

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NextGen Climate Action Committee	FEC IDENTIFICATION NUMBER ▼ C C00547349
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY	

Full Name of Payee Clear Channel Outdoor	Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 16 / 2014
Mailing Address 99 Park Ave Fl 2	Amount 31950.00
City State Zip Code New York NY 10016-1602	Transaction ID : VNTPK9PABD8 Date of Disbursement or Obligation MM / DD / YYYY 09 / 17 / 2014
Purpose of Expenditure Billboard Advertising	Category/Type 004
Name of Federal Candidate Joni Ernst	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 1975861.44	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Des Moines Register	Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 16 / 2014
Mailing Address 400 Locust St Ste 500	Amount 20190.45
City State Zip Code Des Moines IA 50309-2355	Transaction ID : VNTPK9PAD33 Date of Disbursement or Obligation MM / DD / YYYY 09 / 19 / 2014
Purpose of Expenditure Advertisement	Category/Type 004
Name of Federal Candidate Joni Ernst	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 1975861.44	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	52140.45
(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.

Rita Copeland
[Electronically Filed]
Date MM / DD / YYYY
05 / 08 / 2015

Signature _____