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

Schedule E)	FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
For Our Future	C C00620971	
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 For Our Future Action Fund	Date of Public Distribution/Dissemination	
	09 01 2020	
Mailing Address PO Box 34390	Amount	
City State Zip Code	2604.20	
Washington DC 20043-4390	Transaction ID: VSG8MA17400 Date of Disbursement or Obligation	
Purpose of Expenditure Phone Banking Services from 9/1-9/30 (Estimate)  Category/ Type	M   M	
Name of Federal Candidate Support Office	Sought: House District:	
TRUMP, DONALD J., , ,	President Senate State:	
Calendar Year-To-Date Per Election for Office Sought  Disbut 2020	rsement For:  Primary	
Full Name of Payee	Date of Public Distribution/Dissemination	
For Our Future Action Fund	09	
Mailing Address PO Box 34390	Amount	
City State Zip Code	38420.00	
Washington DC 20043-4390	Transaction ID: VSG8MA174E0  Date of Disbursement or Obligation	
Purpose of Expenditure Phone Banking Services from 9/1-9/30 (Estimate)  Category/ Type	M M / D D / Y Y Y Y	
Name of Federal Candidate    X   Support   Office	Sought: House District:	
BIDEN, JOSEPH R JR, , ,	President Senate State:	
Calendar Year-To-Date Per Election for Office Sought  Disbu 2020	rsement For: Primary   General  Other (specify)   ☐	
(a) SUBTOTAL of Itemized Independent Expenditures	41024.20	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	1 7 1 7 1 7	
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.		
Stoltz, Gail, , , [Electronically Filed] Date 05	9 03 2020	
Signature		

Schedule E)	ADITORIES	PAGE 2 OF 17 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
For Our Future		C C00620971
Check if 24-hour report <b>X</b> 48-hour report <b>N</b> New	report Amends report file	d on
Full Name of Payee For Our Future Action Fund		Date of Public Distribution/Dissemination
Mailing Address PO Box 34390		09 02 2020 Amount
City State	Zip Code	50137.87
Washington DC	20043-4390	Transaction ID : VSG8MA174K0  Date of Disbursement or Obligation
Purpose of Expenditure Phone Banking Services from 9/2-9/30 (Estimate)	Category/ Type	M M / D D / Y Y Y Y
Name of Federal Candidate	Support Office	ce Sought: House District:
TRUMP, DONALD J., , ,	X Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	367471.42 Dist 202	oursement For: Primary General  Other (specify)
Full Name of Payee		Date of Public Distribution/Dissemination
For Our Future Action Fund  Mailing Address PO Box 34390		08 / 28 / 2020
Malling Address PO Box 34390		Amount
City State	Zip Code	310.94
Washington DC	20043-4390	Transaction ID: VSG8MA173V0 Date of Disbursement or Obligation
Purpose of Expenditure Phone Banking Services on 8/28 (Estimate)	Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate	Support Offi	ce Sought: House District:
TRUMP, DONALD J., , ,	X Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	367471.42 Dis	oursement For: Primary General Other (specify)
	<u> </u>	
(a) SUBTOTAL of Itemized Independent Expenditures	•	50448.81
(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.		
Stoltz, Gail, , , [Elect	tronically Filed] Date	09 03 2020
Olymator		

