

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

PAGE 1 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Win Justice			FEC IDENTIFICATION NUMBER ▼ C C00672394		
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y					
Full Name of Payee Community Outreach Group, LLC			Date of Public Distribution/Dissemination 08 / 21 / 2018		
Mailing Address 123 Williams St			Amount 48682.53		
City New York	State NY	Zip Code 10038	Transaction ID : 24-02-00055-00101 Date of Disbursement or Obligation 08 / 21 / 2018		
Purpose of Expenditure Canvassing Services		Category/ Type 			
Name of Federal Candidate Rosen, Jacky, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought		48682.53	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Community Outreach Group, LLC			Date of Public Distribution/Dissemination 09 / 14 / 2018		
Mailing Address 123 Williams St			Amount 106058.40		
City New York	State NY	Zip Code 10038	Transaction ID : 24-02-00055-00102 Date of Disbursement or Obligation 08 / 21 / 2018		
Purpose of Expenditure Canvassing Services		Category/ Type 			
Name of Federal Candidate Rosen, Jacky, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought		154740.93	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			154740.93		
(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 <i>Pateriya, Deepak, , ,</i>		[Electronically Filed]		Date 09 / 26 / 2018	

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Full Name of Payee Resonance Campaigns, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 31 / 2018	
Mailing Address 1020 16th St NW Ste 701		Amount 8540.00	
City Washington	State DC	Zip Code 20036	Transaction ID : 24-02-00060-00116
Purpose of Expenditure Printing	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 09 / 06 / 2018	
Name of Federal Candidate Rosen, Jacky, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 163280.93		Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure	Category/Type		
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 District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	8540.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....▶	163280.93

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.

Pateriya, Deepak, , ,
[Electronically Filed]

Date

MM / DD / YYYY
09 / 26 / 2018

Signature