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

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
For Our Future	C C00620971
	O coordin
Check if 24-hour report 48-hour report New report Amends re	eport filed on
Full Name of Payee Asian Journal Publications	Date of Public Distribution/Dissemination
Mailing Address 3700 W Desert Inn Rd	11 03 2016
Ste A	Amount
City State Zip Code	1000.00
Las Vegas NV 89102-8377	Transaction ID: VSG8M9TWCJ9 Date of Disbursement or Obligation
Purpose of Expenditure Newspaper Advertisement Category/ Type 0	04 11 03 7 2016
Name of Federal Candidate Support	Office Sought: House District:
CLINTON, HILLARY RODHAM, , ,	resident Senate State:
Calendar Year-To-Date Per Election for Office Sought 5355299.64	Disbursement For: Primary General 2016 Other (specify) ▶
Full Name of Payee Asian Journal Publications	Date of Public Distribution/Dissemination
Mailing Address 3700 W Desert Inn Rd	11 03 2016
Ste A	Amount
City State Zip Code	1000.00
Las Vegas NV 89102-8377	Transaction ID : VSG8M9TWCM5 Date of Disbursement or Obligation
Purpose of Expenditure Newspaper Advertisement Category/ Type O O	04
Name of Federal Candidate Support	t Office Sought: House District:
MASTO, CATHERINE CORTEZ, , , Oppose	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 353758.41	Disbursement For: ☐ Primary X General 2016 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	2000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	····· >
Under penalty of perjury I certify that the independent expenditures reported herein we with, or at the request or suggestion of, any candidate or authorized committee or ager party committee) any political party committee or its agent.	
Bidel-Niyat, Shirin, , , [Electronically Filed] Signature	pate 11 04 2016
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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Soficadic Ly	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
For Our Future	C C00620971
Check if X 24-hour report 48-hour report New report Amends report filed of	on M M / D D / Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
HSG Campaigns x	11 03 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1201 W 5Th St Ste F105	Amount
City State Zip Code	500.00
Los Angeles CA 90017-5120	Transaction ID : VSG8M9TWCE8 Date of Disbursement or Obligation
Purpose of Expenditure Estimated Cost for Advertising Design Services Category/ Type 004	M M / D D / Y Y Y Y Y
Name of Federal Candidate Support Office	Sought: House District:
CLINTON, HILLARY RODHAM, , ,	President Senate State:
Calendar Year-To-Date Per Election for Office Sought Disburs 2016	Sement For: Primary General
Full Name of Payee	Other (specify)
HSG Campaigns	Date of Public Distribution/Dissemination
Mailing Address 1201 W 5Th St	
Ste F105	Amount
City State Zip Code	500.00
Los Angeles CA 90017-5120	Transaction ID: VSG8M9TWCF6 Date of Disbursement or Obligation
Purpose of Expenditure Estimated Cost for Advertising Design Services Category/ Type 004	M = M / D = D / Y = Y = Y = Y
Name of Federal Candidate Support Office	Sought: House District:
MASTO, CATHERINE CORTEZ, , ,	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought Disbur 2016	resement For: Primary General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not mad 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.	
Bidel-Niyat, Shirin, , , [Electronically Filed] Date 11	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

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OF

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	TI EXI END	II OILEO		PAGE 3 OF 7 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC ID	ENTIFICATION NUMBER ▼
For Our Future			C	C00620971
Check if 24-hour report 48-hour report	X New rep	oort Amends repo	rt filed on	D = D / Y = Y = Y
Full Name of Payee			Date of Public	Distribution/Dissemination
IR Media LLC			11	03 2016
Mailing Address 1900 L St NW NW Ste. 611			Amount	
City	State	Zin Codo		6000.00
Washington	DC	Zip Code 20036-5002		6000.00 D: VSG8M9TWC72 rsement or Obligation
Purpose of Expenditure Advertising Design Services		Category/ Type 004	Date of Disbu	03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		✗ Support	Office Sought:	House District:
CLINTON, HILLARY RODHAM, , ,		Oppose	resident	Senate State:
Calendar Year-To-Date Per Election for Office Sought	7	5355299.64	Disbursement For: 2016 Other (spe	Primary x General ecify) ▶
Full Name of Payee	_		Date of Public	Distribution/Dissemination
Onyx Communications			11 /	03 / 2016
Mailing Address 2046 Westchester Dr			Amount	
City	State	Zip Code		6250.00
Silver Spring	MD	20902-3557		: VSG8M9TWCT3 rsement or Obligation
Purpose of Expenditure Voter Outreach Calls		Category/ Type 004	11 /	03 / 2016
Name of Federal Candidate		✗ Support	Office Sought:	House District:
CLINTON, HILLARY RODHAM, , ,		Oppose	✗ President	Senate State:
Calendar Year-To-Date Per Election for Office Sought	7	5355299.64	Disbursement For: 2016 Other (sp	Primary ✗ General ecify) ▶
(a) SUBTOTAL of Itemized Independent Expenditure	es		.	12250.00
(b) SUBTOTAL of Unitemized Independent Expend	itures		•	4
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized			
Bidel-Niyat, Shirin, , ,	[Electron	nically Filed] Date	11 / 04	2016

