zip Code		319.64
Oakland	CA	94612-2503		saction ID: VSG8MA1A9Z0 of Disbursement or Obligation
Purpose of Expenditure Phone Bank (Estimate)		Category/ Type	]   [	M = M / D = D / Y = Y = Y
Name of Federal Candidate		Support	Office Soug	ht: House District:
TRUMP, DONALD J., , ,		X Oppose	X Presid	
Calendar Year-To-Date			Disburseme	
Per Election for Office Sought		598792.01	2020	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditure	ЭS			812.30
(b) SUBTOTAL of Unitemized Independent Expendit	iures		· •	141141141
(c) TOTAL Independent Expenditures				
(4)		•••••		7 7 7
Under penalty of perjury I certify that the independent	ent expenditures	reported herein were	not made in	cooperation, consultation, or concert
with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized	•		•
Stoltz, Gail, , ,	[Electron	nically Filed] Date	e 09	29 2020
Signature		Date	, 09	29 2020

Schedule E)	PAGE 2 OF 9 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 file	d on M = M / D = D / Y = Y = Y
Full Name of Payee	Date of Public Distribution/Dissemination
For Our Future Action Fund	09
Mailing Address PO Box 34390	Amount
City State Zip Code	1367.72
Washington DC 20043-4390	Transaction ID : VSG8MA1A9N1 Date of Disbursement or Obligation
Purpose of Expenditure Phonebanking Services from 9/26-9/30 (Estimate)  Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	ce Sought: House District:
BIDEN, JOSEPH R JR, , ,	
Calendar Year-To-Date Per Election for Office Sought  Disb. 2020	oursement For: Primary General  Other (specify)
Full Name of Payee	Date of Public Distribution/Dissemination
NGP VAN, Inc.	09 26 2020
Mailing Address PO Box 392264	Amount
City State Zip Code	63.02
Pittsburgh PA 15251-9264	Transaction ID : VSG8MA1A9T1 Date of Disbursement or Obligation
Purpose of Expenditure Phone Bank (Estimate)  Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	ce Sought: House District:
BIDEN JOSEPH R JR	President Senate State:
Calendar Year-To-Date Per Election for Office Sought  Dist 202	oursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	1430.74
(a) COD TO THE OF ROMEDON Expositional Expositional Community of the Code of t	1430.74
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not me 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.	
	09 29 2020
- <del>0 mm-</del>	

Schedule E)	PAGE 3 OF 9 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 M=M / D=D / Y=Y=Y
Full Name of Payee	Date of Public Distribution/Dissemination
Alianza for Progress	09 / 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10524 Moss Park Rd	Amount
# 204-625	
City State Zip Code	6037.50
Orlando FL 32832-5898	Transaction ID: VSG8MA1A9G2 Date of Disbursement or Obligation
Purpose of Expenditure Mobile Billboard (Estimate)  Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate  Support  Office	e Sought: House District:
BIDEN, JOSEPH R JR, , ,	President Senate State:
	rsement For: Primary X General
Per Election for Office Sought 598792.01 2020	Other (specify)
Full Name of Payee	Date of Public Distribution/Dissemination
Toskr, Inc	09 26 2020
Mailing Address 1330 Broadway	Amount
FI 3	Amount
City State Zip Code	319.64
Oakland CA 94612-2503	Transaction ID: VSG8MA1A9Y2 Date of Disbursement or Obligation
Purpose of Expenditure Phone Bank (Estimate)  Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	e Sought: House District:
BIDEN JOSEPH R.JR	President Senate State:
Calendar Year-To-Date Per Election for Office Sought  Disbut 2020	
	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	6357.14
(b) SUBTOTAL of Unitemized Independent Expenditures	
	4 4
(c) TOTAL Independent Expenditures	11717
Under penalty of perjury I certify that the independent expenditures reported herein were not may 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.	
[Electronically Filed] Date 0	9 29 2020
Signature	

