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 ▼
Standing up for California's Middle Class	
	C C00572610
Check if X 24-hour report 48-hour report New report X Amends report filed	d on 11 04 2016
Full Name of Payee AKPD Message & Media LLC	Date of Public Distribution/Dissemination
Mailing Address 730 North Franklin Street	11 03 2016
Suite 404	Amount
City State Zip Code	104861.33
Chicago IL 60654	Transaction ID : EDT.E.13 Date of Disbursement or Obligation
Purpose of Expenditure Television Advertisement and Production Category/ Type 24E	11 / D D / Y Y Y Y 1
Name of Federal Candidate Support Office	e Sought: House District:
Harris, Kamala, , , Oppose	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought Disb 2016	ursement For: Primary ★ General Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
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 Office	ee Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	oursement For: Primary General
	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	104861.33
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	104861.33
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.	
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Signature	