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

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Stand With America	C C00520981
Check if X 24-hour report 48-hour report New report Amends report filed	I on M M / D D / Y Y Y Y
Full Name of Payee McNally Temple & Associates, Inc.	Date of Public Distribution/Dissemination
Mailing Address 1817 Capitol Avenue	11 07 2016 Amount
City State Zip Code	8000.00
Sacramento CA 95811	Transaction ID : EDT.E.8 Date of Disbursement or Obligation
Purpose of Expenditure Category/ Type 24E	11 07 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Offic	e Sought: House District: 09
Halvorson, Arthur, , ,	President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought Disb 2016	ursement For: Primary General Other (specify)
Full Name of Payee	Date of Public Distribution/Dissemination
	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	8000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	8000.00
Under penalty of perjury I certify that the independent expenditures reported herein were not m 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.	•
Bato	11 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	