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

chedule E)	PAGE 1 OF 4 FOR SE OF FORM 24/48			
AME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
Reform America Fund				
	C C00581934			
neck if 24-hour report 48-hour report New report Amends report filed	on M M / D D / Y H Y H Y			
Full Name of Payee	Date of Public Distribution/Dissemination			
Nonbox	11 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 5307 S 92nd St	Amount			
City State Zip Code	303.30			
Hales Corners WI 53130-1677	Transaction ID : EEE483052A8534D15831 Date of Disbursement or Obligation			
Purpose of Expenditure Media Shipping & Handling Category/ Type	11 01 / 2016			
Name of Federal Candidate Support Office	e Sought: House District:			
Feingold, Russ, , ,	President Senate State: WI			
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	ursement For: Primary General Other (specify) ▶			
Full Name of Payee	Date of Public Distribution/Dissemination			
Nonbox	M M / D D / Y Y Y Y Y 1 Y 1 1 01 2016			
Mailing Address 5307 S 92nd St	Amount			
City State Zip Code	50000.00			
Hales Corners WI 53130-1677	Transaction ID : E6363E0D5F4104CAC94B Date of Disbursement or Obligation			
Purpose of Expenditure Media Buy Category/ Type	11 01 2016			
Name of Federal Candidate Support Office	e Sought: House District:			
Feingold, Russ, , ,	President Senate State: WI			
Calendar Year-To-Date Per Election for Office Sought Disbut	ursement For: Primary General Other (specify)			
(a) SUBTOTAL of Itemized Independent Expenditures	50303.30			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL below a deat Emerglithms				
(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.				
24.0	1 02 2016			
Signature				

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)		DITOTILO		PAGE 2 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC	DIDENTIFICATION NUMBER ▼
Reform America Fund			С	C00581934
Check if 24-hour report 48-hour report	X New re	eport Amends repo	ort filed on	/ D D / Y D Y D Y
Full Name of Payee			Date of Pu	ublic Distribution/Dissemination
Nonbox			11	/ 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 5307 S 92nd St			Amount	
City	State	Zip Code		37500.00
Hales Corners	WI	53130-1677		on ID: E50191C4D55E94039954 sbursement or Obligation
Purpose of Expenditure Media Buy		Category/ Type	11	01 2016
Name of Federal Candidate		Support	Office Sought:	House District: 00
Clinton, Hillary Rodham, , ,		X Oppose	✗ President	Senate State:
Calendar Year-To-Date Per Election for Office Sought		4113450.69	Disbursement For 2016 Other	r: Primary x General (specify) ▶
Full Name of Payee	_		Date of Po	ublic Distribution/Dissemination
Nonbox			M - M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 5307 S 92nd St			Amount	
City	State	Zip Code		50000.00
Hales Corners	WI	53130-1677		n ID : EE2B16C68F1154F769D6 isbursement or Obligation
Purpose of Expenditure Media Buy		Category/ Type	11 11	01 2016
Name of Federal Candidate		Support	Office Sought:	House District:00
Clinton, Hillary Rodham, , ,		x Oppose	X President	Senate State:
Calendar Year-To-Date Per Election for Office Sought		4113450.69	Disbursement Fo 2016 Other	r: Primary ✗ General (specify) ▶
(a) SUBTOTAL of Itemized Independent Expend	itures			87500.00
(b) SUBTOTAL of Unitemized Independent Expe	andituros			7 7 7 7
(b) SOBTOTAL OF Officeringed independent Expe	maitares		•	7 7 7
(c) TOTAL Independent Expenditures			•	7
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.				
Pickens, Lorri, , ,	[Electr	onically Filed] Date		2016

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

ooneddie E)	FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
Reform America Fund	C C00581934			
Check if 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y			
	ate of Public Distribution/Dissemination			
Nonbox	11 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 5307 S 92nd St	mount			
City State Zip Code	303.31			
Hales Corners WI 53130-1677 Tr	ransaction ID : EA77B93CE9E9C4895854 ate of Disbursement or Obligation			
Purpose of Expenditure Media Shipping & Handling Category/ Type	11 01 2016			
Name of Federal Candidate Support Office So	ought: House District: 00			
Clinton, Hillary Rodham, , ,	esident Senate State:			
Calendar Year-To-Date Per Election for Office Sought Disburser 2016	ment For:			
Full Name of Payee Nonbox	ate of Public Distribution/Dissemination			
Mailing Address 5307 S 92nd St	11 01 2016 mount			
City State Zip Code	37500.00			
	ansaction ID : E4A4F302E0E5F48C9B26 ate of Disbursement or Obligation			
Purpose of Expenditure Media Buy Category/ Type	11 01 2016			
Name of Federal Candidate Support Office Sc	ought: House District:			
Feingold, Russ, , ,	esident Senate State: WI			
Calendar Year-To-Date Per Election for Office Sought Disburses 2016	ment For: Primary			
(a) SUBTOTAL of Itemized Independent Expenditures	37803.31			
(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.				
Pickens, Lorri, , , [Electronically Filed] Date 11	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Signature				

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OF

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	LIVI EXI EIVI	DITORILO		PAGE 4 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC	IDENTIFICATION NUMBER ▼
Reform America Fund			С	C00581934
Check if 24-hour report 48-hour report	X New re	eport Amends repo	ort filed on	/ D = D / Y = Y = Y
Full Name of Payee			Date of Pub	lic Distribution/Dissemination
Nonbox			11	02 / 2016
Mailing Address 5307 S 92nd St			Amount	
City	State	Zip Code		32790.12
Hales Corners	WI	53130-1677		ID: ECFA57CE61FF24CFD8FA pursement or Obligation
Purpose of Expenditure Media Buy		Category/ Type	M 11	01 / 2016
Name of Federal Candidate		Support	Office Sought:	House District:
Feingold, Russ, , ,		X Oppose	President	Senate State: WI
Calendar Year-To-Date Per Election for Office Sought		3123970.98	Disbursement For: 2016 Other (s	Primary X General specify) ▶
Full Name of Payee			Date of Pub	lic Distribution/Dissemination
Nonbox			11	02 / 2016
Mailing Address 5307 S 92nd St			Amount	
City	State	Zip Code		32790.12
Hales Corners	WI	53130-1677		ID: EFB23A31AAB274FD2879 pursement or Obligation
Purpose of Expenditure Media Buy		Category/ Type	11 M	01 / 2016
Name of Federal Candidate		Support	Office Sought:	House District: 00
Clinton, Hillary Rodham, , ,		X Oppose	X President	Senate State:
Calendar Year-To-Date Per Election for Office Sought		4146240.81	Disbursement For: 2016 Other (s	Primary X General specify) ▶
(a) SUBTOTAL of Itemized Independent Expend	itures			65580.24
(1) OUD-0-11 (11)	150			4
(b) SUBTOTAL of Unitemized Independent Expe	nditures		·· •	
(c) TOTAL Independent Expenditures			. •	241186.85
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.				
Pickens, Lorri, , ,	[Electro	onically Filed] Date	e 11 02	2016
3.ga.a. 5				