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

Schedule E)		PAGE 3 OF 17 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
For Our Future		C C00620971
Check if 24-hour report X 48-hour report No.	ew report Amends report	filed on Mam / Dad / Yayayay
Full Name of Payee For Our Future Action Fund		Date of Public Distribution/Dissemination
Mailing Address PO Box 34390		09
City State	Zip Code	2681.86
Washington DC	20043-4390	Transaction ID : VSG8MA17441 Date of Disbursement or Obligation
Purpose of Expenditure Phone Banking Services from 9/1-9/15 (Estimate)	Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate	Support	Office Sought: House District:
TRUMP, DONALD J., , ,	<b>X</b> Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary
Full Name of Payee For Our Future Action Fund  Mailing Address PO Box 34390		Date of Public Distribution/Dissemination  09  01  Amount
City State Washington DC	Zip Code 20043-4390	381.34  Transaction ID : VSG8MA17491  Date of Disbursement or Obligation
Purpose of Expenditure Phone Banking Services on 9/1 (Estimate)	Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate	Support	Office Sought: House District:
TRUMP, DONALD J., , ,	<b>x</b> Oppose	resident Senate State:
Calendar Year-To-Date Per Election for Office Sought		Disbursement For:  Primary  General   2020
(a) SUBTOTAL of Itemized Independent Expenditures		3063.20
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expen with, or at the request or suggestion of, any candidate or autiparty committee) any political party committee or its agent.		
	Electronically Filed] Date	09 03 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		

Schedule E)	PAGE 4 OF 17 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
For Our Future	C C00620971	
Check if 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y	
Full Name of Payee Date	of Public Distribution/Dissemination	
NGP VAN, Inc.	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address PO Box 392264 Amo	unt	
City State Zip Code	1320.00	
Date	saction ID : VSG8MA174Q1 of Disbursement or Obligation	
Purpose of Expenditure Phone Bank (Estimate)  Category/ Type	M = M / D = D / Y = Y = Y	
Name of Federal Candidate Support Office Sough	ht: House District:	
TRUMP, DONALD J., , ,	dent Senate State:	
Calendar Year-To-Date Per Election for Office Sought  Disbursement 2020	ent For:  Primary	
	of Public Distribution/Dissemination	
For Our Future Action Fund	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address PO Box 34390 Amo	punt	
City State Zip Code	19210.00	
	saction ID : VSG8MA174D2 of Disbursement or Obligation	
Purpose of Expenditure Phone Banking Services from 9/1-9/30 (Estimate)  Category/ Type	M = M / D = D / Y = Y = Y	
Name of Federal Candidate Support Office Sough	ght: House District:	
TRUMP, DONALD J., , ,	dent Senate State:	
Calendar Year-To-Date Per Election for Office Sought  Disburseme 2020	ent For: Primary <b>X</b> General  Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures	20530.00	
	2030.00	
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7	
(c) TOTAL Independent Expenditures	7	
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.		
Stoltz, Gail, , ,  [Electronically Filed] Date 09	03 2020	

Schedule E)	PAGE 5 OF 17 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
For Our Future	C C00620971	
Check if 24-hour report X 48-hour report New report A	Amends report filed on M M M / D D / Y Y Y Y Y	
Full Name of Payee	Date of Public Distribution/Dissemination	
For Our Future Action Fund	09 02 2020	
Mailing Address PO Box 34390	Amount	
City State Zip Code	50137.87	
Washington DC 20043-438	Transaction ID : VSG8MA174J2 Date of Disbursement or Obligation	
Purpose of Expenditure Phone Banking Services from 9/2-9/30 (Estimate)  Category Type		
Name of Federal Candidate	Support Office Sought: House District:	
BIDEN, JOSEPH R JR, , ,	Oppose President Senate State:	
Calendar Year-To-Date Per Election for Office Sought 367471.4	Disbursement For: Primary General 2020 Other (specify)	
Full Name of Payee	Date of Public Distribution/Dissemination	
For Our Future Action Fund	08 28 2020	
Mailing Address PO Box 34390	Amount	
City State Zip Code	310.94	
Washington DC 20043-43	Transaction ID : VSG8MA173T2 Date of Disbursement or Obligation	
Purpose of Expenditure Phone Banking Services on 8/28 (Estimate)  Category Type		
Name of Federal Candidate	Support Office Sought: House District:	
BIDEN, JOSEPH R JR, , ,	Oppose President Senate State:	
Calendar Year-To-Date Per Election for Office Sought 367471.4	Disbursement For: Primary General  Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	50448.81	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	<b>)</b>	
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.		
Stoltz, Gail, , ,  [Electronically Filed] Signature	Date 09 03 2020	

