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

Schedule E)		PAGE 1 OF 2 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		
Full Name of Payee Toskr, Inc		Date of Public Distribution/Dissemination
		08 10 7 2022
Mailing Address 1330 Broadway FI 3		Amount
	Zip Code	4000.00
Oakland CA	94612-2503	Transaction ID : VSG8MA2XNA0 Date of Disbursement or Obligation
Purpose of Expenditure Digital Communications (Estimate)	Category/ Type	Mam / Dad / Yayayay
Name of Federal Candidate	✗ Support C	Office Sought: House District: 00
BARNES, MANDELA, , ,	Oppose	President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary
Full Name of Payee		Date of Public Distribution/Dissemination
For Our Future Action Fund		08 11 2022
Mailing Address PO Box 34390		Amount
City State	Zip Code	30000.00
Washington DC	20043-4390	Transaction ID : VSG8MA2XN92 Date of Disbursement or Obligation
Purpose of Expenditure Canvassing Services (Estimate)	Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate	X Support C	Office Sought: House District: 00
FETTERMAN, JOHN KARL, , ,	Oppose	President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary General 2022 Other (specify)
_		
(a) SUBTOTAL of Itemized Independent Expenditures)	34000.00
(b) SUBTOTAL of Unitemized Independent Expenditures)	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.		
	cally Filed] Date	08 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	'	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 2 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
For Our Future	C C00620971	
Check if 24-hour report		
Full Name of Payee	Date of Public Distribution/Dissemination	
Facebook	08 10 2022	
Mailing Address 1 Hacker Way	Amount	
City State Zip Code	5375.00	
Menlo Park CA 94025-1456	Transaction ID : VSG8MA2XN84 Date of Disbursement or Obligation	
Purpose of Expenditure Digital Advertising (Estimate) Category/ Type	M = M / D = D / Y = Y = Y	
Name of Federal Candidate Support Office	e Sought: House District: 00	
BARNES, MANDELA, , , Oppose	President Senate State: WI	
Calendar Year-To-Date Per Election for Office Sought Disbu	ursement For: Primary General Other (specify) ▶	
Full Name of Payee	Date of Public Distribution/Dissemination	
Ma Tana Addison	M = M / D = D / Y = Y = Y	
Mailing Address	Amount	
City State Zip Code		
	Date of Disbursement or Obligation	
Purpose of Expenditure Category/ Type	M = M / D = D / Y = Y = Y	
Name of Federal Candidate Support Office	e Sought: House District:	
Oppose	President Senate State:	
Calendar Year-To-Date Per Election for Office Sought	ursement For: Primary General	
	Other (specify) -	
(a) SUBTOTAL of Itemized Independent Expenditures	5375.00	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	39375.00	
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.		
[Electronically Filed] Date	08	
Signature		