24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
The 2016 Committee	
	C C00569905
Check if 24-hour report X 48-hour report New report Amends report filed	I on Mam / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Clear Channel Outdoor	11 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 591790	Amount
City State Zip Code	2136.00
San Antonio TX 78258	Transaction ID : WFT201510101649-1 Date of Disbursement or Obligation
Purpose of Expenditure Billboards Category/ Type 004	11 10 / 2015
Name of Federal Candidate Support Office	e Sought: House District:
Dr. Ben Carson Oppose	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought Disbut 213979.06 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 Offic	e Sought: House District:
Oppose	President Senate State:
Calcinati Total To Bate	ursement For: Primary General
Per Election for Office Sought	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	2136.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	2136.00
Under penalty of perjury I certify that the independent expenditures reported herein were not m. with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Bato	11 11 2015
Signature	