FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation US Chamber of Commerce		
(b) Address (number and street) Check if different than previo 1615 H Street NW	ously reported	
(c) City, State and ZIP Code Washington DC 20062		3. FEC Identification Number
2. Occupation and Name of Employer (for Individual Filers Only)		C C90013145
4. TYPE OF REPORT (check appropriate boxes):		I
(a) April 15 Quarterly Report	24-Hour Report	
October 15 Quarterly Report	¥ 48-Hour Report	
b) Is this Report an amendment? No 🗶 Ye	es, it amends the report filed on	06 / D D / Y Y Y Y 2018
5. COVERING PERIOD: FROM / DID THROUGH / DID		
6. TOTAL CONTRIBUTIONS	[0.00
7. TOTAL INDEPENDENT EXPENDITURES	[350000.00
Under penalty of perjury I certify that the independent expenditures reported herein w of, any candidate or authorized committee or agent of either, or any political party of	vere not made in cooperation, consul committee or its agent.	Itation, or concert with, or at the request or suggestio
TYPE OR PRINT NAME OF PERSON COMPLETING FORM	SIGNATURE	DATE [Electronically Filed]
Majlak, Abby, , ,	Majlak, Abby, , ,	06/27/2018

For further information, contact: Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

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FOR LIN	E 7	OF	FOF	RM 5

NAME OF FILER (In Full) US Chamber of Commerce

Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination Mailing Address 1020 Princess Street Amount City State Zip Code Alexandria VA 22314 Purpose of Expenditure Category/ 004 Office Sought: X president Senate Name of Federal Candidate Supported or Opposed by Expenditure: Check One: X president Distribution/Dissemination Caledoary (Marking Address) Category/ 004 Office Sought: X print y General 2018 percent pe		
Mailing Address 1020 Princess Street 06 21 2018 City State Zip Code Amount City State Zip Code 350000.00 Purpose of Expenditure Category/ 04 Office Sought: X Name of Federal Candidate Supported or Opposed by Expenditure: Check One: X Support Oppose Caledory Year-To-Date Per Election for Office Sought 360000.00 Disbursement For: Primary General 2018 Mailing Address Amount 2018 Amount Check One: Support Oppose Full Name (Last, First, Middle Initial) of Payce Date of Public Distribution/Dissemination Date of Public Distribution/Dissemination Mailing Address Amount Amount Senate District: D		Date of Public Distribution/Dissemination
City State Zip Code 350000.00 Maxandria VA 22314 Transaction ID : 57690955 Purpose of Expenditure Category/ Type 004 Office Sought Anount Name of Federal Candidate Supported or Opposed by Expenditure: Curbeio, Carlos, Office Sought Anount Office Sought District: 26 Name of Federal Candidate Supported or Opposed by Expenditure: Curbeio, Carlos, Office Sought Office So	·	
Alexandria VA 22314 Transaction ID: 57690955 Purpose of Expenditure Media supporting Carlos Curbelo. Category/ Type 004 Office Sought: X House State: FL Name of Federal Candidate Supported or Opposed by Expenditure: Curbelo, Carlos, Office Sought Senate Disbursement For: Y many General Calendar Year-To-Date Per Election for Office Sought 350000.00 Disbursement For: Y many General Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination Amount Amount Other (specify) Other (specify) Other (specify) Disbursement For: P many General Purpose of Expenditure Category/ Type Other (specify) Manount Other (specify) Manount City State Zip Code Senate Disbursement For: P minary General Name of Federal Candidate Supported or Opposed by Expenditure: Category/ Type Other (specify) Disbursement For: P minary General Calendar Year-To-Date Per Election for Office Sought Disbursement For: P minary General Other (specify) Full Name (Last, First, Middle Initial) of Payee Disbursement For: P minary General Other (specify)	Mailing Address 1020 Princess Street	Amount
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Mailing Address Amount City State Zip Code Purpose of Expenditure Category/ Type Office Sought: House State: Name of Federal Candidate Supported or Opposed by Expenditure: Office Sought: President	Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination
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Type Senate Name of Federal Candidate Supported or Opposed by Expenditure: President		
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Check One: Support Oppose	Name of Federal Candidate Supported or Opposed by Expenditure:	
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Calendar Year-To-Date Per Election General Disbursement For:		
for Office Sought	tor Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		
		350000.00
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	(c) TOTAL Independent Expenditures	> 350000.00