24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full) AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES PEOPLE	FEC IDENTIFICATION NUMBER ▼ C C00011114
Check If 24-hour report 48-hour report New report Amends report fill	ed on Man / Dad / Yayayay
Full Name (Last, First, Middle Initial) of Payee THE CAMPAIGN GROUP Mailing Address 1600 Locust Street	Date M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Zip Code Philadelphia PA 19103	800000.00 Transaction ID : SE.269637
Purpose of Expenditure TV & Online ads 'The Man' Name of Federal Candidate Supported or Opposed by Expenditure:	ffice Sought: House State: CA Senate District: 07 President
Calendar Year-To-Date Per Election	sbursement For: Primary General
Full Name (Last, First, Middle Initial) of Payee	Other (specify) Date
Mailing Address	Amount
City State Zip Code	
Purpose of Expenditure Category/ Type Name of Federal Candidate Supported or Opposed by Expenditure:	ffice Sought: House State: Senate District: President
	heck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	isbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	800000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	800000.00
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.	
LAURA REYES [Electronically Filed] Date	09 / 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y