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

Schedule E)	FOR SE OF FORM 24/48
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
For Our Future	
	C C00620971
Check if 24-hour report 48-hour report New report Amends report f	illed on Man / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
For Our Future Action Fund	M M / D D / Y Y Y Y
Mailing Address 888 16th St NW	08 29 2016
Ste 650	Amount
City State Zip Code	172783.23
Washington DC 20006-4112	Transaction ID : VSG8M9S9CP7
	Date of Disbursement or Obligation
Purpose of Expenditure Estimated Cost for Canvassing Services for 8/29-9/4 Category/ Type 004	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support O	office Sought: House District:
HILLARY RODHAM CLINTON Oppose	President Senate State:
Odioridal Todi To Bato	isbursement For: Primary X General
rei Liection for Office Sought	Other (specify) ▶
Full Name of Payee New Partners Consulting, Inc.	Date of Public Distribution/Dissemination
Mailing Address 1250 I St NW	08 25 2016
1200 1 0(1)	Amount
Ste 200 City State Zip Code	5000.00
Washington DC 20005-5994	Transaction ID : VSG8M9S9DZ1 Date of Disbursement or Obligation
Purpose of Expenditure Digital Advertising Buy Category/ Type 004	08 / D D / Y Y Y Y Y Y 2016
Name of Federal Candidate Support C	Office Sought: House District:
DONALD J. TRUMP	President Senate State:
	Disbursement For: Primary X General
	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	5000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(b) GOD TOTAL OF OTHER MEDICAL Experiations	4 4
(c) TOTAL Independent Expenditures	5000.00
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 e party committee) any political party committee or its agent.	
Shirin Bidel-Niyat [Electronically Filed] Date	08 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	