

# FEC FORM 5

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

|   |  |  |  |
|---|--|--|--|
| 1. (a) Name of Individual, Organization or Corporation<br><b>THE ADVOCACY FUND</b>                                      |  |  | 3. FEC Identification Number<br><b>C</b> C90011750 |
| (b) Address (number and street) <input type="checkbox"/> check if different than previously reported<br>1012 TORNEY AVE |  |  |  |
| (c) City, State and ZIP Code<br>SAN FRANCISCO CA 94129  |  |  |  |
| 2. Occupation and Name of Employer (for Individual Filers Only)   |  |  |  |

4. TYPE OF REPORT (check appropriate boxes):

- (a)  April 15 Quarterly Report
- July 15 Quarterly Report  24-Hour Report
- October 15 Quarterly Report  48-Hour Report
- January 31 Year-End Report

b) Is this Report an amendment?  No  Yes, it amends the report filed on  /  /

5. COVERING PERIOD: FROM  /  /  THROUGH  /  /

6. TOTAL CONTRIBUTIONS.....

7. 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 any political party committee or its agent.

|   |                           |             |
|---|---------------------------|-------------|
| <b>TYPE OR PRINT NAME OF PERSON COMPLETING FORM</b> | <b>SIGNATURE</b>          | <b>DATE</b> |
| Keton, Amanda, , ,                                  | <i>Keton, Amanda, , ,</i> | 01/18/2018  |

[Electronically Filed]

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
THE ADVOCACY FUND

|  |          |  |  |
|--|----------|--|--|
| Full Name (Last, First, Middle Initial) of Payee<br>American Airlines              |          | Date of Public Distribution/Dissemination<br>12 / 07 / 2017  |  |
| Mailing Address PO Box 619616  |          | Amount<br>1288.82  |  |
| City DFW Airport   | State TX | Zip Code 02138   |  |
| Purpose of Expenditure<br>Travel   |          | Category/Type<br>002   | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President<br>State: AL District: _____ |
| Name of Federal Candidate Supported or Opposed by Expenditure:<br>JONES, DOUG, , , |          | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose   |  |
| Calendar Year-To-Date Per Election for Office Sought<br>42428.55                   |          | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special-General |  |

Transaction ID : F57.4228

|  |          |  |  |
|--|----------|--|--|
| Full Name (Last, First, Middle Initial) of Payee<br>Budget Rental Car              |          | Date of Public Distribution/Dissemination<br>12 / 07 / 2017  |  |
| Mailing Address 6 Silvan Way   |          | Amount<br>184.16   |  |
| City Parsippany  | State NJ | Zip Code 07054   |  |
| Purpose of Expenditure<br>Travel   |          | Category/Type<br>002   | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President<br>State: AL District: _____ |
| Name of Federal Candidate Supported or Opposed by Expenditure:<br>JONES, DOUG, , , |          | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose   |  |
| Calendar Year-To-Date Per Election for Office Sought<br>41139.73                   |          | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special-General |  |

Transaction ID : F57.4226

|  |          |  |  |
|--|----------|--|--|
| Full Name (Last, First, Middle Initial) of Payee<br>Country Inn and Suites         |          | Date of Public Distribution/Dissemination<br>12 / 07 / 2017  |  |
| Mailing Address 3465 Ross Clark Circle   |          | Amount<br>561.91   |  |
| City Dothan  | State AL | Zip Code 36303   |  |
| Purpose of Expenditure<br>Travel   |          | Category/Type<br>002   | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President<br>State: AL District: _____ |
| Name of Federal Candidate Supported or Opposed by Expenditure:<br>JONES, DOUG, , , |          | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose   |  |
| Calendar Year-To-Date Per Election for Office Sought<br>40955.57                   |          | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special-General |  |

Transaction ID : F57.4224

|   |         |
|---|---------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....                                    | 2034.89 |
| (b) SUBTOTAL of Unitemized Independent Expenditures .....                                 |         |
| (c) TOTAL Independent Expenditures.....<br>(carry total from last page forward to Line 7) |         |

