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

Schedule E)	FOR SE OF FORM 24/48				
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼				
PACRONYM	C C00646877				
	5 2335 357				
Check if 24-hour report					
Full Name of Payee Blueshift Technologies	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Mailing Address 1301 W Fletcher St					
Apt 406	Amount				
City State Zip Code	253.85				
Chicago IL 60657-3255	Transaction ID: VVAHVAQAMN9 Date of Disbursement or Obligation				
Purpose of Expenditure Website - Estimate Category/ Type	M = M / D = D / Y = Y = Y				
Name of Federal Candidate Support Office	e Sought: House District: 00				
BIDEN, JOSEPH R JR, , , Oppose	President Senate State: 00				
Calendar Year-To-Date Per Election for Office Sought Disbut 2020	ursement For: Primary General Other (specify) ▶				
Full Name of Payee	Date of Public Distribution/Dissemination				
Blueshift Technologies	10 08 2020				
Mailing Address 1301 W Fletcher St	Amount				
Apt 406					
City State Zip Code Chicago IL 60657-3255	23.08 Transaction ID : VVAHVAQAMP7				
	Date of Disbursement or Obligation				
Purpose of Expenditure Website - Estimate Category/ Type	M = M / D = D / Y = Y = Y				
Name of Federal Candidate Support Office	e Sought: House District: 00				
WARNOCK, RAPHAEL, , , Oppose	President Senate State: GA				
Calendar Year-To-Date Per Election for Office Sought Disbute 2020	ursement For: Primary				
(a) SUBTOTAL of Itemized Independent Expenditures	276.93				
	7 7				
(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.					
Bowen, Amanda, , , [Electronically Filed] Date 1	M / D D / Y Y Y Y Y				
Signature Date 1	0 09 2020				

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

benedule L)							FOR SE OF	FORM 24/48
NAME OF COMM PACRONYI						FEC	IDENTIFICATI	ON NUMBER ▼
PACRONTI	VI					C	C00646877	
Check if 24-h	nour report 🗶 48-hour report	✗ New repo	ort A	mends repo	ort filed on	M = M	/ D = D /	Y Y Y Y Y
Full Name of	Payee				D	ate of Pub	olic Distribution	/Dissemination
Bluesnift	Technologies					10 M	/ D D /	2020
Mailing Addre	SS 1301 W Fletcher St				Δ	Amount		
	Apt 406							
City Chicago	City State Zip Code Chicago IL 60657-3255				I	23.08 Transaction ID : VVAHVAQAMQ5 Date of Disbursement or Obligation		
Purpose of Ex Website - Est			Category, Type			M M	/ D D /	Y
Name of Fed	eral Candidate		×	Support	Office S	ought:	House	District: 00
OSSOFF, T.	JONATHAN, , ,			Oppose	Pr	esident	X Senate	State: GA
	Year-To-Date		0550.0			ement For:	Primary	General
Per Elec	ion for Office Sought	, , ,	3558.8	4	2020	Other (specify) 🕨	
Full Name of Cheat Sh	Payee eet LLC					Date of Pub	olic Distribution	n/Dissemination
Mailing Addre	SS 2049 Century Park E					10	08	2020
	Ste 1400				Α	Amount		
City		State	Zip Code					19038.46
Los Angeles		CA	90067-31	16			ID: VVAHVAO	
Purpose of E Video and G	xpenditure aphic Production - Estimate		Category, Type			M = M	/ D D /	Y Y I Y I Y
Name of Fed	eral Candidate		×	Support	Office S	ought:	House	District:00
BIDEN, JOSE	EPH R JR, , ,			Oppose	X Pi	resident	Senate	State:00
	Year-To-Date tion for Office Sought	7	8339230.5	6	Disburse 2020	Other (Primary	y X General
(a) SUBTOTAI	of Itemized Independent Expenditu	ıres			▶		7	19061.54
(b) SUBTOTAL of Unitemized Independent Expenditures								
(c) TOTAL Ind	ependent Expenditures				•		7 7	
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.								
	owen, Amanda, , ,	[Electron	ically Filed]	Date	e 10	/ 09		20
Signature								

