24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
ColorOfChange PAC	
	C C00428557
Check if X 24-hour report 48-hour report New report Amends report filed	on Mam / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Toskr, Inc.	M M / D D / Y Y Y Y Y
Mailing Address 1330 Broadway	11 04 2016 Amount
3rd Floor	
City State Zip Code	3251.84
Oakland CA 94162	Transaction ID : SE.5239 Date of Disbursement or Obligation
Purpose of Expenditure Text Messaging Category/ Type	11 04 2016
Name of Federal Candidate Support Office	e Sought: House District:00
TOOMEY, PATRICK JOSEPH, , ,	President Senate State: PA
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	
Purpose of Expenditure	Date of Disbursement or Obligation
Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	e Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Disbi	ursement For: Primary General
Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	3251.84
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	3251.84
Under penalty of perjury I certify that the independent expenditures reported herein were not mount 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.	
Goodman, Keith, , ,	M / D D / V V V
[Electronically Filed] Date 1	1 04 2016
Signature	