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 ▼
LIBERTY4FLORIDA	C C00555904
Check if X 24-hour report 48-hour report New report Amends report filed	d on M = M / D = D / Y = Y = Y
Full Name of Payee Palm Coast Observer	Date of Public Distribution/Dissemination
	10 04 2018
Mailing Address PO Box 353850	Amount
City State Zip Code	1000.00
Palm Coast FL 32135	Transaction ID : SE.4170 Date of Disbursement or Obligation
Purpose of Expenditure News paper inserts Category/ Type 004	10
Name of Federal Candidate Support Office	e Sought: House District:
Scott, Rick, , ,	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought Disb 2018	ursement For: Primary General Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	Amount
City State Zip Code	
Siale ZIP Code	
Purpose of Expenditure Category/	Date of Disbursement or Obligation
Category/ Type	
Name of Federal Candidate Support Office	ee Sought: House District:
Oppose	President Senate State:
Caloridat Toda To Bato	oursement For: Primary General
Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	1000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	1000.00
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.	
William, Jones, S, , [Electronically Filed] Date	10 04 2018
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