06/18/2017 00 : 25

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## FEC FORM 5

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

(a) Name of Individual, Organization or Corporation								
POWERPAC.ORG								
(b) Address (number and street) check if different than previously reported 44 MONTGOMERY ST SUITE 2310	d							
(c) City, State and ZIP Code	3. FEC Identification Number							
SAN FRANCISCO CA	94104							
2. Occupation and Name of Employer (for Individual Filers Only)	C C90009853							
5. COVERING PERIOD: FROM 06 / 16 / Y Y								
TOTAL CONTRIBUTIONS      TOTAL INDEPENDENT EXPENDITURES								
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 any political party committee or its agent.								
	NATURE DATE [Electronically Filed]							
Le, Lisa, , ,	Lisa, , , 06/17/2017							
NOTE: Submission of false, erroneous or incomplete information may subject the	person signing this report to the penalties of 2 U.S.C. §437g.							

## SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 2 OF 2 FOR LINE 7 OF FORM 5

AME OF FILER (In Full) POWERPAC.ORG								
Full Name (Last, First, Middle Initial) of Payee					Sata of Du	Lia Distribution	/Diagomination	
Facebook Ads				Date of Pu	blic Distribution	Dissemination		
Mailing Address 1 Hacker Way				06	16	2017		
1 Hacker Way				A	Amount			
City	State	Zip Code					2000.00	
Menlo Park	CA	94025		_   I	Transacti	on ID : F57.000	001	
Purpose of Expenditure Estimated facebook ads & production costs		Category/ Type	004	Office	Sought:	<b>X</b> House Senate	State: GA  District: 06	
Name of Federal Candidate Supported or Opposed by Expenditure: Ossoff, Jonathan, , ,			Check	President  Check One:  Support  Oppose				
Calendar Year-To-Date Per Election for Office Sought Disc					sbursement For: Primary General 2017  Cother (specify) Runoff			
Full Name (Last, First, Middle Initial) of Payee				[	Date of Pu	blic Distribution	/Dissemination	
				M M / D D / Y Y Y Y Y				
Mailing Address				4	Amount			
City	State	Zip Code				, , , , , , , , , , , , , , , , , , ,		
Purpose of Expenditure		Category/ Type		Office	Sought:	House Senate	State:	
Name of Federal Candidate Supported or Opposed by Expenditure:		Check	One:	President Support	District:			
Calendar Year-To-Date Per Election for Office Sought			Disburs	Disbursement For: Primary General Other (specify)				
Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination						
Mailing Address				M = M / D = D / Y = Y = Y				
Walling Address				Amount				
City	State	Zip Code				· · · · ·		
Purpose of Expenditure		Category/ Type		Office	Sought:	House Senate	State:	
Name of Federal Candidate Supported or Opposed by Expenditure:				President	District:			
		Check	One:	Support	Oppose			
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: Primary General Other (specify)					
(a) SUBTOTAL of Itemized Independent Expendi	itures			>	•		2000.00	
(b) SUBTOTAL of Unitermized Independent Expe	nditures							
				-				
(c) TOTAL Independent Expenditures(carry total from last page forward to Lii				▶	,		2000.00	