

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

PAGE 1 OF 2
FOR SE OF FORM 24/48

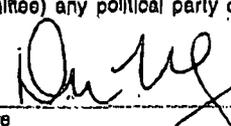
NAME OF COMMITTEE (In Full) DSCC		FEC IDENTIFICATION NUMBER C00042366
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on

Full Name of Payee Shorr Johnson Magnus Strategic Media	Date of Public Distribution/Dissemination 10 / 24 / 2016
Mailing Address 100 N 20th St Suite 201	Amount 1674.87
City State Zip Code Philadelphia PA 19103	Transaction ID : SE-125043
Purpose of Expenditure Media Production	Category/ Type
Date of Disbursement or Obligation 10 / 24 / 2016	
Name of Federal Candidate Blunt, Roy, . .	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President State: MO
Calendar Year-To-Date Per Election for Office Sought 3486101.09	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name of Payee Bully Pulpit Interactive	Date of Public Distribution/Dissemination 10 / 24 / 2016
Mailing Address 1140 Connecticut Ave., NW Suite 800	Amount 250000.00
City State Zip Code Washington DC 20038	Transaction ID : SE-125044
Purpose of Expenditure Media Buy	Category/ Type
Date of Disbursement or Obligation 10 / 24 / 2016	
Name of Federal Candidate Blunt, Roy, . .	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President State: MO
Calendar Year-To-Date Per Election for Office Sought 3486101.09	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	251674.87
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures.....	

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.

Signature  Date 10 / 25 / 2016

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) DSCC		FEC IDENTIFICATION NUMBER C 00042368
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on

Full Name of Payee Bully Pulpit Interactive		
Mailing Address 1140 Connecticut Ave., NW Suite 800		
City Washington	State DC	Zip Code 20036
Purpose of Expenditure Media Buy	Category/Type	

Date of Public Distribution/Dissemination 10 / 24 / 2016
Amount 150000.00
Transaction ID : SE-125090
Date of Disbursement or Obligation 10 / 24 / 2016

Name of Federal Candidate Blunt, Roy...	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 3486101.09	

Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate	District: 00	State: MO
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____	

Full Name of Payee		
Mailing Address		
City	State	Zip Code
Purpose of Expenditure	Category/Type	

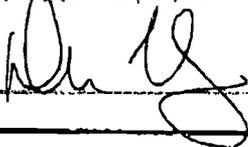
Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation

Name of Federal Candidate	<input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought	

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate	District: _____	State: _____
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	150000.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures.....	401674.87

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.

Signature 

Date **10 / 25 / 2016**

Via FAX

Federal Election Commission
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<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
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Other (Specify): Date of Receipt or Postmarked
10/25/16

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N/A
PREPARER

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