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 X 24-hour report 48-hour report New report Amends report filed	I on M M / D D / Y Y Y Y	
	Full Name of Payee	Date of Public Distribution/Dissemination	
	Onyx Communications	11 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	Mailing Address 2046 Westchester Dr	Amount	
	City State Zip Code	6250.00	
	Silver Spring MD 20902-3557	Transaction ID : VSG8M9TWCV0 Date of Disbursement or Obligation	
	Purpose of Expenditure Voter Outreach Calls Category/ Type 004	11 03 2016	
	Name of Federal Candidate Support Offic	e Sought: House District:	
	ROSS, DEBORAH, K, , Oppose	President Senate State: NC	
	Calendar Year-To-Date Per Election for Office Sought Disb	ursement For: Primary 🗶 General	
	Per Liection for Office Sought	Other (specify)	
	Full Name of Payee Print And Mail Communications LLC	Date of Public Distribution/Dissemination	
	Mailing Address 7040 Colonial Hwy	11 03 2016 Amount	
	City State Zip Code	4999.85	
	Pennsauken NJ 08109-4306	Transaction ID : VSG8M9TWCN3 Date of Disbursement or Obligation	
	Purpose of Expenditure Postage Category/ Type 004	11 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	Name of Federal Candidate Support Offic	e Sought: House District:	
	S. N. TON. J. W. J. ADV. D. D. J. J. J.	President Senate State:	
	Calendar Year-To-Date Per Election for Office Sought Disb 2016	ursement For: Primary	
	(a) SUBTOTAL of Itemized Independent Expenditures	11249.85	
(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.			
	(7) (1) 7) 11	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	Signature		
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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	PAGE 5 OF 7 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
For Our Future	C C00620971
	M M / D D / Y Y Y Y
Check if X 24-hour report 48-hour report New report Amends report filed	l on
Full Name of Payee Print And Mail Communications LLC	Date of Public Distribution/Dissemination 11 03 2016
Mailing Address 7040 Colonial Hwy	Amount
City State Zip Code	4999.85
Pennsauken NJ 08109-4306	Transaction ID : VSG8M9TWCP1 Date of Disbursement or Obligation
Purpose of Expenditure Postage Category/ Type 004	11 03 2016
Name of Federal Candidate Support Office	e Sought: House District:
McGinty, Kathleen Alana, , ,	President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	ursement For: Primary General Other (specify)
Full Name of Payee	Date of Public Distribution/Dissemination
The Contact Group, Inc.	M M / D D / Y Y Y Y
Mailing Address PO Box 187	11 03 2016
1 O Box 107	Amount
City State Zip Code	13668.75
Grasonville MD 21638-0187	Transaction ID : VSG8M9TWC98 Date of Disbursement or Obligation
Purpose of Expenditure Robocalls Category/ Type 004	11 03 / Y Y Y Y Y
Name of Federal Candidate Support Offic	e Sought: House District:
CLINTON, HILLARY RODHAM, , ,	President Senate State:
Calendar Year-To-Date Per Election for Office Sought Disb 2016	ursement For: Primary General Other (specify) Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	18668.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.	
Under penalty of perjury I certify that the independent expenditures reported herein were not m 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	11 04 2016
Signature	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	LXI LINDI	TOTILO		PAGE 6 OF 7 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 / D = D / Y = Y = Y
Full Name of Payee The Contact Group, Inc.			M	f Public Distribution/Dissemination
Mailing Address PO Box 187			Amour	11 03 2016
City	24-4-	7:- Cada		40000.75
1 '	State MD	Zip Code 21638-0187		13668.75 action ID: VSG8M9TWCA6 If Disbursement or Obligation
Purpose of Expenditure Robocalls		Category/ Type 004	M	11 03 / 2016
Name of Federal Candidate		Support	Office Sought	: House District:
STRICKLAND, TED, , ,		Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought		146311.07	Disbursement 2016 Ot	For: Primary General her (specify) ▶
Full Name of Payee The Contact Group, Inc.				of Public Distribution/Dissemination
Mailing Address PO Box 187			Amour	11 03 2016
			Amour	
City S Grasonville	State MD	Zip Code 21638-0187	Transac	5451.60 ction ID : VSG8M9TWCB4
Purpose of Expenditure Estimated Cost for Robocalls		Category/ Type 004	Date o	of Disbursement or Obligation
Name of Federal Candidate		0	055 0	Name Bistist
CLINTON, HILLARY RODHAM, , ,		Support Oppose	Office Sought Preside	
Calendar Year-To-Date Per Election for Office Sought		5355299.64	Disbursement 2016 Ot	t For: Primary X General ther (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			•	13668.75
(b) SUBTOTAL of Unitemized Independent Expenditure	es		· •	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its ag	or authorized			
Bidel-Niyat, Shirin, , , Signature	[Electroni	cally Filed] Date	11	04 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

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

Schedule E)	PAGE 7 OF 7 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
For Our Future	C C00620971
	0 000020971
Check if 24-hour report 48-hour report New report Amends	s report filed on
Full Name of Payee	Date of Public Distribution/Dissemination
The Contact Group, Inc.	11 03 2016
Mailing Address PO Box 187	Amount
City State Zip Code	5451.59
Grasonville MD 21638-0187	Transaction ID : VSG8M9TWCC2 Date of Disbursement or Obligation
Purpose of Expenditure Estimated Cost for Robocalls Category/ Type	004 M = M / D = D / Y = Y = Y
Name of Federal Candidate	oort Office Sought: House District:
MURPHY, PATRICK E, , ,	
Calendar Year-To-Date Per Election for Office Sought 980082.60	Disbursement For: Primary General 2016 Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
	M M / D D / Y Y Y Y
Mailing Address	
Maining 7.55.555	Amount
City State Zip Code	
	Date of Dishausausaut or Obligation
Purpose of Expenditure Category/	Date of Disbursement or Obligation
Type	
Name of Federal Candidate Supp	port Office Sought: House District:
Орро	ose President Senate State:
Calendar Year-To-Date	Disbursement For: Primary General
Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	57837.20
Under penalty of perjury I certify that the independent expenditures reported herein with, or at the request or suggestion of, any candidate or authorized committee or agparty committee) any political party committee or its agent.	
Bidel-Niyat, Shirin, , , [Electronically Filed]	Date 11 04 2016
Signature	