Schedule E)	PAGE 6 OF 17 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
For Our Future	C C00620971	
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 Date	e of Public Distribution/Dissemination	
For Our Future Action Fund	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address PO Box 34390 Amo	ount	
City State Zip Code	2604.20	
	nsaction ID : VSG8MA173Z2 e of Disbursement or Obligation	
Purpose of Expenditure Phone Banking Services from 9/1-9/30 (Estimate)  Category/ Type	M = M / D = D / Y = Y = Y	
Name of Federal Candidate    X   Support   Office Sough	aht: House District:	
BIDEN, JOSEPH R JR, , , Oppose Presi		
Calendar Year-To-Date Per Election for Office Sought  Disbursement 2020	ent For: Primary <b>X</b> General Other (specify) ▶	
	e of Public Distribution/Dissemination	
For Our Future Action Fund	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address PO Box 34390 Amo	ount	
City State Zip Code	2681.86	
Date	saction ID : VSG8MA17433 e of Disbursement or Obligation	
Purpose of Expenditure Phone Banking Services from 9/1-9/15 (Estimate)  Category/ Type	M = M / D = D / Y = Y = Y	
Name of Federal Candidate Support Office Sou	ght: House District:	
BIDEN, JOSEPH R JR, , ,	ident Senate State:	
Calendar Year-To-Date Per Election for Office Sought  Disburseme 2020	ent For: Primary <b>X</b> General  Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures	5286.06	
	7 7 7	
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7	
(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.		
Stoltz, Gail, , ,  [Electronically Filed] Date 09	03 2020	
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Schedule E)	PAGE 7 OF 17 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
For Our Future	C C00620971	
Check if 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y	
Full Name of Payee Date	of Public Distribution/Dissemination	
	09 01 7 2020	
Mailing Address PO Box 34390 Amou	unt	
City State Zip Code	381.33	
Date	saction ID : VSG8MA17483 of Disbursement or Obligation	
Purpose of Expenditure Phone Banking Services on 9/1 (Estimate)  Category/ Type	M = M / D = D / Y = Y = Y	
Name of Federal Candidate  X Support  Office Sough	ht: House District:	
BIDEN, JOSEPH R JR, , , Oppose Presid		
Calendar Year-To-Date Per Election for Office Sought  Disbursemer 2020	nt For:	
	of Public Distribution/Dissemination	
	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address PO Box 392264 Amou	unt	
City State Zip Code	1320.00	
Date	action ID: VSG8MA174P3 of Disbursement or Obligation	
Purpose of Expenditure Phone Bank (Estimate)  Category/ Type	M = M / D = D / Y = Y = Y = Y	
Name of Federal Candidate Support Office Sough	ht: House District:	
BIDEN, JOSEPH R JR, , , Oppose President Presi	dent Senate State:	
Calendar Year-To-Date Per Election for Office Sought  Disbursemer 2020	ont For: Primary ✗ General  Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures	1701.33	
	7 7	
(b) SUBTOTAL of Unitemized Independent Expenditures	4-1-4-1-4-1	
(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.		
Stoltz, Gail, , ,  [Electronically Filed] Date 09	03 2020	
Olymatul <del>C</del>		