PAGE 2

OF

Schedule E)	PAGE 3 OF 6 FOR SE OF FORM 24/48				
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼				
PACRONYM	C C00646877				
Check if 24-hour report 48-hour report New report Amends report	t filed on				
Full Name of Payee	Date of Public Distribution/Dissemination				
Cheat Sheet LLC	10				
Mailing Address 2049 Century Park E	Amount				
Ste 1400					
City State Zip Code	1730.77				
Los Angeles CA 90067-3116	Transaction ID: VVAHVAQAMK4 Date of Disbursement or Obligation				
Purpose of Expenditure Video and Graphic Production - Estimate Category/ Type	M = M / D = D / Y = Y = Y				
Name of Federal Candidate	Office Sought: House District: 00				
WARNOCK, RAPHAEL, , ,	President Senate State: GA				
	Disbursement For: Primary General 2020				
Tot Elocitor for Office Cought	Other (specify) -				
Full Name of Payee Cheat Sheet LLC	Date of Public Distribution/Dissemination				
Mailing Address 2049 Century Park F	10 08 7 2020				
2040 Contary Func E	Amount				
Ste 1400	4700 77				
City State Zip Code Los Angeles CA 90067-3116	1730.77 Transaction ID: VVAHVAQAMM2				
Purpose of Expanditure	Date of Disbursement or Obligation				
Video and Graphic Production - Estimate Category/ Type	M = M / D = D / Y = Y = Y				
Name of Federal Candidate Support	Office Sought: House District: 00				
OSSOFF, T. JONATHAN, , ,	President Senate State: GA				
	Disbursement For: Primary Queen General Other (specify) ☐ Other (specify)				
(a) SUBTOTAL of Itemized Independent Expenditures	3461.54				
(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.					
Bowen, Amanda, , , [Electronically Filed] Date Signature	10 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Olgitaturo					

Schedule E)	PAGE 4 OF 6 FOR SE OF FORM 24/48				
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼				
PACRONYM	C C00646877				
Check if 24-hour report 48-hour report New report Amends report filed on	M / D = D / Y = Y = Y				
	f Public Distribution/Dissemination				
	10 08 2020				
Mailing Address 1050 Connecticut Ave NW Amoun	nt				
# 66016					
City State Zip Code	45.69				
Date o	action ID: VVAHVAQAMR3 f Disbursement or Obligation				
Purpose of Expenditure Transcription Service - Estimate Category/ Type	M / D D / Y Y Y Y Y				
Name of Federal Candidate X Support Office Sought	: House District: 00				
BIDEN, JOSEPH R JR, , ,					
Calendar Year-To-Date Disbursement					
Per Election for Office Sought 8339230.56 2020	her (specify) ▶				
	of Public Distribution/Dissemination				
	10 08 2020				
Mailing Address 1050 Connecticut Ave NW	nt				
# 66016					
City State Zip Code	4.15				
	ction ID: VVAHVAQAMS1 of Disbursement or Obligation				
Purpose of Expenditure Transcription Service - Estimate Category/ Type	M / D D / Y H Y H Y H Y				
Name of Federal Candidate X Support Office Sought	t: House District: 00				
WARNOCK, RAPHAEL, , , Oppose Preside	ent Senate State: GA				
Calendar Year-To-Date Per Election for Office Sought Disbursement 2020					
	ther (specify)				
(a) SUBTOTAL of Itemized Independent Expenditures	49.84				
(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 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.					
Bowen, Amanda, , , [Electronically Filed] Date 10	09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Signature					

