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

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Values are Vital	
	C C00552422
Check if 24-hour report X 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y
Full Name of Payee Jamestown Associates	Date of Public Distribution/Dissemination
Jamestown Associates	M = M / D = D / Y = Y = Y
Mailing Address 5 Mapleton Road	Amount
Suite 300	
City State Zip Code	10166.68
Princeton NJ 08540	Transaction ID : SE.4222 Date of Disbursement or Obligation
Purpose of Expenditure TV ad buy Category/ Type 004	03 / 20 / 2014
Name of Federal Candidate Support Office	Sought: X House District: 19
PAIGE VANIER Vanier KREEGEL Oppose	President Senate State: FL
047004 00	rsement For: Primary General
Per Election for Office Sought 617601.82 2014	Other (specify) ► Special-Primary
Full Name of Payee Jamestown Associates	Date of Public Distribution/Dissemination
Mailing Address 5 Mapleton Road	
Suite 300	Amount
City State Zip Code	10166.66
Princeton NJ 08540	Transaction ID : SE.4223 Date of Disbursement or Obligation
Purpose of Expenditure TV ad buy Category/ Type 004	M = M / D = D / Y = Y = Y
Type Type	03 20 2014
Name of Federal Candidate Support Office	e Sought: House District: 19
LIZBETH BENACQUISTO Oppose	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought Disbut 2014	rsement For: Primary General Other (specify) ► Special-Primary
(a) SUBTOTAL of Itemized Independent Expenditures	20333.34
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
•	7 7 7
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.	
D. LIME:	
24.0	3 21 2014
Signature	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Values are Vital	C C00552422
Check if 24-hour report X 48-hour report New report Amends report filed	d on M M / D D / Y Y Y Y Y
Full Name of Payee Jamestown Associates	Date of Public Distribution/Dissemination
Mailing Address 5 Mapleton Road	
Suite 300	Amount
City State Zip Code	10166.66
Princeton NJ 08540	Transaction ID : SE.4224 Date of Disbursement or Obligation
Purpose of Expenditure TV ad buy Category/ Type 004	03 / 20 / 2014
Name of Federal Candidate Support Offic	e Sought: X House District: 19
CURTIS J CLAWSON Oppose	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought Disb 2014	ursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
	M - M / D - D / Y - Y - Y - Y
Mailing Address	Amount
	Allouit
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	e Sought: House District:
Oppose	President Senate State:
Galoridar Todi To Balo	ursement For: Primary General
Per Election for Office Sought	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	10166.66
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	30500.00
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
	D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	