Schedule E)	PAGE 8 OF 17 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
For Our Future	C C00620971	
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	
For Our Future Action Fund	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address PO Box 34390	nount	
City State Zip Code	19210.00	
	ansaction ID: VSG8MA174C4 te of Disbursement or Obligation	
Purpose of Expenditure Phone Banking Services from 9/1-9/30 (Estimate)  Category/ Type	M = M / D = D / Y = Y = Y = Y	
Name of Federal Candidate  X Support  Office Soi	ught: House District:	
RIDEN JOSEPH R IR	sident Senate State:	
Calendar Year-To-Date Per Election for Office Sought  Disbursen 2020	nent For:	
	ate of Public Distribution/Dissemination	
For Our Future Action Fund	M 09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address PO Box 34390	nount	
City State Zip Code	601.02	
Da	nsaction ID : VSG8MA174H4 ate of Disbursement or Obligation	
Purpose of Expenditure Digital Communications Services from 9/2-9/17 (Estimate)  Category/ Type	M = M / D = D / Y = Y = Y = Y	
Name of Federal Candidate Support Office So	ught: House District:	
TRUMP, DONALD J., , ,	sident Senate State:	
Calendar Year-To-Date Per Election for Office Sought  Disburser 2020	ment For:	
(a) SUBTOTAL of Itemized Independent Expenditures	19811.02	
(-)	13011.02	
(b) SUBTOTAL of Unitemized Independent Expenditures	45 1 45 1	
(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.		
Stoltz, Gail, , , [Electronically Filed] Date 09	03 2020	
- 9		

Schedule E)	ENDITORIES	PAGE 9 OF 17 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC	IDENTIFICATION NUMBER ▼
For Our Future	C	C00620971
Check if 24-hour report 48-hour report	ew report Amends report filed on	/ D = D / Y = Y = Y
Full Name of Payee	Date of Pu	blic Distribution/Dissemination
Facebook	M 08	/ D D / Y Y Y Y Y Y Y 2020
Mailing Address 1 Hacker Way	Amount	
City State	Zip Code	23.33
Menlo Park CA		n ID: VSG8MA173S4 Sbursement or Obligation
Purpose of Expenditure Digital Advertising (Estimate)	Category/ Type	/ D = D / Y = Y = Y
Name of Federal Candidate	Support Office Sought:	House District:
TRUMP, DONALD J., , ,	X Oppose X President	Senate State:
Calendar Year-To-Date Per Election for Office Sought	367471.42 Disbursement For 2020 Other	: Primary <b>x</b> General (specify) ▶
Full Name of Payee	Date of Pu	blic Distribution/Dissemination
Facebook	M 08	31 / 2020
Mailing Address 1 Hacker Way	Amount	
City State	Zip Code	840.00
Menlo Park CA		n ID: VSG8MA173Y4 sbursement or Obligation
Purpose of Expenditure Digital Advertising (Estimate)	Category/ Type	/ D = D / Y = Y = Y
Name of Federal Candidate	Support Office Sought:	House District:
TRUMP, DONALD J., , ,	X Oppose X President	Senate State:
Calendar Year-To-Date Per Election for Office Sought	367471.42 Disbursement For 2020 Other	: Primary ✗ General
(a) SUBTOTAL of Itemized Independent Expenditures		863.33
(a)		003.33
(b) SUBTOTAL of Unitemized Independent Expenditures		7 7 7
(c) TOTAL Independent Expenditures		7 9 0
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.		
Stoltz, Gail, , ,  Signature	Electronically Filed] Date 09 03	
Signature		

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

17 PAGE OF 10 FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ For Our Future C00620971 **✗** 48-hour report X New report Amends report filed on Check if 24-hour report Full Name of Payee Date of Public Distribution/Dissemination For Our Future Action Fund 01 2020 09 Mailing Address PO Box 34390 Amount State Zip Code City 3817.16 DC 20043-4390 Transaction ID: VSG8MA17425 Washington Date of Disbursement or Obligation Purpose of Expenditure Category/ Digital Communications Services from 9/1-9/30 (Estimate) Type Name of Federal Candidate × Support Office Sought: House District: PETERS, GARY, , , ΜI Oppose **X** Senate President State: Disbursement For: Primary **✗** General Calendar Year-To-Date 2020 10250.55 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination For Our Future Action Fund 01 2020 Mailing Address PO Box 34390 Amount City State Zip Code 2195.75 DC Transaction ID: VSG8MA17475 20043-4390 Washington Date of Disbursement or Obligation Purpose of Expenditure Category/ Phone Banking Services from 9/1-9/30 (Estimate) Type Name of Federal Candidate Support Office Sought: House District: TRUMP, DONALD J., , , X Oppose **X** President Senate State: . Disbursement For: Primary **X** General Calendar Year-To-Date 2020 367471.42 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 6012.91 (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. Stoltz, Gail, , , [Electronically Filed] 09 03 2020 Date Signature

