08/10/2016 00 : 21

## Image# 201608109022187267 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

(Schedule E)	JITONES	PAGE 1 O FOR SE OF FOR	
NAME OF COMMITTEE (In Full)			
CAPE FOX PROFESSIONAL LICENSE		C C00622266	
Check if24-hour report X 48-hour report New re	port 🗙 Amends repo	rt filed on $\begin{array}{ c c c c c c c c c c c c c c c c c c c$	ү ү ү 016
Full Name of Payee		Date of Public Distribution/Disser	mination
FCC x 0025778457			2016
Mailing Address 1131 bell st			2010
9		Amount	
City State	Zip Code		780.00
Sacramento CA	95825	Transaction ID : WFT201663121 Date of Disbursement or Obligat	
Purpose of Expenditure Licensing	Category/ Type		Y Y Y
Name of Federal Candidate	Support	Office Sought: House Distric	:t:
Marie Davis	Oppose		e: CA
Calendar Year-To-Date		Disbursement For: X Primary	General
Per Election for Office Sought		2016 Other (specify) ▶	
Full Name of Payee		Date of Public Distribution/Disse	mination
Tych media llc x LPD			Y Y Y
Mailing Address Six row central #1100		0707	2007
		Amount	
City State	Zip Code		160.00
Hartford CT	06103	Transaction ID : WFT2016711329 Date of Disbursement or Obligat	
Purpose of Expenditure Disbursement	Category/ Type	M • M / D • D / Y	Y Y Y
Name of Federal Candidate	X Support	Office Sought: House Distric	ct:01
Parra Nito	Oppose	President Senate State	e: <u>CA</u>
Calendar Year-To-Date		Disbursement For: X Primary	General
Per Election for Office Sought		2016 Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures		•	0
(b) SUBTOTAL of Unitemized Independent Expenditures		•	
(c) TOTAL Independent Expenditures			0
Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.			
Marie Davis		M = M / D = D / Y = Y = Y = Y	
	nically Filed] Date		
Signature			