Schedule E)		PAGE 1 OF 6 FOR SE OF FORM 24/48		
IAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼		
MISSOURI RISING ACTION		C C00652875		
check if 🗶 24-hour report 48-hour report	New report Amends report	filed on		
Full Name of Payee Columbia Daily Tribune		Date of Public Distribution/Dissemination		
Mailing Address 101 N. 4th Street		11 02 7 2018		
101 N. 4th Street		Amount		
City	ate Zip Code	2000.00		
Columbia	MO 65201	Transaction ID : SE.4393 Date of Disbursement or Obligation		
Purpose of Expenditure Print Ad Placement and Production	Category/ Type 004	11 02 Y Y 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:		
MCCASKILL, CLAIRE, , ,	X Oppose	President Senate State: MO		
Calendar Year-To-Date		Disbursement For: Primary 🗶 General		
Per Election for Office Sought	1110700.23	Other (specify) >		
Full Name of Payee FP1 Digital LLC		Date of Public Distribution/Dissemination		
Mailing Address 3001 Washington Blvd		11 02 2018		
Mailing Address 3001 Washington Blvd 7th Floor		Amount		
	tate Zip Code	84000.00		
'	VA 22201	Transaction ID : SE.4400 Date of Disbursement or Obligation		
Purpose of Expenditure Digital Ad Placement and Production	Category/ 004	M - M / D - D / Y - Y - Y		
	Type 504	11 02 2018		
Name of Federal Candidate	Support	Office Sought: House District:		
MCCASKILL, CLAIRE, , ,	X Oppose	President Senate State: MO		
Calendar Year-To-Date Per Election for Office Sought	1108788.25	Disbursement For: Primary General Other (specify) Other (specify) Other (specify) Other (specify) Other		
,	,	Other (specify) >		
(a) SUBTOTAL of Itemized Independent Expenditures		86000.00		
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures				
(b) FOTAL masportation Experiancies		7 7 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.				
Hayes, Deanna, , ,	[Electronically Eiled]	M M / D D / Y Y Y Y Y		
Signature	[Electronically Filed] Date	11 03 2018		

Schedule E)	LS	PAGE 2 OF 6 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	F	EC IDENTIFICATION NUMBER ▼
MISSOURI RISING ACTION		C C00652875
Check if 24-hour report 48-hour report New report	Amends report filed on	M / D = D / Y = Y = Y
Full Name of Payee Hannibal Courier News	M	
Mailing Address 200 N. 3rd Street	Amount	سنندا لنا ك
City State Zip Co		1500.00 ction ID : SE.4396
Purpose of Expenditure Print Ad Placement and Production Cate	gory/ O04	Disbursement or Obligation
Name of Federal Candidate	Type 004 1 Support Office Sought:	1 01 2018 House District:
MCCASKILL, CLAIRE, , ,	Oppose Presiden	t X Senate State: MO
Calendar Year-To-Date Per Election for Office Sought 10157	28.25 Disbursement 2018 Oth	For: Primary ★ General er (specify) ►
Full Name of Payee Joplin Globe	M	Public Distribution/Dissemination M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 117 East 4th Street	Amount	
City State Zip Co		1250.00 tion ID : SE.4391
Purpose of Expenditure Print Ad Placement and Production Cate	Date of	Disbursement or Obligation
Name of Federal Candidate	Support Office Sought:	House District:
MCCASKILL, CLAIRE, , ,	X Oppose Presiden	
Calendar Year-To-Date Per Election for Office Sought 9973	02.74 Disbursement 2018 Oth	For: Primary X General ner (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures	······	2750.00
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	······································	4 4
Under penalty of perjury I certify that the independent expenditures reported with, or at the request or suggestion of, any candidate or authorized community committee) any political party committee or its agent.		
Hayes, Deanna, , , [Electronically F	iled] Date 11	03 / 2018

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

Scł	hedule E)	TI GILLO		PAGE 3 OF 6 FOR SE OF FORM 24/48
	ME OF COMMITTEE (In Full)		F	EC IDENTIFICATION NUMBER ▼
MI	ISSOURI RISING ACTION			C C00652875
Che	eck if X 24-hour report 48-hour report X New report	port Amends repor	ort filed on	M / D D / Y Y Y Y Y
Т	Full Name of Payee		Date of	Public Distribution/Dissemination
	Joplin Globe		M 1	
	Mailing Address 117 East 4th Street		Amount	
ŀ	City State	Zip Code		175.00
	Joplin MO	64801		ction ID : SE.4392 Disbursement or Obligation
	Purpose of Expenditure Print Ad Placement and Productrion	Category/ Type 004	M 1	
	Name of Federal Candidate	Support	Office Sought:	House District:
	MCCASKILL, CLAIRE, , ,	X Oppose	President	
	Calendar Year-To-Date Per Election for Office Sought	997477.74	Disbursement F 2018 Othe	For: Primary X General er (specify) ▶
	Full Name of Payee National Sales Production		M	
-	Mailing Address 5321 Corporate Blvd			1 04 2018
	City State Baton Rouge LA	Zip Code 70808		32073.00 tion ID : SE.4401
-	Purpose of Expenditure Digital Ad Placement and Production	Category/ Type 004	Date of	
F	Name of Federal Candidate	Support	Office Sought:	House District:
	MCCASKILL, CLAIRE, , ,	X Oppose	Presiden	MO
	Calendar Year-To-Date Per Election for Office Sought	1164911.60	Disbursement I 2018 Oth	For: Primary X General er (specify) ►
(8	a) SUBTOTAL of Itemized Independent Expenditures		·	32248.00
(1	b) SUBTOTAL of Unitemized Independent Expenditures			7
,-	7 OOD TOTAL OF OTHER MEDICAL EXPONENTIAL CO.		•	4 4
(0	c) TOTAL Independent Expenditures		•	7
W	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized earty committee) any political party committee or its agent.			
		nically Filed] Date		03 2018
	Signature			

