PAGE 1 / 13

FEC

REPORT OF RECEIPTS AND DISBURSEMENTS

FURIVI 3A	For (Other Than An	Authorized	d Commi	ttee		Office Us	e Only	
NAME OF COMMITTEE (in f		E OR PRINT ▼		mple: If ty r the lines.		12FE4M	15		
Brighter Future	Coalition								1
ADDRESS (number and		101 Excelsior Drive							
Check if diffe than previous	h.	ladison				, WI	. F2717		
reported. (AC							53717		
2. FEC IDENTIFICA	TION NUMBI	ER ▼	CITY 🛦			STATE A	;	ZIP CODE	A
C C00634907			3. IS THIS REPORT	×	NEW (N) OR	A (A	MENDED		
4. TYPE OF REP (Choose One)	ORT (i	b) Monthly Report Due On:	Feb 20 (M2) Mar 20 (M3)		May 20 (M5)		20 (M8) 20 (M9)	(No Ye	ov 20 (M11) on-Election ar Only) ec 20 (M12)
(a) Quarterly Rep	orts:	H	Apr 20 (M4)	H	Jul 20 (M7)		20 (M10)	Ye	on-Election ar Only) an 31 (YE)
April 15 Quarterly	Report (Q1)	(C) 12-Day	——————————————————————————————————————	Duine aut. (4)					
July 15 Quarterly	Report (Q2)	PRE-Electio		Primary (1:		General		L HI	unoff (12R)
October Quarterly	15 Report (Q3)	Report for t	ile.	Convention	1 (120)	Special	(125)		
January 3 Year-End	31 Report (YE)	E	Election on	M = M	/ D D /	Y Y Y Y Y]	in the State of	
Year Only	lon-election /) (MY)	(d) 30-Day POST-Elect Report for t		General (3	0G)	Runoff ((30R)	Sp	pecial (30S)
Termination (TER)	on Report	E	Election on	M = M	/ D D /	Y I Y II Y II Y]	in the State of	
5. Covering Period	01		017	through	06	30	201	7	
I certify that I have ex-			est of my kno	wledge and	d belief it is tru	ue, correct ar	nd complet	e.	
Type or Print Name of		ind, Kate, , ,							
Signature of Treasurer	Lind, Kate,	,,		[Electronica	ully Filed] [Date 07	M / D		2017
NOTE: Submission of fa	ulse, erroneous,	or incomplete infor	mation may su	ubject the p	erson signing t	his Report to	the penaltie	es of 52 U.	S.C. § 3010
Office Use								FORM ev. 05/2016	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name **Brighter Future Coalition** 01 2017 06 30 2017 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 0.00 January 1, 2017 (b) Cash on Hand at 0.00 Beginning of Reporting Period..... 55000.00 55000.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 55000.00 55000.00 6(a) and 6(c) for Column B)..... 53883.53 53883.53 7. Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 1116.47 1116.47 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)▶

DETAILED SUMMARY PAGE

of Receipts FEC Form 3X (Rev. 05/2016) Page 3 Write or Type Committee Name **Brighter Future Coalition** 01 01 2017 06 30 2017 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 25000.00 25000.00 (i) Itemized (use Schedule A)..... 0.00 0.00 (ii) Unitemized (iii) TOTAL (add 25000.00 25000.00 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 5000.00 5000.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 30000.00 30000.00 Totals to Line 33, page 5)▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 0.00 0.00 17. Other Federal Receipts 25000.00 (Dividends, Interest, etc.)..... 25000.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3)..... 0.00 0.00 (b) Levin Funds (from Schedule H5) (c) Total Transfers (add 18(a) and 18(b)).. 0.00 0.00 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))....... 55000.00 55000.00

55000.00

55000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
Operating Expenditure (a) Allocated Federa Activity (from Sol	/Non-Federal				
Activity (from Sch	re	0.00	0.00		
(i) Tederal Sila	C				
` '	Share	0.00	0.00		
(b) Other Federal Op Expenditures	perating	9558.29	9558.29		
(c) Total Operating E	Expenditures ii), and (b))	9558.29	9558.29		
. Transfers to Affiliated/					
Committees Contributions to		0.00	0.00		
Federal Candidates/C and Other Political Co	ommittees ommittees	0.00	0.00		
Independent Expendit		14005.04			
(use Schedule E) Coordinated Party Ex (52 U.S.C. § 30116(d)	oenditures))	44325.24	44325.24		
(use Schedule F)		0.00	0.00		
Loan Repayments Ma	de	0.00	0.00		
Loans Made Refunds of Contribution		0.00	0.00		
(a) Individuals/Person		0.00	0.00		
(b) Political Party Co	mmittees	0.00	0.00		
(c) Other Political Co		0.00	0.00		
(such as PACs)		0.00	0.00		
(d) Total Contribution					
(add Lines 28(a),	(b), and (c))	0.00	0.00		
Other Disbursements	,				
Non-Federal Donations	3)	0.00	0.00		
Federal Election Activ (a) Allocated Federa (from Schedule F	•				
		0.00	0.00		
(ii) "Levin" Share (b) Federal Election	Activity Paid	0.00	0.00		
Entirely With Fed	eral Funds	0.00	0.00		
(c) Total Federal Ele Lines 30(a)(i), 30	ction Activity (add (a)(ii) and 30(b))	0.00	0.00		
Total Disbursements (add Lines 21(c) 22				
23, 24, 25, 26, 27, 28	1 11	53883.53	53883.53		
Total Federal Disburs					
(subtract Line 21(a)(ii)					
from Line 31)	•	53883.53	53883.53		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

FEC FORM 3X (Rev. 05/2016)		Page 3
III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	30000.00	30000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	30000.00	30000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	9558.29	9558.29
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	9558.29	9558.29

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** (check only one) **X** 11a 11b 11c

13 6 OF Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) **Brighter Future Coalition** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Marcus, Bernard, , , Date of Receipt Mailing Address 1266 W Paces Ferry Rd NW #615 10 2017 City Zip Code State Transaction ID: SA11AI.4139 GA Atlanta 30327 Amount of Each Receipt this Period FEC ID number of contributing C 25000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Retired Retired Contribution Receipt For: Aggregate Year-to-Date ▼ Primary General 25000.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 25000.00 SUBTOTAL of Receipts This Page (optional)..... 25000.00 TOTAL This Period (last page this line number only).....

S 17

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 7 OF 13				
ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the	(check only one)				
"	LIMIZED RECEIF 13		Detailed Summary Page	11a 11b x 11c 12				
_				13 14 15 16 17				
	ly information copied from such Reports and S for commercial purposes, other than using the			person for the purpose of soliciting contributions e to solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full)							
/	Brighter Future Coalition							
<u></u>	Full Name of Individual (Last, First, Middle Ini	tial) or Full C	Organization Name					
A.	United Health Services of Georgia PAC			Date of Receipt				
	Mailing Address 1626 Jeurgens Court			04 11 2017				
	City	State	Zip Code	Transaction ID : SA11C.4110				
	Norcross	GA	30093	Amount of Each Receipt this Period				
	FEC ID number of contributing							
	federal political committee.	C		5000.00				
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item				
	Traine of Employer (for marriadar)		apation (for marriada)	CONTRIBUTION				
	Receipt For:	Aggregate	Year-to-Date ▼					
	Primary General	33 13		1				
	Other (specify) ▼	5000.00	.1					
	Full Name of Individual (Last, First, Middle Ini	tial) or Full C	Organization Name	-				
В.	Tuli Name of marvada (East, 1 iist, windle iii	tial) of Full C	riganization rianic	Date of Receipt				
	Mailing Address			M = M / D = D / Y = Y = Y				
	City	State	Zip Code	_				
	City	State	Zip Code	Amount of Each Receipt this Period				
	FEC ID number of contributing			Tunioditi di Eddi Tiodopt tillo i dilod				
	federal political committee.	C		1 9 1 9 1 4				
	Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item				
	Traine of Employer (i.e. marriadal)		apaner (ier marrada)	_				
	Receipt For:	Aggregate	Year-to-Date ▼					
	Primary General Other (specify) ▼			1				
	Other (specify) •		<u> </u>	J.				
	Full Name of Individual (Last, First, Middle In	tial) or Full C	Organization Name					
C.				Date of Receipt				
	Mailing Address			M = M / D = D / Y = Y = Y				
	City	State	Zip Code					
				Amount of Each Receipt this Period				
	FEC ID number of contributing	С						
	federal political committee.							
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item				
	Receipt For:	Aggregato	Year-to-Date ▼	\dashv				
	Primary General	Aggregate	Tour to Dute 7	1				
	Other (specify)	.1						
,	SUBTOTAL of Receipts This Page (ontional)			5000.00				

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5000.00

S 17

0	CHEDINE A (FEC Form 2V)			1 1					
SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s)	FOR LINE NUMBER: PAGE 8 OF 13 (check only one)					
			for each category of the						
			Detailed Summary Page						
	ny information copied from such Reports and Sta for commercial purposes, other than using the			erson for the purpose of soliciting contributions					
	NAME OF COMMITTEE (In Full)								
	Brighter Future Coalition								
Α.	Full Name of Individual (Last, First, Middle Initial United Distributors Inc.	al) or Full C	Organization Name	Date of Receipt					
	Mailing Address 5500 United Drive			04 11 2017					
	City		Zip Code	Transaction ID : SA17.4112					
	Smyrna	GA	30082	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		25000.00					
	Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item CONTRIBUTION					
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General	1 33. 23		1					
	Other (specify) ▼		25000.00						
_									
В.	Full Name of Individual (Last, First, Middle Initia	al) or Full C	Organization Name	Date of Receipt					
Ь.	Mailing Address			−					
	Walling Address			M = M / D = D / Y = Y = Y					
	City	State	Zip Code						
				Amount of Each Receipt this Period					
	FEC ID number of contributing	C							
	federal political committee.								
	Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item					
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General	33 - 3		1					
	Other (specify) ▼		A A A						
C.	Full Name of Individual (Last, First, Middle Initia	al) or Full C	Organization Name	Date of Receipt					
	Mailing Address			M = M / D = D / Y = Y = Y					
	City	State	Zip Code	Amount of Each Receipt this Period					
	FEC ID number of contributing								
federal political committee.		C							
				Memo Item					
	Name of Employer (for Individual)	Occ	cupation (for Individual)	Wellio telli					
Receipt For:		Year-to-Date ▼							
	Primary General	, iggi cgale	Tour to Duto T	1					
Other (specify)			4-1-4-1-4-1						
			,						
8	UBTOTAL of Receipts This Page (optional)			25000.00					

TOTAL This Period (last page this line number only).....

25000.00

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SCHEDULE B (FEC Form 3X)				R LINE NUMBER: PAGE 9 OF					
ITEMIZED DISBURSEMENTS	TIVILED DIODONOLIVIENTO I for another any of the I -			only one)					
		Summary Page		1b 22 8a 28b	23 28c	26 27 29 30b			
Any information copied from such Reports and State	ments may	not be sold or use							
or for commercial purposes, other than using the na									
NAME OF COMMITTEE (In Full)									
Brighter Future Coalition									
Full Name (Last, First, Middle Initial)									
A. Ashby Law PLLC	Date of	of Disburse							
Mailing Address 717 Princess Street					/ D 2	2017			
City	State	Zip Code		FEC I	dentificatio	n Number			
Alexandria Purpose of Disbursement	VA	22314							
Legal Fees									
Candidate Name			Category/			ID: SB21B.4135 Disbursement this Period			
			Type	Allioui	it of Lacif	Dispuisement this Fellou			
	ment For:					1837.50			
Senate President	Primary Other (spe	General							
State: District:	Caron (spe	oony) ▼		M	emo Item				
Full Name (Last, First, Middle Initial)									
B. Ashby Law PLLC				Date of	of Disburse	ement			
Mailing Addross 747 Diagram Office				M	05 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Mailing Address 717 Princess Street	05	05 03 2017							
City Alexandria	State VA	Zip Code 22314		FEC I	dentificatio	n Number			
Purpose of Disbursement	***	22314		C	Transaction ID : SB21B.4137 Amount of Each Disbursement this Period				
Legal Fees									
Candidate Name			Category/	_					
Office Sought: House Disburse	ment For:		Type						
Senate	Primary	General							
President	Other (spe	ecify)		М	emo Item				
State: District:					Memo item				
Full Name (Last, First, Middle Initial)				Date (of Disburse	ement			
C. Aspect Consulting LLC				M M					
Mailing Address 8401 Excelsior Dr #103				04		2017			
City	State	Zip Code		EEC I	dentificatio	n Number			
Madison	WI	53717			Germineano	II INGIIIDGI			
Purpose of Disbursement Compliance Consulting			· · ·			JD - CD04D 4404			
Candidate Name			ID: SB21B.4134 Disbursement this Period						
Office Country			1005.70						
Office Sought: House Disbursement For:						1695.79			
Senate Primary General President Other (specify) ▼				П.					
State: District:] -: 3: (3 3	3, •		I LI M	emo Item				
						1050.00			
SUBTOTAL of Disbursements This Page (optional).			······································	<u> </u>		4058.29			
TOTAL This Period (last page this line number only	·)								

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SCHEDULE B (FEC Form 3X)	Hea sam	woto och saled s/s)	1	NUMBER:		PAGE	10 OF	13	
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	· '	(check only one)			7 م		
		Summary Page	X 21b 28a	22 28b	23 28c	26	27 30b		
Any information copied from such Reports and Statem	ents may n	not be sold or use						ns	
or for commercial purposes, other than using the nam	e and addr	ess of any politic	al committee t	o solicit conti	ibutions fro	m such co	mmittee.		
NAME OF COMMITTEE (In Full)									
Brighter Future Coalition									
Full Name (Last, First, Middle Initial)				Data of F	N:-1				
A. The Sassafras Group					Disburseme				
Mailing Address PO Box 2188				04	04 26 2017				
,	state	Zip Code		FEC Ider	tification N	umber			
Gainesville Purpose of Disbursement	GA	30503					-		
Fundraising Consulting				C					
Candidate Name			Category/		saction ID : of Each Dis	_		riod	
			Type	Amount	n Lacii Dis			100	
Office Sought: House Disbursem				1 L	7	- 5	5500.00		
	Primary	General							
State: District:	Other (spec	, (i) ∀		Mem	o Item				
Full Name (Last, First, Middle Initial)									
B.				Date of I	Disburseme	nt			
				M = M	/ D D	/ Y Y	Y Y	1	
Mailing Address								1	
City	state	Zip Code		FEC Ider	tification N	umber			
Purpose of Disbursement				С			_		
				Amount of Each Disbursement this Period					
Candidate Name			Category/						
Office Sought: House Disbursem	ent For:		Туре						
	Primary	General			7	7	-46	ш.	
	Other (spec	cify)		Memo Item					
State: District:				L Ivieiii	o item				
Full Name (Last, First, Middle Initial)				Data of F	Niele wee e ee e				
С.					Disburseme			-	
Mailing Address				M = M	/ D D	/ Y Y	YYY		
City	state	Zip Code		FEC Ider	tification N	umber			
Purpose of Disbursement				С					
Candidate Name			Category/	Amount of	of Each Dis	bursement	this Per	riod	
Office Sought: House Disbursem	ent For		Type					П	
	Primary	General			7	7-1	- 46		
President	Other (spec	cify) 🔻		Mem	o Item				
State: District:				William					
							5500.00	\neg	
SUBTOTAL of Disbursements This Page (optional)			·····•			7	2000.00	#	
TOTAL This Period (last page this line number only).							9558.29		

