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

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
MOVEON.ORG POLITICAL ACTION	C C00341396
	M M / D D / Y Y Y Y
Check if 24-hour report 48-hour report New report Amends report f	filed on
Full Name of Payee The Spoken Hub	Date of Public Distribution/Dissemination
<u>'</u>	10 17 2014
Mailing Address 50 W 17th St FI 9	Amount
City State Zip Code	18361.52
New York NY 10011	Transaction ID : SE.46659 Date of Disbursement or Obligation
Purpose of Expenditure Phones Category/ Type	10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support O	Office Sought: House District: 00
BRUCE L BRALEY Oppose	President Senate State: IA
Calcilidat Ical 10 Date	oisbursement For: Primary
Full Name of Payee The Spoken Hub	Date of Public Distribution/Dissemination
	10 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 50 W 17th St FI 9	Amount
City State Zip Code	25447.50
New York NY 10011	Transaction ID : SE.46660 Date of Disbursement or Obligation
Purpose of Expenditure Phones Category/ Type	10 17 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Office Sought: House District: 00
BRUCE L BRALEY Oppose	President Senate State: IA
	Disbursement For: Primary
(a) CURTOTAL of Itemized Independent Europeditures	42000 00
(a) SUBTOTAL of Itemized Independent Expenditures	43809.02
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	43809.02
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.	
Tom Matzzie [Electronically Filed] Date	10 17 2014
Signature	