

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) NextGen Climate Action Committee	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00547349 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Bully Pulpit Interactive LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 01 / 2016
Mailing Address 1140 Connecticut Ave NW Ste 800	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 10000.00 </div> Transaction ID : VNTPK9TYDB3 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 02 / 2016
City Washington State DC Zip Code 20036-4010	
Purpose of Expenditure Digital Advertising Category/Type	
Name of Federal Candidate: Ross, Deborah, K., , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 176021.88	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item Wildfire Contact LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 21 / 2016
Mailing Address 400 E Court Ave Ste 126	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 45819.71 </div> Transaction ID : VNTPK9TV3D3 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 02 / 2016
City Des Moines State IA Zip Code 50309-2000	
Purpose of Expenditure Printing Category/Type	
Name of Federal Candidate: Trump, Donald, J., , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 7463337.97	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 55819.71 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> _____ </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> _____ </div>

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.

Copeland, Rita, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
05 / 15 / 2017

Signature