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
THE ADVOCACY FUND

|  |                      |  |                              |
|--|----------------------|--|------------------------------|
| Full Name (Last, First, Middle Initial) of Payee<br>Delta Airlines Inc             |                      | Date of Public Distribution/Dissemination<br>12 / 07 / 2017  |                              |
| Mailing Address PO Box 20980 Dept 980  |                      | Amount<br>354.60   |                              |
| City Atlanta   | State GA             | Zip Code 30320-2980  | Transaction ID : F57.4217    |
| Purpose of Expenditure<br>Travel   | Category/Type<br>002 | Office Sought:<br><input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President             | State: AL<br>District: _____ |
| Name of Federal Candidate Supported or Opposed by Expenditure:<br>JONES, DOUG, , , |                      | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose   |                              |
| Calendar Year-To-Date Per Election for Office Sought<br>40393.66                   |                      | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) _____ |                              |

|  |                      |  |                              |
|--|----------------------|--|------------------------------|
| Full Name (Last, First, Middle Initial) of Payee<br>MacMail Advertising, LLC       |                      | Date of Public Distribution/Dissemination<br>12 / 07 / 2017  |                              |
| Mailing Address 2328 Southampton Dr  |                      | Amount<br>1505.00  |                              |
| City Hoover  | State AL             | Zip Code 35226   | Transaction ID : F57.4235    |
| Purpose of Expenditure<br>Printing   | Category/Type<br>006 | Office Sought:<br><input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President             | State: AL<br>District: _____ |
| Name of Federal Candidate Supported or Opposed by Expenditure:<br>JONES, DOUG, , , |                      | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose   |                              |
| Calendar Year-To-Date Per Election for Office Sought<br>43940.15                   |                      | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) _____ |                              |

|  |                      |  |                              |
|--|----------------------|--|------------------------------|
| Full Name (Last, First, Middle Initial) of Payee<br>Relay                          |                      | Date of Public Distribution/Dissemination<br>12 / 05 / 2017  |                              |
| Mailing Address 1330 Broadway 3rd Fl   |                      | Amount<br>15.35  |                              |
| City Oakland   | State CA             | Zip Code 94612   | Transaction ID : F57.4230    |
| Purpose of Expenditure<br>Telecommunication Services                               | Category/Type<br>006 | Office Sought:<br><input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President             | State: AL<br>District: _____ |
| Name of Federal Candidate Supported or Opposed by Expenditure:<br>JONES, DOUG, , , |                      | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose   |                              |
| Calendar Year-To-Date Per Election for Office Sought<br>40039.06                   |                      | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) _____ |                              |

|   |         |
|---|---------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....                                    | 1874.95 |
| (b) SUBTOTAL of Unitemized Independent Expenditures .....                                 |         |
| (c) TOTAL Independent Expenditures.....<br>(carry total from last page forward to Line 7) |         |

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
THE ADVOCACY FUND

|  |                          |  |                              |
|--|--------------------------|--|------------------------------|
| Full Name (Last, First, Middle Initial) of Payee<br>Relay                          |                          | Date of Public Distribution/Dissemination<br>12 / 07 / 2017  |                              |
| Mailing Address 1330 Broadway 3rd Fl   |                          | Amount<br>6.60   |                              |
| City<br>Oakland  | State<br>CA              | Zip Code<br>94612  | Transaction ID : F57.4232    |
| Purpose of Expenditure<br>Telecommunication Services                               | Category/<br>Type<br>006 | Office Sought:<br><input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President             | State: AL<br>District: _____ |
| Name of Federal Candidate Supported or Opposed by Expenditure:<br>JONES, DOUG, , , |                          | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose   |                              |
| Calendar Year-To-Date Per Election for Office Sought<br>42435.15                   |                          | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) _____ |                              |

|  |                   |   |                                 |
|--|-------------------|---|---------------------------------|
| Full Name (Last, First, Middle Initial) of Payee               |                   | Date of Public Distribution/Dissemination   |                                 |
| Mailing Address  |                   | Amount  |                                 |
| City   | State             | Zip Code  |                                 |
| Purpose of Expenditure   | Category/<br>Type | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President             | State: _____<br>District: _____ |
| Name of Federal Candidate Supported or Opposed by Expenditure: |                   | Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose   |                                 |
| Calendar Year-To-Date Per Election for Office Sought           |                   | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) _____ |                                 |

|  |                   |   |                                 |
|--|-------------------|---|---------------------------------|
| Full Name (Last, First, Middle Initial) of Payee               |                   | Date of Public Distribution/Dissemination   |                                 |
| Mailing Address  |                   | Amount  |                                 |
| City   | State             | Zip Code  |                                 |
| Purpose of Expenditure   | Category/<br>Type | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President             | State: _____<br>District: _____ |
| Name of Federal Candidate Supported or Opposed by Expenditure: |                   | Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose   |                                 |
| Calendar Year-To-Date Per Election for Office Sought           |                   | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) _____ |                                 |

|   |         |
|---|---------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....                                    | 6.60    |
| (b) SUBTOTAL of Unitemized Independent Expenditures .....                                 |         |
| (c) TOTAL Independent Expenditures.....<br>(carry total from last page forward to Line 7) | 3916.44 |