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

	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
For Our Future	C C00620971
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	09 / 02 / 2020
Mailing Address 1 Hacker Way	Amount
City State Zip Code	834.00
Menlo Park CA 94025-1456	Transaction ID : VSG8MA174N5 Date of Disbursement or Obligation
Purpose of Expenditure Digital Advertising (Estimate)  Category/ Type	M M / D D / Y Y Y Y
Name of Federal Candidate Support Offi	ce Sought: House District:
TRUMP, DONALD J., , ,	President Senate State:
Calendar Year-To-Date Per Election for Office Sought  Disl 202	
	Other (specify) -
Full Name of Payee NGP VAN, Inc.	Date of Public Distribution/Dissemination
Mailing Address PO Box 392264	09 01 2020 Amount
City State Zip Code  Pittsburgh PA 15251-9264	21.00 Transaction ID: VSG8MA174B6
Purpose of Expenditure Phone Bank (Estimate)  Category/	Date of Disbursement or Obligation
Туре	
	ice Sought: House District:
TRUMP, DONALD J., , ,	President Senate State:
Calendar Year-To-Date Per Election for Office Sought  Dis 202	bursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	855.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not r with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	
Stoltz, Gail, , ,  [Electronically Filed] Date	09 03 2020
Signature	

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Schedule E)	PAGE 12 OF 17 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
For Our Future	C C00620971	
Check if 24-hour report	M = M / D = D / Y = Y = Y = Y	
	ate of Public Distribution/Dissemination	
For Our Future Action Fund	09 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address PO Box 34390	nount	
City State Zip Code	601.02	
	ansaction ID : VSG8MA174G6 ate of Disbursement or Obligation	
Purpose of Expenditure Digital Communications Services from 9/2-9/17 (Estimate)  Category/ Type	M = M / D = D / Y = Y = Y	
Name of Federal Candidate	ught: House District:	
RIDEN JOSEPH R IR	esident Senate State:	
Calendar Year-To-Date Per Election for Office Sought  Disburser 2020	ment For:	
	ate of Public Distribution/Dissemination	
Strive Digital LLC	08 / 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 1027 Grand St	mount	
Ste 28		
City State Zip Code	150.00	
	Insaction ID: VSG8MA173R6 ate of Disbursement or Obligation	
Purpose of Expenditure Digital Communications (Estimate)  Category/ Type	M = M / D = D / Y = Y = Y	
Name of Federal Candidate Support Office So	ought: House District:	
TRUMP, DONALD J., , ,	esident Senate State:	
Calendar Year-To-Date Per Election for Office Sought  Disburser 2020	ment For:  Primary <b>X</b> General  Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures	751.02	
(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.		
Stoltz, Gail, , ,   [Electronically Filed] Date 09	03 2020	
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# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

	include Ly	FOR SE OF FORM 24/48
	ME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Г	or Our Future	C C00620971
Ch	eck if 24-hour report 48-hour report New report Amends report filed	I on Mam / Dad / Yayayay
	Full Name of Payee	Date of Public Distribution/Dissemination
	NGP VAN, Inc.	08 28 2020
	Mailing Address PO Box 392264	Amount
	City State Zip Code	21.00
	Pittsburgh PA 15251-9264	Transaction ID : VSG8MA173X6 Date of Disbursement or Obligation
	Purpose of Expenditure Phone Bank (Estimate)  Category/ Type	M M / D D / Y Y Y Y
	Name of Federal Candidate Support Offic	e Sought: House District:
	TRUMP, DONALD J., , ,	President Senate State:
	Calendar Year-To-Date Per Election for Office Sought Disb 2020	
		U Other (specify) ►
	Full Name of Payee For Our Future Action Fund	Date of Public Distribution/Dissemination
	Mailing Address PO Box 34390	09 01 2020 Amount
	City State Zip Code	3817.16
	Washington DC 20043-4390	Transaction ID : VSG8MA17417 Date of Disbursement or Obligation
	Purpose of Expenditure Digital Communications Services from 9/1-9/30 (Estimate)  Category/ Type	M = M / D = D / Y = Y = Y
	Name of Federal Candidate Support Office	e Sought: House District:
	BIDEN, JOSEPH R JR, , , Oppose X	President Senate State:
	Calendar Year-To-Date Per Election for Office Sought  Disb 2020	ursement For: Primary
	(a) SUBTOTAL of Itemized Independent Expenditures	3838.16
	(c) TOTAL Independent Expenditures	
,	Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
		09 03 2020
	Signature	

