

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

 PAGE 1 OF 1  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>AMERICA FIRST ACTION, INC.</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00637512																									
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td></td><td></td><td></td></tr> </table> <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td></td><td></td><td></td></tr> </table> <table border="1" style="display:inline-table;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table>		M	M					D	D					Y	Y	Y	Y	Y	Y						
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Full Name of Payee <b>POLITICAL INK, INC</b>			Date of Public Distribution/Dissemination <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>0</td><td>6</td></tr> <tr><td></td><td></td></tr> </table> <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>2</td><td>1</td></tr> <tr><td></td><td></td></tr> </table> <table border="1" style="display:inline-table;"> <tr><td>2</td><td>0</td><td>1</td><td>8</td></tr> <tr><td></td><td></td><td></td><td></td></tr> </table>			0	6			2	1			2	0	1	8				
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Purpose of Expenditure DIRECT MAIL PRINTING AND POSTAGE		Category/ Type	Date of Disbursement or Obligation <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>0</td><td>6</td></tr> <tr><td></td><td></td></tr> </table> <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>2</td><td>1</td></tr> <tr><td></td><td></td></tr> </table> <table border="1" style="display:inline-table;"> <tr><td>2</td><td>0</td><td>1</td><td>8</td></tr> <tr><td></td><td></td><td></td><td></td></tr> </table>			0	6			2	1			2	0	1	8				
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Name of Federal Candidate DONOVAN, DAN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 11 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY																		
Calendar Year-To-Date Per Election for Office Sought		<table border="1" style="width:100%"> <tr><td>1</td><td>5</td><td>5</td><td>3</td><td>3</td><td>7</td><td>.</td><td>6</td><td>9</td></tr> </table>	1	5	5	3	3	7	.	6	9	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶									
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(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<table border="1" style="width:100%"> <tr><td>1</td><td>7</td><td>7</td><td>9</td><td>.</td><td>0</td><td>7</td></tr> </table>	1	7	7	9	.	0	7			
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(c) TOTAL Independent Expenditures.....▶	<table border="1" style="width:100%"> <tr><td>1</td><td>7</td><td>7</td><td>9</td><td>.</td><td>0</td><td>7</td></tr> </table>	1	7	7	9	.	0	7			
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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.

PROCH, JON, , ,

[Electronically Filed]

Date

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2	2

2	0	1	8

Signature