## 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 ▼
Change Campaign Super PAC	
	C C00567396
Check if X 24-hour report 48-hour report New report Amends report file	d on M M M / D D / Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
Targeted Platform Media	M M / D D / Y Y Y
Mailing Address 1291 Hollywood Ave	11 03 2018 Amount
City State Zip Code	54999.72
Annapolis MD 21403-4909	Transaction ID: VTDDNAAXBC8  Date of Disbursement or Obligation
Purpose of Expenditure Media Buy  Category/ Type	11 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	ce Sought: X House District: 02
EASTMAN, KARA, , ,	President Senate State: NE
Calendar Year-To-Date Per Election for Office Sought  Disk 205000.19	oursement For: Primary <b>X</b> General  Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
	M M / D D / Y Y Y Y
Mailing Address	
	Amount
City State Zip Code	-
Purpose of Expenditure	Date of Disbursement or Obligation
Category/ Type	W = W / D = D / T = T = T = T
Name of Federal Candidate Support Office	ce Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Dist	bursement For: Primary General
Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	54999.72
(b) SUPTOTAL of Uniterprized Independent Expenditures	
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	54999.72
	4 4
Under penalty of perjury I certify that the independent expenditures reported herein were not n 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.	·
Green, Adam, , ,	M / D D / Y Y Y Y Y
	11 03 2018
oignature	