

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

NAME OF COMMITTEE (In Full) 314 Action Fund
FEC IDENTIFICATION NUMBER C C00633248
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Ambrosino Muir Hansen Crouse
Mailing Address 500 Sansome St Ste 404
City San Francisco State CA Zip Code 94111-3218
Purpose of Expenditure Non-Contribution Account: Direct Mail
Name of Federal Candidate Roskam, Peter, , ,
Calendar Year-To-Date Per Election for Office Sought 92695.54

Date of Public Distribution/Dissemination 10 / 29 / 2018
Amount 31400.00
Transaction ID : VNV4W9YF8Q1
Date of Disbursement or Obligation 10 / 29 / 2018
Office Sought: [X] House District: 06
Disbursement For: [X] General 2018

Full Name of Payee Bergmann Zwerdling Direct
Mailing Address 1015 18Th St NW Ste 500
City Washington State DC Zip Code 20036-5213
Purpose of Expenditure Non-Contribution Account: Direct Mail
Name of Federal Candidate Roskam, Peter, , ,
Calendar Year-To-Date Per Election for Office Sought 92695.54

Date of Public Distribution/Dissemination 10 / 29 / 2018
Amount 29895.54
Transaction ID : VNV4W9YF8V2
Date of Disbursement or Obligation 10 / 29 / 2018
Office Sought: [X] House District: 06
Disbursement For: [X] General 2018

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 61295.54

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.

Morrow, Joshua, , , [Electronically Filed] Date 10 / 30 / 2018
Signature

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

NAME OF COMMITTEE (In Full) 314 Action Fund
FEC IDENTIFICATION NUMBER C C00633248
Check if [x] 24-hour report [] 48-hour report [x] New report [] Amends report filed on

Full Name of Payee Joe Trippi & Associates
Mailing Address 606A N Talbot St Ste 303
City Saint Michaels State MD Zip Code 21663-2110
Purpose of Expenditure Non-Contribution Account: Media Buy
Name of Federal Candidate Arrington, Katherine, Elizabeth, , [x] Support [] Oppose
Office Sought: [x] House District: 01 [] President [] Senate State: SC
Calendar Year-To-Date Per Election for Office Sought 333467.00
Disbursement For: [] Primary [x] General 2018 [] Other (specify)

Date of Public Distribution/Dissemination 10 / 29 / 2018
Amount 41512.40
Transaction ID : VNV4W9YF8W0
Date of Disbursement or Obligation 10 / 29 / 2018

Full Name of Payee Joe Trippi & Associates
Mailing Address 606A N Talbot St Ste 303
City Saint Michaels State MD Zip Code 21663-2110
Purpose of Expenditure Non-Contribution Account: Media Buy
Name of Federal Candidate Cunningham, Joe, , , [x] Support [] Oppose
Office Sought: [x] House District: 01 [] President [] Senate State: SC
Calendar Year-To-Date Per Election for Office Sought 333467.00
Disbursement For: [] Primary [x] General 2018 [] Other (specify)

Date of Public Distribution/Dissemination 10 / 29 / 2018
Amount 62268.60
Transaction ID : VNV4W9YF8X8
Date of Disbursement or Obligation 10 / 29 / 2018

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 103781.00, (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.

Morrow, Joshua, , , [Electronically Filed] Date 10 / 30 / 2018
Signature

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

NAME OF COMMITTEE (In Full) 314 Action Fund
FEC IDENTIFICATION NUMBER C C00633248
Check if [x] 24-hour report [] 48-hour report [x] New report [] Amends report filed on

Full Name of Payee Joe Trippi & Associates
Mailing Address 606A N Talbot St Ste 303
City Saint Michaels State MD Zip Code 21663-2110
Purpose of Expenditure Non-Contribution Account: Media Production Estimate
Category/Type

Date of Public Distribution/Dissemination 10 / 29 / 2018
Amount 5600.00
Transaction ID : VNV4W9YF8Y6
Date of Disbursement or Obligation

Name of Federal Candidate Cunningham, Joe, ,
[x] Support [] Oppose
Office Sought: [x] House [] President [] Senate
District: 01 State: SC
Calendar Year-To-Date Per Election for Office Sought 333467.00

Disbursement For: [] Primary [x] General 2018
[] Other (specify)

Full Name of Payee
Mailing Address
City State Zip Code
Purpose of Expenditure
Category/Type

Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation

Name of Federal Candidate
[] Support [] Oppose
Office Sought: [] House [] President [] Senate
District: State:
Calendar Year-To-Date Per Election for Office Sought

Disbursement For: [] Primary [] General
[] Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 0.00, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures 165076.54

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.

Morrow, Joshua, , [Electronically Filed] Date 10 / 30 / 2018
Signature