## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)  New American Jobs Fund	FEC IDENTIFICATION NUMBER ▼  C C00625533	
Check if 24-hour report 48-hour report New report Amends report filed on		
Full Name of Payee League Of Conservation Voters, Inc.	Date of Public Distribution/Dissemination  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 740 15Th St NW	Amount	
FI 7		
City State Zip Code Washington DC 20005-1019	33.99  Transaction ID: VVAG59W9JD3  Date of Disbursement or Obligation	
Purpose of Expenditure Staff Time for Press Release & Blog  Category/ Type  001	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Name of Federal Candidate Support	Office Sought: House District:	
ROSEN, JACKY, , , Oppose	President Senate State: NV	
Calcilaal Ical Ic Batc	Disbursement For: Primary   General  Other (specify)   Other (specify)   □	
Full Name of Payee League Of Conservation Voters, Inc.	Date of Public Distribution/Dissemination  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 740 15Th St NW	Assessed	
FI 7	Amount	
City State Zip Code	1458.36	
Washington DC 20005-1019  Purpose of Expenditure	Transaction ID: VVAG59WSRQ9  Date of Disbursement or Obligation	
i Touch Rental  Category/ Type  O04	08 / 31 / 2018	
Name of Federal Candidate Support	Office Sought: House District:	
ROSEN, JACKY, , ,	President Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought 775880.65	Disbursement For: Primary   General  Other (specify)   Other	
(a) SUBTOTAL of Itemized Independent Expenditures	1492.35	
(b) SUBTOTAL of Unitemized Independent Expenditures	<b>•</b>	
(c) TOTAL Independent Expenditures	<b>•</b>	
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.		
Collins, Patrick, , ,  [Electronically Filed] Date Signature	09 06 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
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## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 2 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
New American Jobs Fund	C C00625533	
Check if 24-hour report  48-hour report   New report   Amends report filed on		
Full Name of Payee Date	te of Public Distribution/Dissemination	
OTG Strategies	09 04 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	ount	
Ste 200	10700000	
City State Zip Code Charlotte NC 28216-0197 Tra	125003.00	
Date	Insaction ID: VVAG59WS4R4 te of Disbursement or Obligation	
Purpose of Expenditure Field Canvass Consulting  Category/ Type  004	M M / D D / Y Y Y Y Y	
Name of Federal Candidate  X Support Office Sou	ight: House District:	
ROSEN JACKY	sident State: NV	
Calendar Year-To-Date Per Election for Office Sought  Disbursem 2018	nent For:	
Full Name of Payee Dat	te of Public Distribution/Dissemination	
	M = M / D = D / Y = Y = Y	
Mailing Address Am	nount	
City State Zip Code		
Purpose of Expanditure	te of Disbursement or Obligation	
Category/ Type		
Name of Federal Candidate Support Office Sou	ught: House District:	
Oppose Pres	sident Senate State:	
Calendar Year-To-Date Per Election for Office Sought		
Per Liection for Office Sought	Other (specify) -	
(a) SUBTOTAL of Itemized Independent Expenditures	125003.00	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	126495.35	
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.		
Collins, Patrick, , ,  [Electronically Filed] Date 09	/ 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Signature		