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

Schedule E)	FOR SE OF FORM 24/48
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Reform America Fund	
	C C00581934
Check if 24-hour report	on M M / D = D / Y = Y = Y
Full Name of Payee	Date of Public Distribution/Dissemination
Nonbox	10 10 2016
Mailing Address 5307 S 92nd St	10 10 2010
	Amount
City State Zip Code	1021155.84
Hales Corners WI 53130-1677	Transaction ID : E4DC8583839D04C7A89B Date of Disbursement or Obligation
Purpose of Expenditure Media Buy Category/ Type	10 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District: 00
Clinton, Hillary Rodham, , ,	President Senate State:
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	ursement For: Primary General Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / 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 Y
Name of Federal Candidate Support Office	e Sought: House District:
Oppose	President Senate State:
Caloridat Tour To Bate	ursement For: Primary General
Per Election for Office Sought	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	1021155.84
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
(c) TOTAL masperiatin Experiations	1021155.84
Under penalty of perjury I certify that the independent expenditures reported herein were not may 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.	· · · · · · · · · · · · · · · · · · ·
Pickens, Lorri, , ,	M / D D / Y Y Y Y Y
[Electronically Filed] Date 1 Signature	0 11 2016