24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
For Our Future	
	C C00620971
Check if 24-hour report 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
Image Plus Graphics, Inc.	09 21 2016
Mailing Address 1440 NE 131st St	Amount
	500.00
City State Zip Code North Miami FL 33161-4424	582.08 Transaction ID : VSG8M9T0HS4
7.0.1.1.1.0.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	Date of Disbursement or Obligation
Purpose of Expenditure Printing - Placards Category/ Type 004	09 / 22 / Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District:
DONALD J. TRUMP	
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	ursement For: Primary X General
	Other (specify) -
Full Name of Payee Image Plus Graphics, Inc.	Date of Public Distribution/Dissemination
Mailing Address 1440 NE 131st St	09 22 2016
THO NE TOTAL OF	Amount
City State Zip Code	10700.00
North Miami FL 33161-4424	Transaction ID: VSG8M9T0HT2 Date of Disbursement or Obligation
Purpose of Expenditure Printing - Hand Fans Category/ Type 004	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District:
HILLARY RODHAM CLINTON Oppose	President Senate State:
D. L.	ursement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought 1642615.23 Disbt 2016	
(a) SUBTOTAL of Itemized Independent Expenditures	11282.08
(a) col 10 11 of 10 1	11202.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	11282.08
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	• • • • • • • • • • • • • • • • • • • •
24.0)9 / 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	