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

Schedule E)	PAGE 4 OF 9 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	M / D D / Y Y Y Y Y
Full Name of Payee Date of Facebook	of Public Distribution/Dissemination
	09 / 27 / 2020
Mailing Address 1 Hacker Way  Amour	nt
City State Zip Code	34.50
Menlo Park CA 94025-1456 Transa	action ID : VSG8MA1A9M3 of Disbursement or Obligation
Purpose of Expanditure	M / D D / Y Y Y Y
Name of Federal Candidate Support Office Sought	t: House District:
TRUMP, DONALD J., , ,    TRUMP, DONALD J., , ,   Preside	
Calendar Year-To-Date Per Election for Office Sought  Disbursement 2020 Ot	t For: Primary <b>X</b> General ther (specify) ▶
Full Name of Payee Date of	of Public Distribution/Dissemination
	09 / 28 / 2020
Mailing Address PO Box 34390	
Amour	nt
City State Zip Code	1998.36
Date of	of Disbursement or Obligation
Purpose of Expenditure Phonebanking Services from 9/28-9/30 (Estimate)  Category/ Type	D D / Y Y Y Y
Name of Federal Candidate Support Office Sought	t: House District:
TRUMP, DONALD J., , ,	ent Senate State:
Calendar Year-To-Date Per Election for Office Sought  Disbursement 2020 Ot	t For: Primary <b>X</b> General
	(
(a) SUBTOTAL of Itemized Independent Expenditures	2032.86
(b) SUBTOTAL of Unitemized Independent Expenditures	7 1 7 1 7 1
(c) TOTAL Independent Expenditures	7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in committee, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the party committee) any political party committee or its agent.	
Stoltz, Gail, , , [Electronically Filed] Date 09	29 2020
Signature	

Schedule E)	123	PAGE 5 OF 9 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
For Our Future		C C00620971
Check if 24-hour report X 48-hour report New report	Amends report filed on	= M / D = D / Y = Y = Y = Y
Full Name of Payee	Date	of Public Distribution/Dissemination
NGP VAN, Inc.		09 / 26 / Y Y Y Y Y
Mailing Address PO Box 392264	Amou	nt
City State Zip 0	Code	63.02
1 '		action ID : VSG8MA1A9X4 of Disbursement or Obligation
Purpose of Expenditure Phone Bank (Estimate)		/ D D / Y W W W
Name of Federal Candidate	Support Office Sough	t: House District:
TRUMP, DONALD J., , ,	X Oppose X Preside	ent Senate State:
Calendar Year-To-Date Per Election for Office Sought 598	Disbursemen 2020 C	ther (specify) ►
Full Name of Payee	Date	of Public Distribution/Dissemination
Facebook		09 / 27 / Y 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	Code	195.00
Menlo Park CA 940		action ID: VSG8MA1A9K5 of Disbursement or Obligation
Purpose of Expenditure Digital Advertising (Estimate)	tegory/ Type	/ = M / D = D / Y = Y = Y
Name of Federal Candidate	<b>✗</b> Support Office Sough	nt: House District:
BIDEN, JOSEPH R JR, , ,	Oppose  Presid	ent Senate State:
Calendar Year-To-Date Per Election for Office Sought 598	Disbursemer 2020	nt For: Primary <b>X</b> General Other (specify) ▶
<u></u>		
(a) SUBTOTAL of Itemized Independent Expenditures	······	258.02
(b) SUBTOTAL of Unitemized Independent Expenditures		7 1 7 1 7 1
(c) TOTAL Independent Expenditures		7 1 7 1 7
Under penalty of perjury I certify that the independent expenditures repo with, or at the request or suggestion of, any candidate or authorized com- party committee) any political party committee or its agent.		
Stoltz, Gail, , , [Electronically Signature	Filed] Date 09	29 / 2020
=.g. 18181.9		

Schedule E)	PAGE 6 OF 9 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 or	M = M / D = D / Y = Y = Y
	Date of Public Distribution/Dissemination
For Our Future Action Fund	09 / 28 / 2020
Mailing Address PO Box 34390	Amount
City State Zip Code	1998.36
	Transaction ID: VSG8MA1A9R5 Date of Disbursement or Obligation
Purpose of Expenditure Phonebanking Services from 9/28-9/30 (Estimate)  Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office S	ought: House District:
RIDEN JOSEPH P IR	resident Senate State:
Calendar Year-To-Date Per Election for Office Sought  Disburse 2020	ement For: Primary   General  Other (specify) ▶
	Date of Public Distribution/Dissemination
Toskr, Inc	09 28 2020
Mailing Address 1330 Broadway	Amount
FI 3	
City State Zip Code	189.75
	ransaction ID: VSG8MA1AA16 Date of Disbursement or Obligation
Purpose of Expenditure Digital Communications (Estimate)  Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate  X Support Office S	Sought: House District:
BIDEN JOSEPH R JR	resident Senate State:
Calendar Year-To-Date Per Election for Office Sought  Disburse 2020	ement For: Primary   General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	2188.11
(a) CODITION OF HOMEON EXPONENTIAL COMMISSION OF THE COMMISSION OF	2100.11
(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 with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
Stoltz, Gail, , ,  [Electronically Filed] Date 09	29 2020
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Schedule E)	TOTILS	PAGE 7 OF 9 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	ort Amends report file	d on M = M / D = D / Y = Y = Y
Full Name of Payee For Our Future Action Fund		Date of Public Distribution/Dissemination
		09 28 2020
Mailing Address PO Box 34390		Amount
City State	Zip Code	1651.99
Washington DC	20043-4390	Transaction ID : VSG8MA1A9Q7 Date of Disbursement or Obligation
Purpose of Expenditure Digital Communications Services from 9/28-9/30 (Estimate)	Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate	<b>✗</b> Support Office	ce Sought: House District:
BIDEN, JOSEPH R JR, , ,	Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	598792.01 Dist 202	oursement For: Primary General  Other (specify)
Full Name of Payee	·	Date of Public Distribution/Dissemination
NGP VAN, Inc.		09 26 2020
Mailing Address PO Box 392264		Amount
City State	Zip Code	55.14
Pittsburgh PA	15251-9264	Transaction ID : VSG8MA1A9W7 Date of Disbursement or Obligation
Purpose of Expenditure Phone Bank (Estimate)	Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate	🗶 Support Offi	ce Sought:   House District: 03
LEE, SUSIE, , ,	Oppose	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought	732.18 Dis 202	oursement For:  Primary  General  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	·····	1707.13
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	·······	
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Stoltz, Gail, , ,  [Electronic Signature]	cally Filed] Date	09 29 2020
g/100000-0		

