24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	
CAPE FOX PROFESSIONAL LICENSE	FEC IDENTIFICATION NUMBER ▼
	C C00622266
Check if 24-hour report 48-hour report New report Amends report filed	I on Man / Dab / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Scotttrade	M M / D D / Y Y Y Y
X 24202374 Mailing Address 5154 Arden way	05 31 2016
3 3 3 3 3 4 Alueli way	Amount
City.	400.00
City State Zip Code	400.00 Transaction ID : WFT20166311048-1
Sacramento CA 95608	Date of Disbursement or Obligation
Purpose of Expenditure Stock Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	e Sought: House District:
Davis Marie Oppose	
Calcinati Teal to Bate	ursement For: Primary X General
Per Election for Office Sought	Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
	M M / D D / Y Y Y Y
Mailing Address	
	Amount
O't	
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure Category/	M = M / D = D / Y = Y = Y
Type	
Name of Federal Candidate Support Offic	e Sought: House District:
Oppose	
Galoridar Todi To Balo	ursement For: Primary General
Per Election for Office Sought	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
, and the second se	7 7 7
(c) TOTAL Independent Expenditures	0.00
	7
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.	, or the reporting entity is not a political
DAVIS MARIE	M / D D / Y Y Y Y
Signature [Electronically Filed] Date	07 31 2016
Olynatule	