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 ▼
Priorities USA Action	C C00495861
	C 000493001
Check if 24-hour report 48-hour report New report Amends report filed	d on M M M / D D / Y Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
Precision Network LLC	12 15 2015
Mailing Address 1140 Connecticut Ave NW	Amount
Ste 800	
City State Zip Code	14945.65
Washington DC 20036-4010	Transaction ID : VNTYH9SD259 Date of Disbursement or Obligation
Purpose of Expenditure Digital Ad Buy Category/ Type	12 / D D / Y Y Y Y Y Y 15 15 15 15 15 15 15 15 15 15 15 15 15
Name of Federal Candidate Support Offic	e Sought: House District: 00
DONALD J TRUMP Oppose	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought Disb 2016	ursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / 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	ee Sought: House District:
Oppose	President Senate State:
Galorida Todi To Balo	oursement For: Primary General
Per Election for Office Sought	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	14945.65
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	14945.65
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.	
	12 17 2015
Signature	