

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

 PAGE 1 OF 1
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) ESAFund	FEC IDENTIFICATION NUMBER ▼ C C00489856
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on	

Full Name of Payee Norway Hill Associates, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 26 / 2016	
Mailing Address 30 Norway Hill Road		Amount 79695.00	
City Hancock	State NH	Zip Code 03449	Transaction ID : SE.6511 Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure direct voter contact/direct marketing		Category/ Type	
Name of Federal Candidate Kelly A. Ayotte		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought		0.00	Disbursement For: ☐ Primary ☒ General 2016 ☐ Other (specify) ▶ _____

Full Name of Payee Norway Hill Associates, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 26 / 2016	
Mailing Address 30 Norway Hill Road		Amount 26565.00	
City Hancock	State NH	Zip Code 03449	Transaction ID : SE.6512 Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure direct voter contact/direct marketing		Category/ Type	
Name of Federal Candidate Margaret Wood Hassan		☐ Support ☒ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought		0.00	Disbursement For: ☐ Primary ☒ General 2016 ☐ Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	106260.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	106260.00

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.

Nancy H. Watkins

[Electronically Filed]

Date

MM / DD / YYYY
05 / 27 / 2016

Signature