10/30/2018 23 : 26

Image# 201810309133563612 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

	chedule E)		TIONES		PAGE	E 1 OF 1 SE OF FORM 24/48	
NA	AME OF COMMITTEE (In Full)						
MISSOURI RISING ACTION					C C00652875		
					0 0000		
Ch	neck if 🗶 24-hour report 🗌 48-hour rep	port X New repo	ort Amends repo		M / D	D / Y Y Y Y Y	
	Full Name of Payee Intermarkets, Inc.			Date of	of Public Distr	ibution/Dissemination	
				M	10 ^M /2	9 / Y Y Y Y 2018	
	Mailing Address 11951 Freedom Drive, 111	th Floor		Amou	nt		
	City	State	Zip Code			40000.00	
	Reston	VA	20190		action ID : SE	.4359 ent or Obligation	
	Purpose of Expenditure Digital Ad Placement and Production		Category/ Type 004	M	M / D	3	
	Name of Federal Candidate		Support	Office Sough	t: Hou	use District:	
	MCCASKILL, CLAIRE, , ,		X Oppose	Preside		nate State: MO	
	Calendar Year-To-Date Per Election for Office Sought		681441.68	Disbursemen 2018	t For: F	Primary 🗶 General	
	Full Name of Payee				Date of Public Distribution/Dissemination		
	National Cable Communication						
	Mailing Address 7501 Wisconsin Avenue		— L		2018		
	Mailing Address 7501 Wisconsin Avenue	∍, Suite 800 E		Amou	nt		
	City	State	Zip Code			30000.00	
	Bethesda	MD	20814		ction ID : SE.	4360 ent or Obligation	
	Purpose of Expenditure Digital Ad Placement and Production		Category/ Type 004	M	M / D	-	
	Name of Federal Candidate		Support	Office Sough	t: Ho	use District:	
	MCCASKILL, CLAIRE, , ,		X Oppose	Preside	ent 🗴 Sei	nate State: <u>MO</u>	
	Calendar Year-To-Date		744.444.00	Disbursemen 2018	t For:	Primary X General	
	Per Election for Office Sought		711441.68		ther (specify)	▶	
	(a) SUBTOTAL of Itemized Independent Ex	(penditures		··· ▶		70000.00	
		E		_			
	(b) SUBTOTAL of Unitemized Independent	Experiatures		··· • .			
	(c) TOTAL Independent Expenditures					70000 00	
	(.)				-7-	70000.00	
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.							
	Hayes, Deanna, , ,	[F]		M M /		Y Y Y Y	
	Signature		<i>nically Filed]</i> Date	e 10	30	2018	