

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation US Chamber of Commerce		3. FEC Identification Number C C90013145
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1615 H Street NW		
(c) City, State and ZIP Code Washington DC 20062		
2. Occupation and Name of Employer (for Individual Filers Only)		

4. TYPE OF REPORT (check appropriate boxes):

- (a) April 15 Quarterly Report
- July 15 Quarterly Report 24-Hour Report
- October 15 Quarterly Report 48-Hour Report
- January 31 Year-End Report

b) Is this Report an amendment? No Yes, it amends the report filed on

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
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5. COVERING PERIOD:

FROM

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
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THROUGH

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
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6. TOTAL CONTRIBUTIONS.....	0.00
7. TOTAL INDEPENDENT EXPENDITURES	1000350.00

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 any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

[Electronically Filed]

Majlak, Abby, , ,

Majlak, Abby, , ,

05/03/2017

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
US Chamber of Commerce

Full Name (Last, First, Middle Initial) of Payee Nationbuilder		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 01 / 2017	
Mailing Address 520 S. Grand Ave. 2nd Floor		Amount 100.00	
City Los Angeles	State CA	Zip Code 90071	Transaction ID : 57646794
Purpose of Expenditure Email communications opposing Jon Ossoff.	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: GA District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: Ossoff, Jon, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1000350.00		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	

Full Name (Last, First, Middle Initial) of Payee Revolution Media Group		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 01 / 2017	
Mailing Address 1020 Princess Street		Amount 500000.00	
City Alexandria	State VA	Zip Code 22314	Transaction ID : 57646794
Purpose of Expenditure Media opposing Jon Ossoff, 5/1 - 5/17.	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: GA District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: Ossoff, Jon, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1000350.00		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	

Full Name (Last, First, Middle Initial) of Payee Red Edge		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 01 / 2017	
Mailing Address 2300 Clarendon Blvd #901		Amount 150.00	
City Arlington	State VA	Zip Code 22201	Transaction ID : 57646794
Purpose of Expenditure Website Development	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: GA District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: Handel, Karen, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1000350.00		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	

(a) SUBTOTAL of Itemized Independent Expenditures.....	500250.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
US Chamber of Commerce

Full Name (Last, First, Middle Initial) of Payee Revolution Media Group		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 01 / 2017	
Mailing Address 1020 Princess Street		Amount 500000.00	
City Alexandria	State VA	Zip Code 22314	Transaction ID : 57646790
Purpose of Expenditure Media supporting Karen Handel, 5/1 - 5/17.	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: GA <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Handel, Karen, , ,		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2017 <input checked="" type="checkbox"/> Other (specify) Runoff	
Calendar Year-To-Date Per Election for Office Sought 1000350.00			

Full Name (Last, First, Middle Initial) of Payee Nationbuilder		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 01 / 2017	
Mailing Address 520 S. Grand Ave. 2nd Floor		Amount 100.00	
City Los Angeles	State CA	Zip Code 90071	Transaction ID : 57646795
Purpose of Expenditure Email communications supporting Karen Handel.	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: GA <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Handel, Karen, , ,		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2017 <input checked="" type="checkbox"/> Other (specify) Runoff	
Calendar Year-To-Date Per Election for Office Sought 1000350.00			

Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2017 <input type="checkbox"/> Other (specify) Runoff	
Calendar Year-To-Date Per Election for Office Sought			

(a) SUBTOTAL of Itemized Independent Expenditures.....	500100.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	1000350.00