

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

 PAGE 1 OF 1
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Ending Spending Action Fund		FEC IDENTIFICATION NUMBER ▼	
		C C00489856	
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on			

Full Name of Payee CD, Inc.			Date of Public Distribution/Dissemination		
Mailing Address P. O. Box 1877			MM 08 DD 02 YYYY 2014		
City Alexandria	State VA	Zip Code 22313	Amount 42000.00		
Purpose of Expenditure online advertising		Category/ Type	Transaction ID : SE.5490 Date of Disbursement or Obligation		
Name of Federal Candidate Mary Michelle Nunn		☐ Support ☒ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: GA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☒ General 2014 ☐ Other (specify) ▶		

970733.13

Full Name of Payee			Date of Public Distribution/Dissemination		
Mailing Address			MM DD YYYY		
City	State	Zip Code	Amount		
Purpose of Expenditure		Category/ Type	Date of Disbursement or Obligation		
Name of Federal Candidate		☐ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☐ Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	42000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	42000.00

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.

Nancy H. Watkins

[Electronically Filed]

Date

MM
08

DD
04

YYYY
2014

Signature