## 11/04/2016 10 : 34

## Image# 201611049037119517 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

(Schedule E)	DRI OF INDEPENDENT	EAFENDI	IIUNES			PAGE 1 FOR SE OF F	OF 1 FORM 24/48		
NAME OF COMMITTEE (In Full) OCEAN MAJORITY PAC						FEC IDENTIFICATION NUMBER			
OCEAN MAJOR	ITY PAC				С	C00557355			
Check if 🗶 24-hour rep	port 48-hour report	X New repo	ort Amends rep	ort filed on	M = M /	D D /	Y Y Y Y		
Full Name of Payee Doyle Strategies Inc.					Date of Public Distribution/Dissemination				
Mailing Address 303	8 O'Brien Drive			A	11 mount	03	2016		
City	5		Zip Code				15000.00		
Tallahassee	Tallahassee FM						ction ID : SE.4190 Disbursement or Obligation		
Purpose of Expenditu Media	ire		Category/ Type		<sup>M</sup> 11	03	2016		
Name of Federal Car	ndidate		Support	Office S	ought:	<b>X</b> House D	istrict: 17		
HONDA, MIKE, , ,			Oppose		resident		State: CA		
Calendar Year-To Per Election for			26500.00	Disburse 2016	ement For:	Primary	<b>X</b> General		
Full Name of Payee						c Distribution/E	Dissemination		
Mailing Address									
				A	Amount				
City State Zip Code									
					Date of Disbursement or Obligation				
Purpose of Expenditu	ıre		Category/ Type	]			Y Y Y Y		
Name of Federal Car	ndidate		Support	Office S	ought:	House D	District:		
			Oppose		resident	Senate	State:		
Calendar Year-To	o-Date			Disburse	ement For:	Primary	General		
Per Election for Office Sought					Other (specify)				
(a) SUBTOTAL of Iter	mized Independent Expenditures			··· ►			15000.00		
	n i i i i i i i i i i i i i i i i i i i								
(b) SUBIDIAL OF UN	itemized Independent Expenditure	3S		►		-7-			
(c) TOTAL Independe	nt Expenditures			▶			15000.00		
with, or at the request	ary I certify that the independent or suggestion of, any candidate political party committee or its ag	or authorized							
Wilmot, D	vavid, , ,			M M	/ D D	/ Y Y			
Signature		[Electron	<i>ically Filed]</i> Dat	te 11	04	2016			