

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

 PAGE 1 OF 2  
 FOR SE OF FORM 24/48

|  |  |  |
|--|--|--|
| NAME OF COMMITTEE (In Full)<br><b>SEIU COPE (Service Employees International Union Committee On Political Education)</b> |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00004036  |
| 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 |

|   |                              |   |
|---|------------------------------|---|
| Full Name of Payee<br><b>Shorr Johnson Magnus Strategic Media</b> |                              | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>11 / 01 / 2016</b>  |
| Mailing Address 1831 Chestnut St 6th Flr                          |                              | Amount<br><b>20000.00</b>   |
| City<br>Philadelphia  | State<br>PA                  | Zip Code<br>19103   |
| Purpose of Expenditure<br>Television Ad Production                | Category/<br>Type <b>004</b> | Transaction ID : <b>D369097</b><br>Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>11 / 01 / 2016</b>  |
| Name of Federal Candidate<br>TOOMEY, PATRICK JOSEPH, ,            |                              | Office Sought: <input type="checkbox"/> House District: _____<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>PA</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought           |                              | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2016 <input type="checkbox"/> Other (specify) ▶ _____         |

|   |                              |   |
|---|------------------------------|---|
| Full Name of Payee<br><b>Waterfront Strategies</b>      |                              | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>11 / 01 / 2016</b>  |
| Mailing Address 1010 Wisconsin Avenue, NW<br>Suite 800  |                              | Amount<br><b>924008.00</b>  |
| City<br>Washington                                      | State<br>DC                  | Zip Code<br>20007   |
| Purpose of Expenditure<br>Television Ad Buy             | Category/<br>Type <b>004</b> | Transaction ID : <b>D369096</b><br>Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>11 / 01 / 2016</b>  |
| Name of Federal Candidate<br>TOOMEY, PATRICK JOSEPH, ,  |                              | Office Sought: <input type="checkbox"/> House District: _____<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>PA</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought |                              | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2016 <input type="checkbox"/> Other (specify) ▶ _____         |

|  |                  |
|--|------------------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶    | <b>944008.00</b> |
| (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.

Hudson, Gerald, , ,

[Electronically Filed]

Date

MM / DD / YYYY  
**11 / 02 / 2016**

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
(Schedule E)PAGE 2 OF 2  
FOR SE OF FORM 24/48

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|--|--|---|
| NAME OF COMMITTEE (In Full)<br><b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>   |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00004036 |
| 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 |  | MM / DD / YYYY                                    |

|  |                      |   |
|--|----------------------|---|
| Full Name of Payee<br><b>NG Slater Corp</b>  |                      | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>11 / 01 / 2016</b>  |
| Mailing Address 42 W 38th St<br>Ste 1002   |                      | Amount<br>579.57  |
| City<br>New York   | State<br>NY          | Zip Code<br>10018   |
| Purpose of Expenditure<br>Buttons  | Category/Type<br>006 | Transaction ID : D369101<br>Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>11 / 01 / 2016</b>   |
| Name of Federal Candidate<br>CLINTON, HILLARY RODHAM, , ,<br><input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose |                      | Office Sought: <input type="checkbox"/> House    District: _____<br><input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____ |
| Calendar Year-To-Date<br>Per Election for Office Sought<br>1448288.07  |                      | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2016 <input type="checkbox"/> Other (specify) ▶ _____           |

|   |               |  |
|---|---------------|--|
| Full Name of Payee  |               | Date of Public Distribution/Dissemination<br>MM / DD / YYYY  |
| Mailing Address   |               | Amount   |
| City  | State         | Zip Code   |
| Purpose of Expenditure  | Category/Type | Date of Disbursement or Obligation<br>MM / DD / YYYY   |
| Name of Federal Candidate<br><br><input type="checkbox"/> Support <input type="checkbox"/> Oppose |               | Office Sought: <input type="checkbox"/> House    District: _____<br><input type="checkbox"/> President <input type="checkbox"/> Senate    State: _____ |
| Calendar Year-To-Date<br>Per Election for Office Sought   |               | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶ _____                |

|   |           |
|---|-----------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶    | 579.57    |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶ |           |
| (c) TOTAL Independent Expenditures..... ▶                   | 944587.57 |

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Hudson, Gerald, , ,

[Electronically Filed]

Date

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11 / 02 / 2016

Signature