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

Schedule E)	FOR SE OF FORM 24/48	
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
For Our Future	C C00620971	
Check if X 24-hour report 48-hour report New report Amends report filed	on Man / Dab / Yayayay	
Full Name of Payee  Hustle, Inc.	Date of Public Distribution/Dissemination	
·	11 04 2016	
Mailing Address 251 Kearny St	Amount	
Ste 300		
City State Zip Code	15000.00	
San Francisco CA 94108-4544	Transaction ID: VSG8M9TWG06  Date of Disbursement or Obligation	
Purpose of Expenditure Digital Communications  Category/ Type 004	11 04 2016	
Name of Federal Candidate Support Office	Sought: House District:	
CLINTON, HILLARY RODHAM, , ,	President Senate State:	
Calendar Year-To-Date Per Election for Office Sought  Disbut 2016	or o	
Full Name of Payee	Date of Public Distribution/Dissemination	
Hustle, Inc.	M = M / D = D / Y = Y = Y	
Mailing Address 251 Kearny St	11 04 2016	
Ste 300	Amount	
City State Zip Code	15000.00	
San Francisco CA 94108-4544	Transaction ID : VSG8M9TWG14 Date of Disbursement or Obligation	
Purpose of Expenditure  Category/ Category/	M M / D D / Y Y Y	
Digital Communications  Output  Digital Communications  Output  Digital Communications	11 04 2016	
Name of Federal Candidate Support Office	e Sought: House District:	
McGinty, Kathleen Alana, , , Oppose	President Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought  Disbut 2016	ursement For: Primary   General  Other (specify)	
	Care (openly)	
(a) SUBTOTAL of Itemized Independent Expenditures	30000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of eithe party committee) any political party committee or its agent.	•	
Bidel-Niyat, Shirin, , , [Electronically Filed] Date	1 05 2016	
Signature		

### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 6 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	EC IDENTIFICATION NUMBER ▼
For Our Future	C00620971
Check if X 24-hour report 48-hour report New report Amends report filed on	M / D = D / Y = Y = Y
Full Name of Payee Date of I	Public Distribution/Dissemination
Las Vegas Chinese Daily News	
Mailing Address 4215 Spring Mountain Rd  Amount	
Ste B206A	450.00
City State Zip Code  Las Vegas NV 89102-8747 Transact	450.00 tion ID : VSG8M9TWFY1
Date of I	Disbursement or Obligation
Purpose of Expenditure Newspaper Advertisement  Category/ Type 004	M / D D / Y Y Y Y Y
Name of Federal Candidate      X   Support   Office Sought:	House District:
CLINTON, HILLARY RODHAM, , ,	Senate State:
Calendar Year-To-Date Per Election for Office Sought  Disbursement F 2016  Other	For: Primary <b>X</b> General er (specify) ▶
	Public Distribution/Dissemination
Las Vegas Chinese Daily News	M / D D / Y Y Y Y
Mailing Address 4215 Spring Mountain Rd	2010
Ste B206A Amount	
City State Zip Code	450.00
	ion ID: VSG8M9TWFZ8 Disbursement or Obligation
Purpose of Expenditure	M / D D / Y T Y T Y
Name of Federal Candidate  X Support Office Sought:	House District:
MASTO, CATHERINE CORTEZ, , , Oppose President	Senate State: NV
Calendar Year-To-Date Per Election for Office Sought  Disbursement F 2016  Other	For: Primary <b>X</b> General er (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	7 1 7 1 7
(c) TOTAL Independent Expenditures	7 1 7 1 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in coo with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the party committee) any political party committee or its agent.	
Bidel-Niyat, Shirin, , , [Electronically Filed] Date 11	05 / 2016

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

Schedule E)		PAGE 3 OF 6 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
For Our Future		C C00620971
Check if X 24-hour report 48-hour report X New report	Amanda report filed (	M = M / D = D / Y = Y = Y
	Amends report filed of	on
Full Name of Payee Lee, Mark, , ,		Date of Public Distribution/Dissemination
Mailing Address 8253 Rush St		11 04 2016 Amount
	Code	500.00
	1770-3614	Transaction ID: VSG8M9TWFW5 Date of Disbursement or Obligation
Purpose of Expenditure Advertising Design Services	Category/ Type 004	M = M / D = D / Y = Y = Y
Name of Federal Candidate	<b>x</b> Support Office	Sought: House District:
CLINTON, HILLARY RODHAM, , ,		President Senate State:
Calendar Year-To-Date	Disbur	rsement For: Primary X General
Per Election for Office Sought 542	22308.52 2016	Other (specify)
Full Name of Payee		Date of Public Distribution/Dissemination
Lee, Mark, , , *		11 04 2016
Mailing Address 8253 Rush St		
		Amount
City State Zip	p Code	500.00
Rosemead CA 91	1770-3614	Transaction ID: VSG8M9TWFX3 Date of Disbursement or Obligation
Purpose of Expenditure Advertising Design Services	Category/ Type 004	M = M / D = D / Y = Y = Y
Name of Federal Candidate	Support Office	Sought: House District:
MASTO, CATHERINE CORTEZ, , ,		President Senate State: NV
Calendar Year-To-Date	Disbur	rsement For: Primary X General
	55208.41 2016	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	·····	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	<b>•</b>	
Under penalty of perjury I certify that the independent expenditures rep with, or at the request or suggestion of, any candidate or authorized coparty committee) any political party committee or its agent.		
Bidel-Niyat, Shirin, , , [Electronical]	lly Filed] Date 11	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		

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

· · · · · · · · · · · · · · · · · · ·		FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full) For Our Future		FEC IDENTIFICATION NUMBER ▼
roi Oui Fuluie		C C00620971
Check if 24-hour report 48-hour report New report	rt Amends report file	d on M = M / D = D / Y = Y = Y
Full Name of Payee New Partners Consulting, Inc.		Date of Public Distribution/Dissemination
x * 3.		11 04 2016
Mailing Address 1250 I St NW		Amount
Ste 200		
1 ·	Zip Code	500.00
	20005-5994	Transaction ID: VSG8M9TWG48  Date of Disbursement or Obligation
Purpose of Expenditure Voter Outreach Calls	Category/ Type 004	M = M / D = D / Y = Y = Y
Name of Federal Candidate	<b>✗</b> Support Office	ce Sought: House District:
CLINTON, HILLARY RODHAM, , ,	Oppose x	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	Disk 2016	oursement For: Primary
Full Name of Payee New Partners Consulting, Inc.  x  Mailing Address 1250 I St NW Ste 200	Zin Codo	Date of Public Distribution/Dissemination  M M M / 04 / 2016  Amount
City State  Washington DC	Zip Code 20005-5994	500.00 Transaction ID : VSG8M9TWG56
		_ Date of Disbursement or Obligation
Purpose of Expenditure Voter Outreach Calls	Category/ Type 004	M = M / D = D / Y = Y = Y
Name of Federal Candidate	<b>✗</b> Support Office	ce Sought: House District:
MASTO, CATHERINE CORTEZ, , ,	Oppose	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought	355208.41 Dist 201	oursement For: Primary General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	•	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	······	
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Bidel-Niyat, Shirin, , , [Electronic	cally Filed] Date	11 05 2016
Signature		

PAGE

OF

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 5 OF 6 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
For Our Future	C C00620971
Check if <b>X</b> 24-hour report 48-hour report New report Ame	ends report filed on M M M / D D / Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
Onyx Communications x *	11 04 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2046 Westchester Dr	Amount
City State Zip Code	42000.00
Silver Spring MD 20902-3557	
Purpose of Expenditure Voter Outreach Calls  Category/ Type	004 M M / D D / Y Y Y Y
Name of Federal Candidate	upport Office Sought: House District:
CLINTON HILLARY BODHAM	Oppose President Senate State:
Calendar Year-To-Date Per Election for Office Sought 5422308.52	Disbursement For: Primary ★ General 2016 Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Onyx Communications	11 04 2016
Mailing Address 2046 Westchester Dr	Amount
City State Zip Code	42000.00 Transaction ID : VSG8M9TWG30
Silver Spring MD 20902-3557	Date of Disbursement or Obligation
Purpose of Expenditure Voter Outreach Calls  Category/ Type	004
Name of Federal Candidate	Support Office Sought: House District:
MUDDLIV DATRICK F	Oppose President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 1030641.48	Disbursement For: Primary   2016  Other (specify)   General
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	··············
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported here with, or at the request or suggestion of, any candidate or authorized committee or party committee) any political party committee or its agent.	
Bidel-Niyat, Shirin, , ,  [Electronically Filed]  Signature	Date 11 / 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)		101120		PAGE 6 OF 6 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
For Our Future				C C00620971
Check if 24-hour report 48-hour report	X New repo	ort Amends repo		M = M / D = D / Y = Y = Y = Y
Full Name of Payee The Contact Group, Inc.				of Public Distribution/Dissemination
X Mailing Address PO Box 187			[	11 04 2016
3 3 4 4 4 FO BOX 167			Amo	unt
City	State	Zip Code		8558.88
Grasonville	MD	21638-0187		saction ID : VSG8M9TWFT9 of Disbursement or Obligation
Purpose of Expenditure Estimated Cost for Robocalls		Category/ Type 004	] [	M = M / D = D / Y = Y = Y = Y
Name of Federal Candidate		<b>x</b> Support	Office Soug	ht: House District:
CLINTON, HILLARY RODHAM, , ,		Oppose	<b>x</b> Presid	
Calendar Year-To-Date Per Election for Office Sought		5422308.52	Disburseme 2016	nt For:
Full Name of Payee			Date	of Public Distribution/Dissemination
The Contact Group, Inc.				M = M / D = D / Y = Y = Y
X Mailing Address PO Box 187			— L	11 04 2016
PO Box 167			Amo	unt
City	State	Zip Code		8558.88
Grasonville	MD	21638-0187		action ID: VSG8M9TWFV7 of Disbursement or Obligation
Purpose of Expenditure Estimated Cost for Robocalls		Category/ Type 004	] [	M = M / D = D / Y = Y = Y
Name of Federal Candidate		<b>x</b> Support	Office Soug	ht: House District:
MURPHY, PATRICK E, , ,		Oppose	Presid	dent State: FL
Calendar Year-To-Date Per Election for Office Sought	, , ,	1030641.48	Disburseme	ont For: Primary <b>X</b> General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			· [	0.00
(b) SUBTOTAL of Unitemized Independent Expenditure	'es		· [	7117115
(c) TOTAL Independent Expenditures			•	30000.00
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its ag	or authorized			
Bidel-Niyat, Shirin, , ,	[Electron	ically Filed] Date	11	05 / 2016