24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Valor Fund	
	C C00584755
Check if 24-hour report 48-hour report New report Amends report filed on	
Full Name of Payee	Date of Public Distribution/Dissemination
South Strategic Communications	08 12 2016
Mailing Address 931 Monroe Dr Ste 102 #318	Amount
City State Zip Code	21927.10
Atlanta GA 30308	Transaction ID : SE.4209 Date of Disbursement or Obligation
Purpose of Expenditure Printing Category/ Type 004	08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support C	Office Sought: House District: 18
BRIAN MAST Oppose	President Senate State:FL
	016 Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Mailing Address	_
Maining Address	Amount
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure Category/	M M / D D / Y Y Y Y
Type	·
Name of Federal Candidate Support	Office Sought: House District:
Oppose	President Senate State:
Calorida Tour to Bato	Disbursement For: Primary General
Per Election for Office Sought	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	21927.10
(b) SUBTOTAL of Unitemized Independent Expenditures	
	7 7
(c) TOTAL Independent Expenditures	21927.10
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.	
Adam Gillis [Electronically Filed] Date	08 12 2016
Signature	