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Schedule E)	PAGE 14 OF 17 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
For Our Future	C C00620971			
Check if 24-hour report 48-hour report New report Amends report	filed on			
Full Name of Payee For Our Future Action Fund	Date of Public Distribution/Dissemination			
Mailing Address PO Box 34390	09 01 2020 Amount			
City State Zip Code Washington DC 20043-4390	2195.74 Transaction ID : VSG8MA17467			
Purpose of Expenditure Phone Banking Services from 9/1-9/30 (Estimate)  Category/ Type	Date of Disbursement or Obligation			
Name of Fodoval Condidate	Office Sought: House District:			
BIDEN, JOSEPH R JR, , ,	President Senate State:			
Calcinal Ical lo Date	Disbursement For: Primary			
Full Name of Payee For Our Future Action Fund	Date of Public Distribution/Dissemination  09 01 01 02020			
Mailing Address PO Box 34390	Amount			
City State Zip Code Washington DC 20043-4390	38420.00 Transaction ID : VSG8MA174F8			
Washington DC 20043-4390  Purpose of Expenditure Phone Banking Services from 9/1-9/30 (Estimate)  Category/ Type	Date of Disbursement or Obligation			
Name of Federal Candidate Support C	Office Sought: House District:			
TRUMP, DONALD J., , ,	President Senate State:			
	Disbursement For:  Primary  General   2020  General   Other (specify) ▶			
(a) SUBTOTAL of Itemized Independent Expenditures	40615.74			
(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.				
Stoltz, Gail, , ,  [Electronically Filed] Date Signature	09 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			

Schedule E)	NDENT EXPEND	ITORES		PAGE 15 OF 17 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC	IDENTIFICATION NUMBER ▼
For Our Future			C	C00620971
Check if 24-hour report X 48-hour rep	oort X New rep	ort Amends repo	ort filed on	/ D = D / Y = Y = Y = Y
Full Name of Payee			Date of Pub	olic Distribution/Dissemination
Facebook			M M M 09	/ DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1 Hacker Way			Amount	
City	State	Zip Code		1666.00
Menlo Park	CA	94025-1456		n ID : VSG8MA174M8 bursement or Obligation
Purpose of Expenditure Digital Advertising (Estimate)		Category/ Type	M = M	/ D D / Y Y Y Y
Name of Federal Candidate		<b>✗</b> Support	Office Sought:	House District:
BIDEN, JOSEPH R JR, , ,		Oppose	<b>x</b> President	Senate State:
Calendar Year-To-Date Per Election for Office Sought		367471.42	Disbursement For: 2020 Other (	Primary <b>X</b> General specify) ▶
Full Name of Payee			Date of Pub	olic Distribution/Dissemination
Strive Digital LLC			M 08	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1027 Grand St			Amount	
Ste 28				
City Brooklyn	State NY	Zip Code 11211-1748		150.00 ID: VSG8MA173Q8
Purpose of Expenditure Digital Communications (Estimate)		Category/ Type	Date of Dis	bursement or Obligation
Name of Federal Candidate		<b>✗</b> Support	Office Sought:	House District:
BIDEN, JOSEPH R JR, , ,		Oppose	resident	Senate State:
Calendar Year-To-Date Per Election for Office Sought		367471.42	Disbursement For: 2020 Other (	Primary <b>✗</b> General specify) ▶
(a) SUBTOTAL of Itemized Independent Ex	penditures		. >	1816.00
(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.				
Stoltz, Gail, , ,	[Electron	ically Filed] Date	9 09 03	
Oignaturo				

