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

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
AMERICA'S FUTURÉ FIRST	
	C C00748061
Check if X 24-hour report 48-hour report New report Amends report filed	d on Mam / Dab / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Roland Offset Service RP	M M / D D / Y Y Y Y
Mailing Address PO Box 94	06 17 2020 Amount
	Allouit
City State Zip Code	1501.24
Edgewater NJ 07020	Transaction ID : WFT20205121637-1 Date of Disbursement or Obligation
Purpose of Expenditure Digital Advertising Category/ Type	06 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Offic	e Sought:
Kennedy, Amy, , , Oppose	President Senate State: NJ
Calendar Year-To-Date Per Election for Office Sought Disb. 2020	ursement For: ✓ Primary General Other (specify) ✓
Full Name of Payee	Date of Public Distribution/Dissemination
	M M / D D / Y Y Y Y
Mailing Address	Amount
	Amount
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	e Sought: House District:
Oppose	President Senate State:
Galorida Todi To Balo	pursement For: Primary General
Per Election for Office Sought	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	1501.24
	4
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	1501.24
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.	
	06 / Dab / Yayayay 2020
Signature	