24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)		PAGE 1 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
NATIONAL HORIZON		C C00519363
Check if 24-hour report		
Full Name of Payee Harris Media LLC		Date of Public Distribution/Dissemination
		10 06 7 2018
Mailing Address 6500 Manor Dr		Amount
City State	Zip Code	91500.00
Austin TX	78723	Transaction ID: SE.4799 Date of Disbursement or Obligation
Purpose of Expenditure Digital Advertising (Amount Estimated)	Category/ Type 004	10 06 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Of	ffice Sought:
ALLRED, COLIN, , ,	X Oppose	President Senate State: TX
Calendar Year-To-Date Per Election for Office Sought		sbursement For: Primary x General 118 Other (specify) ▶
Full Name of Payee		Date of Public Distribution/Dissemination
Harris Media LLC		10 06 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 6500 Manor Dr		Amount
City State	Zip Code	71500.00
Austin TX	78723	Transaction ID : SE.4800 Date of Disbursement or Obligation
Purpose of Expenditure Digital Advertising (Amount Estimated)	Category/ Type 004	10 06 / Y Y Y Y
Name of Federal Candidate	Support Of	ffice Sought: House District: 07
FLETCHER, ELIZABETH, , ,	X Oppose	President Senate State:TX
Calendar Year-To-Date Per Election for Office Sought		isbursement For: Primary General 018 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	·····	163000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	······································	
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.	•	•
	ically Filed] Date	10 08 2018
Signature		

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

		FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼		
NATIONAL HORIZON		C C00519363	
Check if 24-hour report			
Full Name of Payee		ate of Public Distribution/Dissemination	
Harris Media LLC		10 06 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 6500 Manor Dr		mount	
City State Zip Code		46500.00	
Austin TX 78723		ransaction ID : SE.4801 ate of Disbursement or Obligation	
Purpose of Expenditure Digital Advertising (Amount Estimated) Category/ Type	/ 004	10 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Name of Federal Candidate	Support Office So	ought: 🗶 House District: 23	
IONES CINA OPTIZ		esident Senate State: TX	
Calendar Year-To-Date Per Election for Office Sought 46500.00	Disburser 2018	ment For:	
Full Name of Payee	Da	ate of Public Distribution/Dissemination	
Mailing Address	Ar	mount	
City State Zip Code			
	Da	ate of Disbursement or Obligation	
Purpose of Expenditure Category/	/	M = M / D = D / Y = Y = Y	
Name of Federal Candidate	Support Office So	ought: House District:	
		esident Senate State:	
Calendar Year-To-Date	Disburser	ment For: Primary General	
Per Election for Office Sought		Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures		46500.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures	······	209500.00	
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.			
Satterfield, David, , , [Electronically Filed]	Date 10	08 2018	
Signature			

PAGE 2

OF