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

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Stars and Stripes Forever PAC	
	C C00635243
Check if 24-hour report 48-hour report New report Amends report	filed on fil
Full Name of Payee	Date of Public Distribution/Dissemination
CP Direct	M M / D D / Y Y Y Y
[MEMO ITEM] Mailing Address 4600A Boston Way	11292017
4000A BOSION Way	Amount
City State Zip Code	5030.22
Lanham MD 20706-4858	Transaction ID : E2284B66402494E7C816
	Date of Disbursement or Obligation
Purpose of Expenditure Direct Mail Printing Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support	Office Sought: House District: 43
Waters, Maxine, , ,	President Senate State: CA
Odichadi Todi To Bato	Disbursement For: Primary 🗶 General
Per Election for Office Sought 46927.83	Other (specify)
Full Name of Payee	Date of Public Distribution/Dissemination
ZIP Mailing Services, Inc.	M M / D D / Y Y Y Y Y
[MEMO ITEM] Mailing Address 6304 Sheriff Rd. Ste Z	11292017
Soo I Shoilli Ital Sto 2	Amount
City State Zip Code	2703.03
Landover MD 20785	Transaction ID : E6A4ADEBBC38A4761AD
Purpose of Expenditure	Date of Disbursement or Obligation
Direct Mail Printing Category/ Type	
Name of Federal Candidate Support	Office Sought: X House District: 43
Waters, Maxine, , ,	
	President Senate State.
	Disbursement For: Primary Seneral 2018
	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	
(a) SUBTUTAL OF RETRIZED INDEPENDENT EXPENDITURES	0
(b) SUBTOTAL of Unitemized Independent Expenditures	
(2) 002 10 112 01 011011200 1110000112011 214011111100 1111111111	-99
(c) TOTAL Independent Expenditures	
	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were no with, or at the request or suggestion of, any candidate or authorized committee or agent of or	
party committee) any political party committee or its agent.	
Sattorfield David	
Satterfield, David, , , [Electronically Filed] Date	12 01 2017
Signature	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 3 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Stars and Stripes Forever PAC	C C00635243	
Check if 24-hour report 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y	
Full Name of Payee	Date of Public Distribution/Dissemination	
Omega List Company x	11 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 1420 Spring Hill Road	Amount	
Suite 490		
City State Zip Code	4645.05	
McLean VA 22102	Transaction ID : ED68F1BCD8EA54800BE4 Date of Disbursement or Obligation	
Purpose of Expenditure Direct Mail List Rental Category/ Type	M = M / D = D / Y = Y = Y	
Name of Federal Candidate Support Office	e Sought: X House District: 43	
Waters, Maxine, , ,	President Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought Disbut 2018	rrsement For: Primary General Other (specify) ▶	
Full Name of Payee	Date of Public Distribution/Dissemination	
Action Mailers x	11 29 2017	
Mailing Address 90 Commerce Drive	29 2017	
30 33	Amount	
City State Zip Code	4151.87	
Aston PA 19014-3201	Transaction ID : ED8C534A7B44348A98F5 Date of Disbursement or Obligation	
Purpose of Expenditure Direct Mail Printing Category/ Type	M = M / D = D / Y = Y = Y	
Name of Federal Candidate Support Office	e Sought: 🗶 House District:43	
Waters, Maxine, , ,	President Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought Disbut 2018	ursement For: Primary General Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	0.00	
(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.		
Satterfield, David, , , [Electronically Filed] Date	2 01 2017	

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

	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Stars and Stripes Forever PAC	C C00635243
Check if 24-hour report 48-hour report New report Amends rep	port filed on
Full Name of Payee	Date of Public Distribution/Dissemination
Eberle Communications Group x	11 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1420 Spring Hill Road Suite 490	Amount
City State Zip Code	1360.02
McLean VA 22102-3028	Transaction ID : EBAD37E46EA784144992 Date of Disbursement or Obligation
Purpose of Expenditure Direct Mail Data Center Category/ Type	M M / D D / Y Y Y Y
Name of Federal Candidate Support	Office Sought:
Waters, Maxine, , ,	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 46927.83	Disbursement For: Primary ✓ General 2018 Other (specify) ✓
Full Name of Payee	·
Campaign Funding Direct	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1420 Spring Hill Road, Suite 490	Amount
	5007.51
City State Zip Code McLean VA 22102-3028	5207.51 Transaction ID : ED5E450DC7434483DA8B
Purpose of Evpanditure	Date of Disbursement or Obligation
Direct Mail Creative Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support	Office Sought: House District: 43
Waters, Maxine, , , Oppose	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 46927.83	Disbursement For: Primary General 2018 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	··· •
(c) TOTAL Independent Expenditures	7733.25
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent party committee) any political party committee or its agent.	
Satterfield, David, , , [Electronically Filed] Dat	te 12 01 2017
Signature	

PAGE

OF

3