Image# 15970341852

04/14/2015 15 : 03

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

NAME OF COMMITTEE (In Full)
Physicians for a Better Healthcare Future

FEC IDENTIFICATION NUMBER ▼
C C00492553

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
DMI

Mailing Address 18 Rancho Circle

City: Lake Forest | State: CA | Zip Code: 92688

Purpose of Expenditure
production and mailing of flyer

Category/ Type: 004

Date of Public Distribution/Dissemination: 08 / 23 / 2014

Amount: 11000.00

Transaction ID : SE.4105

Date of Disbursement or Obligation: 08 / 21 / 2014

Name of Federal Candidate
Brian Nestande

☒ Support ☐ Oppose

Office Sought: ☒ House ☐ President ☐ Senate
District: 36
State: CA

Calendar Year-To-Date Per Election for Office Sought: 11000.00

Disbursement For: ☐ Primary ☒ General 2014 ☐ Other (specify) ▶

Full Name of Payee

Mailing Address

City | State | Zip Code

Purpose of Expenditure

Category/ Type

Date of Public Distribution/Dissemination: M M / D D / Y Y Y Y

Amount

Date of Disbursement or Obligation: M M / D D / Y Y Y Y

Name of Federal Candidate

☐ Support ☐ Oppose

Office Sought: ☐ House ☐ President ☐ Senate
District:
State:

Calendar Year-To-Date Per Election for Office Sought

Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 11000.00

(b) SUBTOTAL of Unitemized Independent Expenditures ▶

(c) TOTAL Independent Expenditures ▶ 11000.00

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.

Donald H. Crane ***[Electronically Filed]***
Signature

Date: 04 / 14 / 2015