Schedule E)	1101120	PAGE 4 OF 6 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
MISSOURI RISING ACTION		C C00652875
Check if 24-hour report 48-hour report New	report Amends report file	ed on Man / Dad / Yayayay
Full Name of Payee SE Missourian		Date of Public Distribution/Dissemination
Mailing Address PO Box 699		11022018
		Amount
City State Cape Girardeau MO	Zip Code 63701	1750.00 Transaction ID : SE.4402
Purpose of Expenditure Print Adf Placement and Production	Category/ Type 004	Date of Disbursement or Obligation M M O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Offi	ce Sought: House District:
MCCASKILL, CLAIRE, , ,	X Oppose	President Senate State: MO
Calendar Year-To-Date Per Election for Office Sought	1132838.60 Dis 201	bursement For: Primary
Full Name of Payee Springfield News Leader		Date of Public Distribution/Dissemination
Mailing Address 651 Boonville Road		11 02 2018 Amount
City State	Zip Code	7750.51
Springfield MO	65086	Transaction ID : SE.4397 Date of Disbursement or Obligation
Purpose of Expenditure Print Ad Placement and Production	Category/ Type 004	11 / 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Off	ice Sought: House District:
MCCASKILL, CLAIRE, , ,	X Oppose	President Senate State: MO
Calendar Year-To-Date Per Election for Office Sought	1005228.25 Dis 20	bursement For: Primary General Other (specify) Other
(a) SUBTOTAL of Itemized Independent Expenditures		9500.51
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	·····	
Under penalty of perjury I certify that the independent expendit with, or at the request or suggestion of, any candidate or autho party committee) any political party committee or its agent.		
Hayes, Deanna, , , [Electrical Signature]	ctronically Filed] Date	11 03 / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y

Schedule E)	LINDLINI LAFLIND	TIONES		PAGE 5 OF 6 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC II	DENTIFICATION NUMBER ▼
MISSOURI RISING ACTION			C	C00652875
Check if 24-hour report 48-hour	report New rep	ort Amends repo	ort filed on	/ D = D / Y = Y = Y
Full Name of Payee			Date of Publi	c Distribution/Dissemination
St. Joseph News Press			11 11	02 / 2018
Mailing Address 825 Edmond Street			Amount	
City	State	Zip Code		9060.00
Saint Joseph	MO	64501	Transaction Date of Disb	
Purpose of Expenditure Print Ad Placement and Production		Category/ Type 004	M = M 11	01 2018
Name of Federal Candidate		Support	Office Sought:	House District:
MCCASKILL, CLAIRE, , ,		X Oppose		Senate State: MO
Calendar Year-To-Date Per Election for Office Sought		1024788.25	Disbursement For: 2018 Other (sp	Primary ✗ General pecify) ▶
Full Name of Payee	_		Date of Publ	ic Distribution/Dissemination
St. Louis Post Journal			11	02 / 2018
Mailing Address 900 N. Tucker Blvd			Amount	
City	State	Zip Code		20001.35
St Louis	МО	63101	Transaction I	D: SE.4403 ursement or Obligation
Purpose of Expenditure Print Ad Placement and Production		Category/ Type 004	11	02 2018
Name of Federal Candidate		Support	Office Sought:	House District:
MCCASKILL, CLAIRE, , ,		X Oppose	President	Senate State: MO
Calendar Year-To-Date Per Election for Office Sought		1131088.60	Disbursement For: 2018 Other (s	Primary ★ General pecify) ►
(a) SUBTOTAL of Itemized Independent	Expenditures			29061.35
(,			7	23001.00
(b) SUBTOTAL of Unitemized Independe	nt Expenditures		• •	49-11-20-1
(c) TOTAL Independent Expenditures			·	
Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party comm	any candidate or authorized			
Hayes, Deanna, , ,	[Electron	ically Filed] Date	11 / 03	2018
- 9				

Schedule E)	PAGE 6 OF 6 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full) FEC ID	ENTIFICATION NUMBER ▼
MISSOURI RISING ACTION C (C00652875
Check if 24-hour report 48-hour report New report Amends report filed on	D = D / Y = Y = Y
	: Distribution/Dissemination
The Examiner	04 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 410 S. Liberty Street Amount	
City State Zip Code	299.00
Independence MO 64050 Transaction II	
Purpose of Expenditure Print Ad Placement and Prodution Category/ Type 004 11	02 / 2018
Name of Federal Candidate Support Office Sought:	House District:
MCCASKILL, CLAIRE, , , President	Senate State: MO
Calendar Year-To-Date Per Election for Office Sought Disbursement For: 2018 Other (specific	Primary X General ecify) ▶
	Distribution/Dissemination
The Kansas Star	02 / 2018
Mailing Address 1601 McGee St Amount	
City State Zip Code	9000.00
Kansas City MO 64108 Transaction ID Date of Disbu	D: SE.4399 Irsement or Obligation
Purpose of Expenditure Print Ad Placement and Production Category/ Type 004	01 / 2018
Name of Federal Candidate Support Office Sought:	House District:
MCCASKILL CLAIRE	Senate State: MO
Calendar Year-To-Date Per Election for Office Sought Disbursement For: 2018 Other (sp.	Primary ✗ General ecify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	0000 00
(a) SOBTOTAL OF Remized independent Experialities	9299.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	168858.86
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperati with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the repoparty committee) any political party committee or its agent.	
Hayes, Deanna, , , [Electronically Filed] Date 11 03	2018