

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

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>INTERNATIONAL ASSOCIATION OF FIREFIGHTERS INTERESTED IN REGISTRATION AND EDUCATION PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00029447	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 01 / 28 / 2020</div> </div>	

Full Name of Payee <b>Tricom Associates</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 27 / 2020	
Mailing Address 1750 New York Avenue		Amount 30000.00	
City Washington	State DC	Zip Code 20006	Transaction ID : D42050
Purpose of Expenditure Estimated Cost: Digital Advertising		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 01 / 27 / 2020
Name of Federal Candidate BIDEN, JOSEPH R, , JR		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
		62160.40	

Full Name of Payee <b>Tricom Associates</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 27 / 2019	
Mailing Address 1750 New York Avenue		Amount 20000.00	
City Washington	State DC	Zip Code 20006	Transaction ID : D42051
Purpose of Expenditure Estimated Cost: Digital Advertising		Category/ Type 001	Date of Disbursement or Obligation MM / DD / YYYY 01 / 27 / 2020
Name of Federal Candidate BIDEN, JOSEPH R, , JR		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
		20000.00	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	50000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	50000.00

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.

Kelly, Edward, ,

[Electronically Filed]

Date

 MM / DD / YYYY  
01 / 31 / 2020

Signature