

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

 PAGE 1 OF 3
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) C3 PAC		FEC IDENTIFICATION NUMBER ▼ C C00680314	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">M M M</table> / <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">D D D</table> / <table border="1" style="display:inline-table; width:80px; height:20px; text-align:center">Y Y Y Y Y Y Y Y Y Y</table>	

Full Name of Payee HARWAITH COMMUNICATIONS			Date of Public Distribution/Dissemination <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">M M M</table> / <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">D D D</table> / <table border="1" style="display:inline-table; width:80px; height:20px; text-align:center">Y Y Y Y Y Y Y Y Y Y</table> 11 / 02 / 2020	
Mailing Address 1956 LONGWOOD DR			Amount <table border="1" style="display:inline-table; width:150px; height:20px; text-align:right">125.00</table>	
City BATON ROUGE	State LA	Zip Code 70808	Transaction ID : SE.33855	
Purpose of Expenditure DIGITAL ADS		Category/ Type	Date of Disbursement or Obligation <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">M M M</table> / <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">D D D</table> / <table border="1" style="display:inline-table; width:80px; height:20px; text-align:center">Y Y Y Y Y Y Y Y Y Y</table> 11 / 02 / 2020	
Name of Federal Candidate BOEBERT, LAUREN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CO</u>	
Calendar Year-To-Date Per Election for Office Sought		<table border="1" style="display:inline-table; width:150px; height:20px; text-align:right">10125.00</table>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee HARWAITH COMMUNICATIONS			Date of Public Distribution/Dissemination <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">M M M</table> / <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">D D D</table> / <table border="1" style="display:inline-table; width:80px; height:20px; text-align:center">Y Y Y Y Y Y Y Y Y Y</table> 11 / 02 / 2020	
Mailing Address 1956 LONGWOOD DR			Amount <table border="1" style="display:inline-table; width:150px; height:20px; text-align:right">125.00</table>	
City BATON ROUGE	State LA	Zip Code 70808	Transaction ID : SE.33856	
Purpose of Expenditure DIGITAL ADS		Category/ Type	Date of Disbursement or Obligation <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">M M M</table> / <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">D D D</table> / <table border="1" style="display:inline-table; width:80px; height:20px; text-align:center">Y Y Y Y Y Y Y Y Y Y</table> 11 / 02 / 2020	
Name of Federal Candidate MITSCH BUSH, DIANE MS., , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CO</u>	
Calendar Year-To-Date Per Election for Office Sought		<table border="1" style="display:inline-table; width:150px; height:20px; text-align:right">10250.00</table>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<table border="1" style="display:inline-table; width:150px; height:20px; text-align:right">250.00</table>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<table border="1" style="display:inline-table; width:150px; height:20px; text-align:right"></table>
(c) TOTAL Independent Expenditures.....▶	<table border="1" style="display:inline-table; width:150px; height:20px; text-align:right"></table>

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.

OZANUS, WILLIAM, K, ,

[Electronically Filed]

Date

 /

 /

11 / 03 / 2020

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) C3 PAC		FEC IDENTIFICATION NUMBER ▼ C C00680314											
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y					
M M M	/	D D D	/	Y Y Y Y Y Y									

Full Name of Payee OLYMPIC MEDIA LLC		Date of Public Distribution/Dissemination <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>02</td> <td></td> <td>2020</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	11		02		2020
M M M	/	D D D	/	Y Y Y Y Y Y									
11		02		2020									
Mailing Address 2402 POTOMAC AVE UNIT 102		Amount <table border="1"> <tr> <td colspan="5">56.00</td> </tr> </table>		56.00									
56.00													
City ALEXANDRIA	State VA	Zip Code 22301	Transaction ID : SE.34060										
Purpose of Expenditure WEB ADS		Category/ Type	Date of Disbursement or Obligation <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>02</td> <td></td> <td>2020</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	11		02		2020
M M M	/	D D D	/	Y Y Y Y Y Y									
11		02		2020									
Name of Federal Candidate BIDEN, JOE R, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State:										
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶											

Full Name of Payee OLYMPIC MEDIA LLC		Date of Public Distribution/Dissemination <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>02</td> <td></td> <td>2020</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	11		02		2020
M M M	/	D D D	/	Y Y Y Y Y Y									
11		02		2020									
Mailing Address 2402 POTOMAC AVE UNIT 102		Amount <table border="1"> <tr> <td colspan="5">31.20</td> </tr> </table>		31.20									
31.20													
City ALEXANDRIA	State VA	Zip Code 22301	Transaction ID : SE.34061										
Purpose of Expenditure WEB ADS		Category/ Type	Date of Disbursement or Obligation <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>02</td> <td></td> <td>2020</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	11		02		2020
M M M	/	D D D	/	Y Y Y Y Y Y									
11		02		2020									
Name of Federal Candidate OMAR, ILHAN, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MN										
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶											

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<table border="1"> <tr> <td colspan="5">87.20</td> </tr> </table>	87.20				
87.20						
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<table border="1"> <tr> <td colspan="5"></td> </tr> </table>					
(c) TOTAL Independent Expenditures.....▶	<table border="1"> <tr> <td colspan="5"></td> </tr> </table>					

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.

OZANUS, WILLIAM, K, ,

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Date

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2020

Signature

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PAGE	3	OF	3
FOR SE OF FORM 24/48			

NAME OF COMMITTEE (In Full) C3 PAC		FEC IDENTIFICATION NUMBER ▼ C C00680314	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee PERSUASION PERFECTED		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2020	
Mailing Address 600 F ST NW 5TH FLOOR		Amount 5000.00	
City WASHINGTON	State DC	Zip Code 20004	Transaction ID : SE.33854
Purpose of Expenditure DIGITAL ADS	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 11 / 02 / 2020	
Name of Federal Candidate MOWERS, MATT, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought 5000.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure	Category/Type		
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	5000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....▶	5337.20

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OZANUS, WILLIAM, K, ,

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