Schedule E)	PAGE 16 OF 17 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
For Our Future	C C00620971			
Check if 24-hour report 48-hour report New report Ame	ends report filed on			
Full Name of Payee	Date of Public Distribution/Dissemination			
NGP VAN, Inc.	08 / 28 / 2020			
Mailing Address PO Box 392264	Amount			
City State Zip Code	21.00			
Pittsburgh PA 15251-9264	Transaction ID : VSG8MA173W8  Date of Disbursement or Obligation			
Purpose of Expenditure Phone Bank (Estimate)  Category/ Type	Mam / Dad / Yayayay			
Name of Federal Candidate	upport Office Sought: House District:			
BIDEN JOSEPH B JB	ppose X President Senate State:			
Calendar Year-To-Date Per Election for Office Sought 367471.42	Disbursement For:  Primary  General  2020  Other (specify) ▶			
Full Name of Payee	Date of Public Distribution/Dissemination			
For Our Future Action Fund	09 01 2020			
Mailing Address PO Box 34390	Amount			
City State Zip Code	1012.76			
Washington DC 20043-4390	Transaction ID: VSG8MA17459 Date of Disbursement or Obligation			
Purpose of Expenditure Digital Communications Services from 9/1-9/15 (Estimate)  Category/ Type	M = M / D = D / Y = Y = Y			
Name of Federal Candidate	upport Office Sought: House District:			
BIDEN, JOSEPH R JR, , ,	ppose President Senate State:			
Calendar Year-To-Date Per Election for Office Sought 367471.42	Disbursement For: Primary			
(a) SUBTOTAL of Itemized Independent Expenditures	4032.76			
(a) CODICIAL OF ROMEOU Mappendon Experiance	1033.76			
(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.				
Stoltz, Gail, , ,  [Electronically Filed] Signature	Date 09 03 2020			
Signaturo				

Schedule E)	PAGE 17 OF 17 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
For Our Future	C C00620971			
Check if 24-hour report 48-hour report New report Amends report filed	I on Man / Dab / Yayayay			
Full Name of Payee NGP VAN, Inc.	Date of Public Distribution/Dissemination			
Mailing Address PO Box 392264	09 01 / 2020			
Mailing Address PO Box 392264	Amount			
City State Zip Code	21.00			
Pittsburgh PA 15251-9264	Transaction ID : VSG8MA174A9 Date of Disbursement or Obligation			
Purpose of Expenditure Phone Bank (Estimate)  Category/ Type	M = M / D = D / Y = Y = Y			
Name of Federal Candidate Support Office	e Sought: House District:			
RIDEN JOSEDH D ID	President Senate State:			
Calendar Year-To-Date Per Election for Office Sought  Disbut 2020	ursement For: Primary <b>X</b> General  Other (specify) ▶			
Full Name of Payee	Date of Public Distribution/Dissemination			
Mailing Address	M M / D D / Y Y Y Y			
Walling / Addicoo	Amount			
City State Zip Code				
	Date of Disbursement or Obligation			
Purpose of Expenditure  Category/ Type	M M M / D D / Y Y Y Y Y			
Name of Federal Candidate Support Office	e Sought: House District:			
Oppose	President Senate State:			
Calendar Year-To-Date Per Election for Office Sought	ursement For: Primary General  Other (specify) ▶			
(a) SUBTOTAL of Itemized Independent Expenditures	21.00			
(b) SUBTOTAL of Unitemized Independent Expenditures	1 7 1 7 1 7			
(c) TOTAL Independent Expenditures	248120.35			
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.				
[Electronically Filed] Date 0	09 03 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Signature				