

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

 PAGE 1 OF 1
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		FEC IDENTIFICATION NUMBER ▼ C C00530766	
Check if ☐ 24-hour report ☒ 48-hour report		☒ New report ☐ Amends report filed on <table border="1" style="display:inline-table; margin:0 5px;">M M M</table> / <table border="1" style="display:inline-table; margin:0 5px;">D D D</table> / <table border="1" style="display:inline-table; margin:0 5px;">Y Y Y Y Y Y Y Y</table>	

Full Name of Payee American Marketing & Publishing		Date of Public Distribution/Dissemination <table border="1" style="display:inline-table; margin:0 5px;">08</table> / <table border="1" style="display:inline-table; margin:0 5px;">17</table> / <table border="1" style="display:inline-table; margin:0 5px;">2016</table>	
Mailing Address 7380 Sprout Springs Rd Ste 210-248		Amount <table border="1" style="display:inline-table; margin:0 5px;">4475.75</table>	
City Flowery Branch	State GA	Zip Code 30542	Transaction ID : SE.6206
Purpose of Expenditure Door Hangers	Category/ Type	<table border="1" style="display:inline-table; margin:0 5px;">006</table>	Date of Disbursement or Obligation <table border="1" style="display:inline-table; margin:0 5px;">08</table> / <table border="1" style="display:inline-table; margin:0 5px;">17</table> / <table border="1" style="display:inline-table; margin:0 5px;">2016</table>
Name of Federal Candidate HILLARY RODHAM CLINTON		☐ Support ☒ Oppose	Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought		<table border="1" style="display:inline-table; margin:0 5px;">77283.63</table>	Disbursement For: ☐ Primary ☒ General 2016 ☐ Other (specify) ▶ _____

Full Name of Payee		Date of Public Distribution/Dissemination <table border="1" style="display:inline-table; margin:0 5px;"></table> / <table border="1" style="display:inline-table; margin:0 5px;"></table> / <table border="1" style="display:inline-table; margin:0 5px;"></table>	
Mailing Address		Amount <table border="1" style="display:inline-table; margin:0 5px;"></table>	
City	State	Zip Code	Date of Disbursement or Obligation <table border="1" style="display:inline-table; margin:0 5px;"></table> / <table border="1" style="display:inline-table; margin:0 5px;"></table> / <table border="1" style="display:inline-table; margin:0 5px;"></table>
Purpose of Expenditure	Category/ Type	<table border="1" style="display:inline-table; margin:0 5px;"></table>	
Name of Federal Candidate		☐ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		<table border="1" style="display:inline-table; margin:0 5px;"></table>	Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<table border="1" style="display:inline-table; margin:0 5px;">4475.75</table>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<table border="1" style="display:inline-table; margin:0 5px;"></table>
(c) TOTAL Independent Expenditures.....▶	<table border="1" style="display:inline-table; margin:0 5px;">4475.75</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.

Emily Buchanan

[Electronically Filed]

Date

 /

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Signature