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FEDERAL ELECTION COMMISSION JUN 27 AM 7: 53

June 3, 2016

JOHN EVAN WADE II 1225 SECOND STREET NEW ORLEANS, LA 70130

**IDENTIFICATION NUMBER: C90010588** 

Response Due Date 07/08/2016

REFERENCE: APRIL QUARTERLY REPORT (01/01/2016 - 03/31/2016)

Dear Filer:

This letter is prompted by the Commission's preliminary review of the Report of Independent Expenditures Made and Contributions Received (FEC Form 5) referenced above. This notice requests information essential to full public disclosure of your federal election campaign finances. An adequate response must be received at the Commission by the response date noted above. Additional information is needed for the following 1 item(s):

- On Schedule 5-E of this report, you have not itemized all of the necessary independent expenditure information. Proper disclosure requires the full name and address of the payee, the date, amount, the aggregate calendar-year-to-date total, the purpose, the election, and the name, office sought, state, and district of the federal candidate supported or opposed by the expenditure. Please amend your report to include the state. (11 CFR § 109.10(e)(1)

Please note, you will not receive an additional notice from the Commission on this matter. Requests for extensions of time in which to respond will not be considered. Failure to comply with the provisions of the Act may result in an enforcement action against the committee. Any response submitted by your committee will be placed on the public record and will be considered by the Commission prior to taking enforcement action.

If you should have any questions regarding this matter or wish to verify the adequacy of your response, please contact me on our toll-free number (800) 424-9530 (at the prompt press 5 to reach the Reports Analysis Division) or my local number (202) 694-1151.

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WADE, JOHN EVAN II

Page 2 of 2

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2016 JUN 27 AM 7: 53

Sincerely,

Ryan Furman

Ryan Furman Senior Campaign Finance Analyst Reports Analysis Division

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### FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRI To Be Used by Persons (Other than Political Committees)	
(a) Name of Individual, Organization or Corporation	T FECHMAIL BENTER
JOHN E. WADE II	2016 JUN 27 AM 7: 53
	4
(b) Address (number and street)	
1225 SECOND STREET	
(c) City, State and ZIP Code	
NEW ORLEANS, LA 70130	FEC Identification Number
2. Occupation and Name of Employer (for Individual Filers Only)	<b>C</b>
2 AKTAUR	
4. TYPE OF REPORT (check appropriate boxes):	
(a) April 15 Quarterly Report	•
4. TYPE OF REPORT (check appropriate boxes):  (a) April 15 Quarterly Report  Judy 15 Quarterly Report  October 15 Quarterly Report  January 31 Year-End Report	
October 15 Quarterly Report 48-Hour Report	
7 Contact to Catalog Nephrit 340-Hulli Report	
January 31 Year-End Report	
b) is this Report an amendment? ( No Yes, it amends the report filed on	a v z post k ž v v. L
5. COVERING PERIOD: FROM 01 01 2016	
THROUGH 03 31 2016	,
6. TOTAL CONTRIBUTIONS	$(x_1,x_2,\dots,x_{n-1}) = (x_1,x_2,\dots,x_{n-1})$
7. TOTAL INDEPENDENT EXPENDITURES	189975
	1 1/1 1 7 1 1 T
Under penelty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation of any cardidate or authorized committee or agent of either, or any political party committee or its agent.	on, or concert with, or at the request or
TYPE OR PRINT NAME OF PERSON COMPLETING FORM	DATE
	r of the
JOHN E. WADE IL SMILLION	4/11/16
NOTE: Submission of telse, enuneous or incomplete information may adoject the person signing this report to	the penalties of 52 U.S.C. §30109.

For further Information, contact: Federal Election Commission, 999 E Street, N.W., Washington, O.C. 20463 Toll Free 680-424-9530, Local 202-694-1100

### PAGE **SCHEDULE 5-E** OF FOR LINE 7 OF FORM 5 TEMIZED INDEPENDENT EXPENDITURES NAME OF FILER (In Full) JOHN E. WADE I Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination NEWBERRY MEDIA CORPORATION 30 Mailing Address 1602 W. LISBURN ROAD Zip Code 1957.50 PA 17055 MECHANICSBURG Category/ Type 0 0 1 Purpose of Expenditure Office Sought House BLOGS, SOCIALMEDIA, WEBSITE Senate > President Name of Federal Candidate Supported or Opposed by Expenditure: JOHN KASICH Support > Check One: Oppose Disbursement For. Primary General Calendar Year-To-Date Per Election 1957,50 Other (specify) for Office Sought Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination NEWBERRY MEDIA CORPORATION 01 16 2016 Mailing Address W. LISBURN ROAD 1602 **Amount** City Zip Code 182250 17085 MECHANICS BURG PA Purpose of Expenditure Category/ Office Sought House 001 Type BLOGS, SOCIAL MEDIA, WEBSITE Senate District: X President Name of Federal Candidate Supported or Opposed by Expenditure: KASICH JOHN Check One: X Support Oppose Disbursement For: Rimary Calendar Year-To-Date Per Election 3.780.00 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee NEWBERRY | MEDIA CORPORATION 03 08 2016 Mailing Address W. LISBURN ROAD State 7in Amount City 4.119.75 MECHANICSBURG PA 17055 Category/ Type 00 1, Purpose of Expenditure Office Sought: House BLOGS, SOCIAL MEDIA, WEBSITE Senate District Name of Federal Candidate Supported or Opposed by Expenditure: X President N Support Check One: JO HN Oppose Disbursement For: Primary Calendar Year-To-Date Per Election 7899.75 for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditure 1899,75 (b) SUBTOTAL of Uniterrized Independent Expenditures 7.8 99,75

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## **Federal Election Commission** ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt Hand Delivered Postmarked Date of Receipt USPS First Class Mail **USPS** Registered/Certified Postmarked **USPS Priority Mail** Postmarked **USPS Priority Mail Express** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery** Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):