

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

 PAGE 1 OF 4  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Priorities USA Action</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00495861       </div>
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	

Full Name of Payee <b>American Express</b> <small>See below if itemized</small>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 09 / 07 / 2018</div> </div>	
Mailing Address PO Box 1270		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">660.94</div>	
City Newark	State NJ	Zip Code 07101-1270	<b>Transaction ID : VNTYH9XRYZ8</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 09 / 07 / 2018</div> </div>
Purpose of Expenditure Non-Contribution Account: Digital Ad Production (Estimate)		Category/ Type	
Name of Federal Candidate Nelson, Bill, , ,		<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: FL
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">907881.14</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>American Express</b> <small>See below if itemized</small>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 09 / 07 / 2018</div> </div>	
Mailing Address PO Box 1270		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">29.00</div>	
City Newark	State NJ	Zip Code 07101-1270	<b>Transaction ID : VNTYH9XRZ47</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 09 / 07 / 2018</div> </div>
Purpose of Expenditure Non-Contribution Account: Digital Ad Production (Estimate)		Category/ Type	
Name of Federal Candidate Nelson, Bill, , ,		<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: FL
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">907881.14</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">689.94</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></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.

Speed, Greg, , ,

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Date

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09 / 09 / 2018

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 2 OF 4  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Priorities USA Action</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00495861	
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	

Full Name of Payee <b>Art Not War</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>09 / 07 / 2018</b>		
Mailing Address <b>124 Pioneer St</b>			Amount <b>1000.00</b>		
City <b>Brooklyn</b>	State <b>NY</b>	Zip Code <b>11231-1611</b>	Transaction ID : <b>VNTYH9XR2</b>		
Purpose of Expenditure Non-Contribution Account: Digital Ad Production (Estimate)		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY <b>09 / 07 / 2018</b>		
Name of Federal Candidate <b>Nelson, Bill, , ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <b>00</b> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>FL</b>		
Calendar Year-To-Date Per Election for Office Sought		<b>907881.14</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <b>Bully Pulpit Interactive LLC</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>09 / 07 / 2018</b>		
Mailing Address <b>1140 Connecticut Ave NW</b> <b>Ste 800</b>			Amount <b>180050.00</b>		
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20036-4010</b>	Transaction ID : <b>VNTYH9XRZP9</b>		
Purpose of Expenditure Non-Contribution Account: Digital Ad Buy (Estimate)		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY <b>09 / 07 / 2018</b>		
Name of Federal Candidate <b>Nelson, Bill, , ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <b>00</b> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>FL</b>		
Calendar Year-To-Date Per Election for Office Sought		<b>907881.14</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>181050.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

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NAME OF COMMITTEE (In Full) <b>Priorities USA Action</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00495861       </div>
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	

Full Name of Payee <b>Getty Images</b> <input checked="" type="checkbox"/> * Paid through American Express on 9/07/18		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 09 / 07 / 2018</div> </div>	
Mailing Address 55 E Monroe St Ste 1700		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">660.94</div>	
City State Zip Code Chicago IL 60603-5724	<b>Transaction ID : VNTYH9XRY0</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY</div> </div>		
Purpose of Expenditure Non-Contribution Account: Digital Ad Production (Estimate)	Category/Type		
Name of Federal Candidate Nelson, Bill, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: 00 State: FL	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Ritivoy, Brianna, , ,</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 09 / 07 / 2018</div> </div>	
Mailing Address 10455 E Via Linda		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">175.00</div>	
City State Zip Code Scottsdale AZ 85258-9201	<b>Transaction ID : VNTYH9XRZ55</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 09 / 07 / 2018</div> </div>		
Purpose of Expenditure Non-Contribution Account: Digital Ad Production (Estimate)	Category/Type		
Name of Federal Candidate Nelson, Bill, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: 00 State: FL	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">175.00</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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NAME OF COMMITTEE (In Full) <b>Priorities USA Action</b>	FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00495861
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	

Full Name of Payee <b>Shutterstock, Inc.</b> <input checked="" type="checkbox"/> * Paid through American Express on 9/07/18		Date of Public Distribution/Dissemination MM / DD / YYYY <b>09 / 07 / 2018</b>	
Mailing Address 350 5th Ave FI 21		Amount <b>29.00</b>	
City New York	State NY	Zip Code 10118-2100	Transaction ID : VNTYH9XRZ39
Purpose of Expenditure Non-Contribution Account: Digital Ad Production (Estimate)		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Nelson, Bill, , ,		<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: FL
Calendar Year-To-Date Per Election for Office Sought		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	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<b>0.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	<b>181914.94</b>

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