## 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 ▼
CAPE FOX PROFESSIONAL LICENSE	
	C C00622266
Check if 24-hour report X 48-hour report New report X Amends report file	ed on 08 10 2016
Full Name of Payee	Date of Public Distribution/Discomination
FCC	Date of Public Distribution/Dissemination
X 0025778457	31 2016
Mailing Address 1131 bell st	Amount
9	
City State Zip Code	780.00
Sacramento CA 95825	Transaction ID : WFT20166312118-1 Date of Disbursement or Obligation
Purpose of Expenditure Licensing  Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Offi	ce Sought: House District:
Dovin Maria	President Senate State: CA
	bursement For: Primary General
Per Election for Office Sought	
Full Name of Payee	Date of Public Distribution/Dissemination
Tych media llc x LPD	07 07 2007
Mailing Address Six row central #1100	07 07 2007
- Six fow central in 1100	Amount
City State Zip Code	160.00
Hartford CT 06103	Transaction ID : WFT2016711329-1
Purpose of Expenditure	Date of Disbursement or Obligation
Disbursement Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate	ice Sought: House District: 01
Nito Parra	
Орроsе	Y President Senate State.
Calendar Year-To-Date Per Election for Office Sought	bursement For: X Primary General
Tel Election for Onice Sought	Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(h) CURTOTAL of Uniterrined Independent Funeralitymes	
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	200
(b) Tem 2 masponatin Exponantico	0.00
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eith	
party committee) any political party committee or its agent.	
Davis Marie	/ M / D D / Y Y Y Y
[Electronically Filed] Date	08 10 2016
Oignature	