

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

| | | |
|---|--|--|
| 1. (a) Name of Individual, Organization or Corporation TIDES ADVOCACY | | 3. FEC Identification Number C C90011750 |
| (b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1012 TORNEY AVE | | |
| (c) City, State and ZIP Code SAN FRANCISCO CA 94129 | | |
| 2. Occupation and Name of Employer (for Individual Filers Only) | | |

4. TYPE OF REPORT (check appropriate boxes):

- (a) April 15 Quarterly Report
- July 15 Quarterly Report 24-Hour Report
- October 15 Quarterly Report 48-Hour Report
- January 31 Year-End Report

b) Is this Report an amendment? No Yes, it amends the report filed on / /

5. COVERING PERIOD: FROM / /
THROUGH / /

6. TOTAL CONTRIBUTIONS..... 0.00

7. TOTAL INDEPENDENT EXPENDITURES 1128.75

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 any political party committee or its agent.

| | | |
|---|---------------------------|-------------|
| TYPE OR PRINT NAME OF PERSON COMPLETING FORM | SIGNATURE | DATE |
| Keton, Amanda, , , | <i>Keton, Amanda, , ,</i> | 10/19/2018 |

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F5N

Transaction ID :

CA 48 YTD not being calculated correctly in FECFile - not including expenses from the October Quarterly Report.
YTD actual total \$4,948.72.

Form/Schedule:

Transaction ID:

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
TIDES ADVOCACY

| | | | |
|---|-----------------------|--|---------------------------|
| Full Name (Last, First, Middle Initial) of Payee Craddolph, Aaron, , , | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 01 / 2018 | |
| Mailing Address 1048 Irvine Ave Apt 704 | | Amount 520.00 | |
| City Newport Beach | State CA | Zip Code 92660 | Transaction ID : F57.4351 |
| Purpose of Expenditure Organizing Consulting (10/1-11/6/18 estimate) | Category/ Type 001 | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: CA District: 48 |
| Name of Federal Candidate Supported or Opposed by Expenditure: ROUDA, HARLEY E JR, , , | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 520.00 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | | |
|---|-----------------------|--|---------------------------|
| Full Name (Last, First, Middle Initial) of Payee Vistaprint Netherlands BV | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2018 | |
| Mailing Address Hudsonweg 8 | | Amount 608.75 | |
| City Venlo Netherlands 5928LW | State ZZ | Zip Code | Transaction ID : F57.4352 |
| Purpose of Expenditure Printing | Category/ Type 006 | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: CA District: 48 |
| Name of Federal Candidate Supported or Opposed by Expenditure: ROUDA, HARLEY E JR, , , | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 1128.75 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | | |
|--|-------------------|---|---------------------------------|
| Full Name (Last, First, Middle Initial) of Payee | | Date of Public Distribution/Dissemination MM / DD / YYYY | |
| Mailing Address | | Amount | |
| City | State | Zip Code | |
| Purpose of Expenditure | Category/ Type | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: _____ District: _____ |
| Name of Federal Candidate Supported or Opposed by Expenditure: | | Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | |
|---|---------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... | 1128.75 |
| (b) SUBTOTAL of Unitemized Independent Expenditures | |
| (c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7) | 1128.75 |