

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

1. (a) Name of Individual, Organization or Corporation American Action Network		3. FEC Identification Number C C90011230
(b) Address (number and street) ☐ check if different than previously reported 1747 Pennsylvania Avenue, NW 5th Floor		
(c) City, State and ZIP Code Washington DC 20006		
2. Occupation and Name of Employer (for Individual Filers Only)		

0.00

605779.88

FEC Schedule 5 (REV. 09/2013)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 2 OF 2
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

American Action Network

Full Name (Last, First, Middle Initial) of Payee

SRCP Media

Date of Public Distribution/Dissemination

MM / DD / YYYY
10 / 29 / 2016

Mailing Address 201 N Union St.

Suite 200

Amount

18298.00

City State Zip Code

Alexandria

VA

22314

Transaction ID : 001

Purpose of Expenditure
Media productionCategory/
Type 004Office Sought: ☒ House State: PA
☐ Senate District: 16
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Hartman, Christina, , ,Check One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought

18298.00

Disbursement For: ☐ Primary ☒ General
2016
☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

American Media & Advocacy Group

Date of Public Distribution/Dissemination

MM / DD / YYYY
10 / 29 / 2016

Mailing Address 815 Slaters Lane

Amount

587481.88

City State Zip Code

Alexandria

VA

22314

Transaction ID : 002

Purpose of Expenditure
Media placementCategory/
Type 004Office Sought: ☒ House State: PA
☐ Senate District: 16
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Hartman, Christina, , ,Check One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought

605779.88

Disbursement For: ☐ Primary ☒ General
2016
☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Date of Public Distribution/Dissemination

MM / DD / YYYY

Mailing Address

Amount

City State Zip Code

Purpose of Expenditure

Category/
TypeOffice Sought: ☐ House State: _____
☐ Senate District: _____
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: ☐ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office SoughtDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 605779.88

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶ 605779.88
(carry total from last page forward to Line 7)