	edule E)	IDENT EXICID	ITONES		PAGE 5 OF 6 FOR SE OF FORM 24/48
	E OF COMMITTEE (In Full)			F	EC IDENTIFICATION NUMBER ▼
PA	CRONYM			[C C00646877
Chec	k if 24-hour report X 48-hour rep	ort New rep	ort Amends repo	ort filed on	M / D = D / Y = Y = Y
F	Full Name of Payee			Date of	Public Distribution/Dissemination
	Lockwood Strategy Lab			1	0 08 2020
	Mailing Address 1050 Connecticut Ave NW			Amount	
L	# 66016				
- 1	Dity	State	Zip Code	Tuenes	4.15
	Washington	DC	20036-5303		ction ID : VVAHVAQAMT9 Disbursement or Obligation
	Purpose of Expenditure Transcription Service - Estimate		Category/ Type	М	M / D D / Y Y Y Y
1	Name of Federal Candidate		X Support	Office Sought:	House District: 00
1	OSSOFF, T. JONATHAN, , ,		Oppose	Presiden	t Senate State: GA
	Calendar Year-To-Date Per Election for Office Sought		3558.84	Disbursement 2020 Oth	For: Primary X General er (specify) ▶
Ī	Full Name of Payee			Date of	Public Distribution/Dissemination
	Lockwood Strategy Lab				0 08 2020
1	Mailing Address 1050 Connecticut Ave N	N		A	
Т	# 66016			Amount	
(City	State	Zip Code		21.42
	Washington	DC	20036-5303		tion ID: VVAHVAQAMV7 Disbursement or Obligation
	Purpose of Expenditure Graphic Production - Estimate		Category/ Type	M	M / D D / Y Y Y Y
1	Name of Federal Candidate		✗ Support	Office Sought:	House District: 00
	BIDEN, JOSEPH R JR, , ,		Oppose	x Presiden	senate State:00
	Calendar Year-To-Date Per Election for Office Sought		8339230.56	Disbursement 2020 Oth	For: Primary General er (specify)
_					() //
(a) SUBTOTAL of Itemized Independent Exp	enditures		•	25.57
(b) SUBTOTAL of Unitemized Independent Expenditures					
(с) TOTAL Independent Expenditures			•	7
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.					
	Bowen, Amanda, , ,	[Electron	ically Filed] Date		09 / 2020
Ur	nder penalty of perjury I certify that the incth, or at the request or suggestion of, any arty committee) any political party committee	dependent expenditures candidate or authorized e or its agent.	reported herein were I committee or agent o	not made in coof either, or (if th	e reporting entity is not a politic

Schedule E)	PAGE 6 OF 6 FOR SE OF FORM 24/48				
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼				
PACRONYM	C C00646877				
Check if 24-hour report X 48-hour report New report A	Amends report filed on				
Full Name of Payee	Date of Public Distribution/Dissemination				
Lockwood Strategy Lab	10 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Mailing Address 1050 Connecticut Ave NW	Amount				
# 66016	01.00				
City State Zip Code Washington DC 20036-53					
Purpose of Expenditure Cotogon	Date of Disbursement or Obligation				
Graphic Production - Estimate	pry/ ype // Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Name of Federal Candidate	Support Office Sought: House District: 00				
WARNOCK, RAPHAEL, , ,	Oppose President Senate State: GA				
Calendar Year-To-Date Per Election for Office Sought 3558.3	Disbursement For: Primary Seneral 2020 Other (specify) ▶				
Full Name of Payee	Date of Public Distribution/Dissemination				
Lockwood Strategy Lab	10 08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Mailing Address 1050 Connecticut Ave NW					
# 66016	Amount				
City State Zip Code	de 21.42				
Washington DC 20036-5	5303 Transaction ID : VVAHVAQAMX3 Date of Disbursement or Obligation				
Purpose of Expenditure Graphic Production - Estimate Categor Typ					
Name of Federal Candidate	Support Office Sought: House District: 00				
OSSOFF, T. JONATHAN, , ,	Oppose President X Senate State: GA				
Calendar Year-To-Date Per Election for Office Sought 3558.	Disbursement For: Primary General 2020 Other (specify)				
	Committee (cpcm)				
(a) SUBTOTAL of Itemized Independent Expenditures	42.84				
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures	22918.26				
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.					
Bowen, Amanda, , , [Electronically Filed] Signature	ed] Date 10 09 2020				
Signature					