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

ITEMIZED INDEPENDENT EXPENDITURES			PAGE 11 OF FOR LINE 24 OF FOR	13		
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBE			
Brighter Future Coalition			C C00634907	-10		
			C 200034907			
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	Y		
Full Name of Payee	Item Date of Public Distribution/Dissemination	ion				
Advantage Direct			04 / D D / Y Y Y Y Y 13			
Mailing Address 2300 Clarendon Blvd #303			Amount			
				-		
City	State	Zip Code	692.2	20		
Arlington	VA	22201	Transaction ID : SE.4118 Date of Disbursement or Obligation			
Purpose of Expenditure Paid Calls		Category/ Type 004	04 / 14 / 2017			
Name of Federal Candidate:		X Support	Office Sought: X House District:	06		
Hill, Judson, , ,		Oppose	President Senate State:	GA		
Calendar Year-To-Date		42040.20		neral		
Per Election for Office Sought	7 7	43640.20	2017	eral		
Full Name of Payee		☐ Memo	Item Date of Public Distribution/Dissemination	ion		
Constituent Services Inc.			04 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Y		
Mailing Address 8536 Bellagio Dr	Mailing Address 8536 Bellagio Dr					
,			Amount			
City	State	Zip Code	685.0)4		
Naples	FL	34114	Transaction ID : SE.4121 Date of Disbursement or Obligation			
Purpose of Expenditure Paid Calls		Category/ Type 004 04 18 2				
		Туре				
Name of Federal Candidate:		✗ Support	Office Sought.	06		
Hill, Judson, , ,		Oppose	President Senate State:	GA		
Calendar Year-To-Date		44325.24	2017 —	eneral		
Per Election for Office Sought	7 1 7		2017 ★ Other (specify) ► Special-Gene	eral ———		
(a) SUBTOTAL of Itemized Independent Expenditures	·		1377.24			
(b) SUBTOTAL of Unitemized Independent Expenditu	res		>			
(c) TOTAL Independent Expenditures			•			
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized					
Lind, Kate, , ,	[Electronically Fil	ed1	M M / D D / Y Y Y Y			
Signature	Laces omeany 1'll	Date	9 07 10 2017			

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES				PAGE 12 OF 13	
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼	
Brighter Future Coalition				C C00634907	
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M = M / D = D / Y = Y = Y	
Full Name of Payee Impact Advertising LLC		☐ Memo	Item Date	e of Public Distribution/Dissemination	
Mailing Address 1870 E 3355 S	Moiling Addross				
			Amo	punt	
City	State	Zip Code		14724.00	
Salt Lake City	UT	84106		nsaction ID : SE.4100 e of Disbursement or Obligation	
Purpose of Expenditure Direct Mail		Category/ Type 004		04 / 10 / 2017	
Name of Federal Candidate:		✗ Support	Office Sou	ght: X House District: 06	
Hill, Judson, , ,		Oppose	Pres		
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	14724.00	Disbursement 2017	ent For:	
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination	
Impact Advertising LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 1870 E 3355 S			Amo	punt	
City	State	Zip Code		13500.00	
Salt Lake City	UT	84106		nsaction ID : SE.4108 e of Disbursement or Obligation	
Purpose of Expenditure Digital Ads		Category/ Type 004		04 / 11 / 2017	
Name of Federal Candidate:		x Support	Office Sou	ght: 🗶 House District:06	
Hill, Judson, , ,		Oppose	Pres	ident Senate State: GA	
Calendar Year-To-Date Per Election for Office Sought	7	28224.00	Disburseme 2017	ent For: ☐ Primary ☐ General Other (specify) ▶ Special-General	
(a) SUBTOTAL of Itemized Independent Expenditures			. [28224.00	
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•		
(c) TOTAL Independent Expenditures			• [
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		·	
Lind, Kate, , ,	Electronically Fil	edl -	M = M	/ D D / Y Y Y Y	
Signature	I'momenty I'm	Date	9 07	10 2017	

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES				PAGE 13 OF 13 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Brighter Future Coalition				C C00634907
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item Da	ate of Public Distribution/Dissemination
Impact Advertising LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1870 E 3355 S			Ar	mount
City	State	Zip Code	— I	14724.00
Salt Lake City	UT	84106		ransaction ID : SE.4114 ate of Disbursement or Obligation
Purpose of Expenditure Direct mail		Category/ Type 004		04 / 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office So	ought: X House District: 06
Hill, Judson, , ,		Oppose		esident Senate State: GA
Calendar Year-To-Date Per Election for Office Sought	7 1 7	42948.00	Disburse 2017	ment For:
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination
				M M / D D / Y Y Y Y
Mailing Address				
			Ar	mount
City	State	Zip Code		
Durnoon of Funenditure			Da	ate of Disbursement or Obligation
Purpose of Expenditure		Category/ Type		M M / D D / Y Y Y Y
Name of Federal Candidate:		Support	Office So	ought: House District:
		Oppose	Pre	esident Senate State:
Calendar Year-To-Date			Disburse	ment For: Primary General
Per Election for Office Sought	7 7			Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	i		•	14724.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			•	44325.24
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Lind, Kate, , ,	[Electronically File	led1	M = M	/ D D / Y Y Y Y Y
Signature		_ Date	e 07	10 2017