

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

 PAGE 1 OF 3
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) AMERICAN FUTURE FUND POLITICAL ACTION		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00449926 </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee GRP Buying LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 22 / 2018	
Mailing Address 3136 Kingsdale Center Ste 136			Amount 180486.80	
City Upper Arlington	State OH	Zip Code 43221	Transaction ID : SE.8204	
Purpose of Expenditure Video Advertising - Airtime & Production		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 05 / 22 / 2018	
Name of Federal Candidate HARKEY, DIANE, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 49 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee GRP Buying LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 22 / 2018	
Mailing Address 3136 Kingsdale Center Ste 136			Amount 180486.80	
City Upper Arlington	State OH	Zip Code 43221	Transaction ID : SE.8205	
Purpose of Expenditure Video Advertising - Airtime & Production		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 05 / 22 / 2018	
Name of Federal Candidate CHAVEZ, ROCKY, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 49 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	360973.60
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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.

Marston, Chris, , ,

[Electronically Filed]

Date

MM / DD / YYYY
05 / 23 / 2018

Signature

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NAME OF COMMITTEE (In Full) AMERICAN FUTURE FUND POLITICAL ACTION	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px; font-weight: bold; margin-right: 5px;">C</div> C00449926 </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: flex; justify-content: flex-end; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">M M M</div> / <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">D D D</div> / <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div> </div>	

Full Name of Payee In Field Strategies			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: flex-end; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">M M M</div> / <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">D D D</div> / <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 970 Seacoast Dr Ste 7			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">65000.00</div>		
City Imperial Beach	State CA	Zip Code 91932	Transaction ID : SE.8206 Date of Disbursement or Obligation <div style="display: flex; justify-content: flex-end; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">M M M</div> / <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">D D D</div> / <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Door-to-Door Voter Outreach		Category/ Type	<div style="display: flex; justify-content: flex-end; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">M M M</div> / <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">D D D</div> / <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate CHAVEZ, ROCKY, , ,			Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		

425973.60

Full Name of Payee In Field Strategies			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: flex-end; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">M M M</div> / <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">D D D</div> / <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 970 Seacoast Dr Ste 7			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">65000.00</div>		
City Imperial Beach	State CA	Zip Code 91932	Transaction ID : SE.8207 Date of Disbursement or Obligation <div style="display: flex; justify-content: flex-end; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">M M M</div> / <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">D D D</div> / <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Door-to-Door Voter Outreach		Category/ Type	<div style="display: flex; justify-content: flex-end; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">M M M</div> / <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">D D D</div> / <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate HARKEY, DIANE, , ,			Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		

490973.60

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">130000.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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.

Marston, Chris, , ,

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Date

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Signature

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FOR SE OF FORM 24/48			

NAME OF COMMITTEE (In Full) AMERICAN FUTURE FUND POLITICAL ACTION		FEC IDENTIFICATION NUMBER ▼ C C00449926	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee In Field Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 23 / 2018	
Mailing Address 970 Seacoast Dr Ste 7		Amount 65000.00	
City Imperial Beach	State CA	Zip Code 91932	Transaction ID : SE.8208
Purpose of Expenditure Door-to-Door Voter Outreach	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 05 / 23 / 2018	
Name of Federal Candidate BAUGH, SCOTT, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 48 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee In Field Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 23 / 2018	
Mailing Address 970 Seacoast Dr Ste 7		Amount 32500.00	
City Imperial Beach	State CA	Zip Code 91932	Transaction ID : SE.8209
Purpose of Expenditure Door-to-Door Voter Outreach	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 05 / 23 / 2018	
Name of Federal Candidate KIM, YOUNG, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 39 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	97500.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	588473.60

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.

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