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

Schedule E)			PAGE 1 OF 3 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full) TEA PARTY MAJORITY FUND	<u> </u>		FEC IDENTIFICATION NUMBER ▼	
TEA FARTI WAJORITI TONL	,		C C00566174	
Check if X 24-hour report 48-hour report New report X Amends report filed on 10 02 2019				
Full Name of Payee INFOCISION MANAGEMEN	T CORP		Date of Public Distribution/Dissemination	
Mailing Address 325 SPRINGSIDE DRIVE	 E		10 07 2016 Amount	
City	Stato	7:n Codo		
City AKRON	State OH	Zip Code 44333	4492.69  Transaction ID : SE.6906  Date of Disbursement or Obligation	
Purpose of Expenditure VOTER CONTACT COMMUNICATIONS		Category/ Type 004	10 26 2016	
Name of Federal Candidate		Support	Office Sought: House District: 00	
CLINTON, HILLARY RODHAM, , ,		<b>x</b> Oppose	🗶 President Senate State:	
Calendar Year-To-Date Per Election for Office Sought		454492.69	Disbursement For:  Primary  General 2016   Other (specify) ▶	
Full Name of Payee INFOCISION MANAGEMENT	CORP		Date of Public Distribution/Dissemination	
Mailing Address 325 SPRINGSIDE DRI	 √E		Amount	
City	State	Zip Code	55242.85	
AKRON	OH	44333	Transaction ID : SE.6907  Date of Disbursement or Obligation	
Purpose of Expenditure VOTER CONTACT COMMUNICATIONS		Category/ Type 004	11 / 02 / 2016	
Name of Federal Candidate		Support	Office Sought: House District: 00	
CLINTON, HILLARY RODHAM, , ,		<b>X</b> Oppose	resident Senate State:	
Calendar Year-To-Date Per Election for Office Sought		509735.54	Disbursement For: Primary General 2016 Other (specify)	
(a) SUBTOTAL of Itemized Independent Ex	xpenditures		. ▶ 59735.54	
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures			<b>&gt;</b>	
. , , , , ,	y candidate or authorized	•	not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political	
MACKENZIE, SCOTT B, , , Signature	[Electron	nically Filed] Date	10 02 7 2019	
Signature				

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 3 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)	EC IDENTIFICATION NUMBER ▼			
TEA PARTY MAJORITY FUND	C00566174			
Check if 24-hour report 48-hour report New report Amends report filed on 10 02 2019				
INFOCISION MANAGEMENT CORP				
Mailing Address 325 SPRINGSIDE DRIVE  Amount	07 2016			
City. Code	57004.00			
1	57821.33  tion ID : SE.6908 Disbursement or Obligation			
Purpose of Expenditure VOTER CONTACT COMMUNICATIONS  Category/ Type  004	M / D D / Y Y Y Y			
Name of Federal Candidate Support Office Sought:	House District: 00			
CLINTON, HILLARY RODHAM, , ,	Senate State:			
Calendar Year-To-Date Per Election for Office Sought  Disbursement F 2016  Other	or: Primary <b>X</b> General er (specify) ▶			
Full Name of Payee INFOCISION MANAGEMENT CORP  Date of				
Mailing Address 325 SPRINGSIDE DRIVE Amount	2010			
City State Zip Code	59977.11			
AKRON OH 44333 <b>Transacti</b>	ion ID : SE.6909 Disbursement or Obligation			
Purpose of Expenditure VOTER CONTACT COMMUNICATIONS  Category/ Type  004  11				
Name of Federal Candidate Support Office Sought:	House District: 00			
CLINTON, HILLARY RODHAM, , ,	Senate State:			
Calendar Year-To-Date Per Election for Office Sought  Disbursement F 2016  Other	For: Primary X General er (specify) ▶			
(a) SUBTOTAL of Itemized Independent Expenditures	117798.44			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures	7 1 7 1 7 1			
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.				
MACKENZIE, SCOTT B, , , [Electronically Filed] Date 10	02 / 2019			

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)		PAGE 3 OF 3 FOR SE OF FORM 24/48		
AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼		
TEA PARTY MAJORITY FUND		C C00566174		
heck if X 24-hour report 48-hour report New report X Amends report filed on 10 02 2019				
Full Name of Payee INFOCISION MANAGEMENT CORP		Date of Public Distribution/Dissemination		
Mailing Address 325 SPRINGSIDE DRIVE		10		
City State AKRON OH	Zip Code 44333	32318.20  Transaction ID : SE.6911  Date of Disbursement or Obligation		
Purpose of Expenditure VOTER CONTACT COMMUNICATIONS	Category/ Type 004	Date of Disbursement of Obligation  12 05 / 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: 00		
CLINTON, HILLARY RODHAM, , ,	X Oppose	President Senate State:		
Calendar Year-To-Date Per Election for Office Sought	659852.18	Disbursement For:  Primary  ■ General 2016  Other (specify)  ■		
Full Name of Payee		Date of Public Distribution/Dissemination		
INFOCISION MANAGEMENT CORP		10 07 2016		
Mailing Address 325 SPRINGSIDE DRIVE		Amount		
City State	Zip Code	59522.30		
AKRON OH	44333	Transaction ID : SE.6910  Date of Disbursement or Obligation		
Purpose of Expenditure VOTER CONTACT COMMUNICATIONS	Category/ Type 004	11 / 28 / Y Y Y Y Y		
Name of Federal Candidate	Support	Office Sought: House District: 00		
CLINTON, HILLARY RODHAM, , ,	<b>X</b> Oppose	🗶 President Senate State:		
Calendar Year-To-Date Per Election for Office Sought	719374.48	Disbursement For:  Primary  General 2016  Gther (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures		91840.50		
(,,				
(b) SUBTOTAL of Unitemized Independent Expenditures		· •		
(c) TOTAL Independent Expenditures		269374.48		
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.				
MACKENZIE, SCOTT B, , ,  [Electrical Signature]	ctronically Filed] Date	10 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		