24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
L PAC	
	C C00519413
Check if 24-hour report 48-hour report New report Amends report file	ed on Mam / Dab / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Facebook	M M / D D / Y Y Y Y
Mailing Address 1 Hacker Way	08 02 2018 Amount
City State Zip Code	2250.00
Menlo Park CA 94025-1456	Transaction ID : VNV499XHQ10 Date of Disbursement or Obligation
Purpose of Expenditure Online Advertising Category/ Type	08
Name of Federal Candidate Support Offi	ice Sought: House District: 00
VUKMIR, LEAH, , ,	President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought Dis 2250.00	bursement For: ■ Primary General Other (specify) ■
Full Name of Payee	Date of Public Distribution/Dissemination
	M M / D D / Y Y Y Y
Mailing Address	Amount
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Off	ice Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Dis	sbursement For: Primary General
Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	2250.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	2250.00
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.	
Rosen, Hilary, , , [Electronically Filed] Date	08 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	