Schedule E)	PAGE 8 OF 9 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	EC IDENTIFICATION NUMBER ▼
For Our Future	C C00620971
Check if 24-hour report  48-hour report  New report  Amends report filed on	M / D = D / Y = Y = Y
Full Name of Payee Date of	Public Distribution/Dissemination
	19 / 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1330 Broadway  Amount	
FI 3	
City State Zip Code	4398.75
	ction ID: VSG8MA1AA08 Disbursement or Obligation
Purpose of Expenditure Digital Communications (Estimate)  Category/ Type	M / D D / Y Y Y Y
Name of Federal Candidate  X Support Office Sought:	House District:
BIDEN, JOSEPH R JR, , , Oppose Presiden	
Calendar Year-To-Date Disbursement I	
Per Election for Office Sought 598792.01 2020	er (specify) ▶
Full Name of Payee Date of America Votes	Public Distribution/Dissemination
Molling Address	09 / 28 / 2020
Mailing Address 1155 Connecticut Ave NW Amount	t
Ste 600	400.00
City State Zip Code Washington DC 20036-4324 Transact	492.66 tion ID : VSG8MA1A9J8
Date of	Disbursement or Obligation
Purpose of Expenditure Phone Bank (Estimate)  Category/ Type	M / D D / Y Y Y Y
Name of Federal Candidate Support Office Sought:	House District:
TRUMP, DONALD J., , ,	nt Senate State:
Calendar Year-To-Date Per Election for Office Sought  Disbursement 2020	,
Oth	ner (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	4891.41
(b) SUBTOTAL of Unitemized Independent Expenditures	
	7 7 7
(c) TOTAL Independent Expenditures	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in code with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the party committee) any political party committee or its agent.	
[Electronically Filed] Date 09	29 2020
Signature	

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

Schedule E)		PAGE 9 OF 9 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
For Our Future		C C00620971
		<b>O</b> ,,,
Check if 24-hour report 48-hour report	lew report Amends report file	ed on M M / D D / Y Y Y Y
Full Name of Payee For Our Future Action Fund		Date of Public Distribution/Dissemination
		09 26 2020
Mailing Address PO Box 34390		Amount
City State	Zip Code	1367.72
Washington DC	20043-4390	Transaction ID : VSG8MA1A9P9 Date of Disbursement or Obligation
Purpose of Expenditure Phonebanking Services from 9/26-9/30 (Estimate)	Category/ Type	Mam / Dad / Yayayay
	Туре	
Name of Federal Candidate	Support Off	ce Sought: House District:
TRUMP, DONALD J., , ,	X Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	598792.01 Dis 202	bursement For: Primary <b>x</b> General Other (specify) ►
Full Name of Payee		Date of Public Distribution/Dissemination
NGP VAN, Inc.		M = M / D = D / Y = Y = Y
Mailing Address PO Box 392264		09 26 2020
		Amount
City State	Zip Code	55.14
Pittsburgh PA	15251-9264	Transaction ID : VSG8MA1A9V9  Date of Disbursement or Obligation
Purpose of Expenditure Phone Bank (Estimate)	Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate	Support Off	ice Sought:    House District: 03
RODIMER, DAN, , ,	X Oppose	President Senate State: NV
Calendar Year-To-Date	732.18 Dis 20.	bursement For: Primary X General
Per Election for Office Sought	732.10	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	·····	1422.86
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	·····	21100.57
Under penalty of perjury I certify that the independent exper with, or at the request or suggestion of, any candidate or aur party committee) any political party committee or its agent.		
Stoltz, Gail, , ,	Electronically Filed] Date	09 29 2020
Signature	Date	