## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
America Votes Action Fund	
	C C00492520
Check if X 24-hour report 48-hour report New report X Amends report filed	on 10 / 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
Mission Control, Inc.	10 24 2018
Mailing Address 624 Hebron Ave	Amount
Ste 200	
City State Zip Code	6315.75
Glastonbury CT 06033-5006	Transaction ID: VN7BN9Y3YW3  Date of Disbursement or Obligation
Purpose of Expenditure Mail and postage  Category/ Type	10 19 2018
Name of Federal Candidate Support Office	Sought: House District: 00
ROSEN, JACKY, , , Oppose	President State: NV Senate
Calendar Year-To-Date Per Election for Office Sought  Disbut 2018	rsement For: Primary <b>X</b> General  Other (specify) ▶
Full Name of Payee Mission Control, Inc.	Date of Public Distribution/Dissemination
	10 24 2018
Mailing Address 624 Hebron Ave	Amount
Ste 200	1000
City State Zip Code  Glastonbury CT 06033-5006	6315.76 Transaction ID : VN7BN9Y3YX0
Purpose of Evpanditure	Date of Disbursement or Obligation
Mail and postage  Category/ Type	10 19 / 2018
Name of Federal Candidate Support Office	e Sought:   House District: 03
LEE, SUSIE, , ,	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought  Disbut 2018	ursement For: Primary   General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	12631.51
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may 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.	
	0 29 2018
Signature	

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

	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
America Votes Action Fund	C C00492520
Check if 24-hour report 48-hour report New report Amends report file	ed on 10 / 26 / 2018
Full Name of Payee	Date of Public Distribution/Dissemination
AFSCME  Mailing Address	10 24 2018
Mailing Address 1625 L Street NW	Amount
City State Zip Code	2756.00
Washington DC 20036	Transaction ID: WFT20189291732-1 Date of Disbursement or Obligation
Purpose of Expenditure Phones  Category/ Type	10 27 / 2018
Name of Federal Candidate Support Of	fice Sought:   House District: 01
Pappas, Chris, , ,	President Senate State: NH
Calendar Year-To-Date Per Election for Office Sought	sbursement For: Primary
Tel Election of Cinec Godgitt	Other (specify)
Full Name of Payee AFSCME	Date of Public Distribution/Dissemination
Mailing Address 1625 L Street NW	10 24 2018 Amount
City State Zip Code	2756.00
WASHINGTON DC 20036	Transaction ID : WFT20189291739-1 Date of Disbursement or Obligation
Purpose of Expenditure Phones  Category/ Type	10 27 / 2018
Name of Federal Candidate Support Of	fice Sought: 🗶 House District:02
Kuster, Ann, , , Oppose	President Senate State: NH
	sbursement For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures	5512.00
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 5
(c) TOTAL Independent Expenditures	18143.51
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.	
Finkle-Sourlis, Susan, , ,  [Electronically Filed] Date	10 29 2018
Signature	

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