## 10/31/2018 16 : 26

## Image# 201810319133568843 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

(Schedule E) PAGE 1 OF 3 FOR SE OF FORM 24/48							
N	EW REPUBLICAN PAC				C C00544544		
Che	eck if 🗶 24-hour report 📃 48-hour	report X New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y		
	Full Name of Payee MATSON MEDIA LLC			Da	ate of Public Distribution/Dissemination		
					10 / D D / Y Y Y Y 10 30 2018		
	Mailing Address 1201 HAMPTON STRE	ET		Ar	mount		
	SUITE 3B	01-1-		— – F	0040070.00		
	City COLUMBIA	State SC	Zip Code 29201		3640876.08 ransaction ID : SE.1		
					ate of Disbursement or Obligation		
	Purpose of Expenditure MEDIA PLACEMENT		Category/ Type		M M / D D / Y Y Y Y 10 26 / 2018		
	Name of Federal Candidate		Support	Office So	ought: House District:		
	NELSON, BILL, , ,		X Oppose	Pre	esident 🗴 Senate State: <u>FL</u>		
	Calendar Year-To-Date				ment For: Primary X General		
	Per Election for Office Sought	2	29467971.00	2018	Other (specify)		
	Full Name of Payee			Da	ate of Public Distribution/Dissemination		
	MATSON MEDIA LLC				10 / Y Y Y Y 10 30 2018		
	Mailing Address 1201 HAMPTON STR	RET		Δ	mount		
	SUITE 3B				mount		
	City		Zip Code		3841218.09		
	COLUMBIA	SC	29201		ansaction ID : SE.2 Date of Disbursement or Obligation		
	Purpose of Expenditure MEDIA PLACEMENT		Category/ Type		M = M / D D / Y Y Y Y 10 29 2018		
	Name of Federal Candidate		Support	Office Sc	ought: House District:		
	NELSON, BILL, , ,		× Oppose		resident X Senate State: FL		
	Calendar Year-To-Date				ement For: Primary X General		
	Per Election for Office Sought	2	29467971.00	2018	Other (specify)		
				_			
(a) SUBTOTAL of Itemized Independent Expenditures 7482094.17							
(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.							
	DOZIER, JULIE, , ,	[Electron	iaally Filadi	M			
	Signature		<i>ically Filed]</i> Date	te 10	31 2018		

## Image# 201810319133568844 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

(Sc	hedule E)	PAGE 2 OF 3 FOR SE OF FORM 24/48				
	ME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼				
N	EW REPUBLICAN PAC					
		C C00544544				
Check if X 24-hour report 48-hour report New report Amends report filed on / Y Y Y Y Y						
	Full Name of Payee MATSON MEDIA LLC	Date of Public Distribution/Dissemination				
	Mailing Address 1201 HAMPTON STREET	10 30 2018 Amount				
	SUITE 3B					
	City State Zip Code	291000.00				
	COLUMBIA SC 29201	Transaction ID : SE.3 Date of Disbursement or Obligation				
	MEDIA PLACEMENT Category/ Type	10 / D D / Y Y Y Y 2018				
	Name of Federal Candidate Support Office	e Sought: House District:				
	NELSON, BILL, , ,	President Senate State: FL				
	Calendar Year-To-Date Per Election for Office Sought 29467971.00	ursement For: Primary X General				
	Full Name of Payee MATSON MEDIA LLC	Date of Public Distribution/Dissemination				
	Mailing Address 1201 HAMPTON STREET					
	SUITE 3B	Amount				
	City State Zip Code	926125.65				
	COLUMBIA SC 29201	Transaction ID : SE.4 Date of Disbursement or Obligation				
	Purpose of Expenditure MEDIA PLACEMENT Category/ Type	M M / D D / Y Y Y Y 10 / 30 / 2018				
	Name of Federal Candidate Support Office	e Sought: House District:				
	NELSON, BILL, , ,	President Senate State: FL				
	Calendar Year-To-Date Per Election for Office Sought 29467971.00	ursement For: Primary				
(a) SUBTOTAL of Itemized Independent Expenditures						
(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.						
	240	10 31 Y Y Y Y 2018				
	Signature					

## Image# 201810319133568845 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

(Schedule E)	PAGE 3 OF 3 FOR SE OF FORM 24/48				
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER V				
NEW REPUBLICAN PAC	C C00544544				
	C 200344344				
Check if 🗶 24-hour report 🗌 48-hour report 🗶 New report 🗌 Amends report filed on	M = M / D = D / Y = Y = Y = Y				
Full Name of Payee Da	te of Public Distribution/Dissemination				
Mailing Address 201 N UNION ST	10 / D D / Y Y Y Y 2018				
SUITE 200	nount				
City State Zip Code	85148.00				
ALEXANDRIA VA 22314 Tra	ansaction ID : SE.5 te of Disbursement or Obligation				
Purpose of Expenditure MEDIA PRODUCTION Category/ Type	10 / D D / Y Y Y Y 2018				
Name of Federal Candidate Support Office Sou	ught: House District:				
NELSON, BILL, , ,	sident X Senate State: FL				
Calendar Year-To-Date Disbursen 29467971.00	nent For: Primary				
Full Name of Payee Da	te of Public Distribution/Dissemination				
Mailing Address An	nount				
City State Zip Code					
Sidle Zip Code					
Burnaga of Expanditura	ate of Disbursement or Obligation				
Type					
Name of Federal Candidate Support Office Sol	ught: House District:				
Oppose Pre	sident Senate State:				
Calendar Year-To-Date Disbursen	nent For: Primary General				
Per Election for Office Sought	Other (specify) ►				
(a) SUBTOTAL of Itemized Independent Expenditures	85148.00				
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures	8784367.82				
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.					
DOZIER, JULIE, , , [Electronically Filed] Date 10	/ D D / Y Y Y Y Y 31 2018				
Signature					