

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

NAME OF COMMITTEE (In Full) Concerned American Voters
FEC IDENTIFICATION NUMBER C C00525899
Check if 24-hour report 48-hour report New report Amends report filed on 11 / 02 / 2015

Full Name of Payee Voter Contact Services, LLC
Mailing Address 107 S. West St, PMB 501
City Alexandria State VA Zip Code 22314
Purpose of Expenditure Staffing and Services for Field Canvassers Category/Type 001
Name of Federal Candidate RAND PAUL Support Oppose
Calendar Year-To-Date Per Election for Office Sought 1227155.50

Date of Public Distribution/Dissemination 10 / 23 / 2015
Amount 6265.48
Transaction ID : SE.5697
Date of Disbursement or Obligation 10 / 23 / 2015
Office Sought: House District: IA
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Voter Contact Services, LLC
Mailing Address 107 S. West St, PMB 501
City Alexandria State VA Zip Code 22314
Purpose of Expenditure Staffing and Services for Field Canvassers Category/Type 001
Name of Federal Candidate RAND PAUL Support Oppose
Calendar Year-To-Date Per Election for Office Sought 1324152.53

Date of Public Distribution/Dissemination 11 / 02 / 2015
Amount 94109.98
Transaction ID : SE.5721
Date of Disbursement or Obligation 11 / 02 / 2015
Office Sought: House District: IA
Disbursement For: Primary General 2016 Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 100375.46
(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.
Edward King [Electronically Filed] Date 12 / 02 / 2015
Signature

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F24A

Transaction ID :

This report amended to reflect a decrease in planned staffing expenditures by a vendor.

Form/Schedule:

Transaction ID: