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

Schedule E)	FOR SE OF FORM 24/48
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
WE'VE GOT YOUR BACKPAC	
	C C00622647
Check if X 24-hour report 48-hour report New report Amends report filed	on Mam / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Barwick, Brian, , ,	M M / D D / Y Y Y Y
Mailing Address 5 Rivington Street #9	10 26 2016 Amount
City State Zip Code	500.64
New York NY 10002	Transaction ID : SE.4319  Date of Disbursement or Obligation
Purpose of Expenditure Facebook Advertising  Category/ Type	11 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District:
CLINTON, HILLARY RODHAM, , ,	President Senate State:
Calendar Year-To-Date Per Election for Office Sought  Disbut	ursement For: Primary <b>X</b> General  Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	
	Amount
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure  Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	e Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Disbi	ursement For: Primary General
Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	500.64
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	500.04
, , , , , , , , , , , , , , , , , , ,	500.64
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.	
Kwon Hildebolt, Daphne, , ,  [Electronically Filed] Date	M / DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	