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

Schedule E)		PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
End Citizens United		C C00573261
Check if 24-hour report		
Full Name of Payee The Pivot Group, Inc.	Da	ate of Public Distribution/Dissemination
' '		10 05 7 2018
Mailing Address 1509 16Th St NW	Ar	mount
FI 3	7'- O-d-	12144 90
,		ransaction ID : VPEP0A85B13
Purpose of Expenditure Postage & Shipping Estimated Costs	Category/ Type	ate of Disbursement or Obligation 10 05 2018
Name of Federal Candidate	Support Office So	ought: X House District: 12
Bost, Michael, , ,		esident Senate State: IL
Calendar Year-To-Date Per Election for Office Sought	456050.51 Disburser 2018	ment For:
Full Name of Payee	Da	ate of Public Distribution/Dissemination
The Pivot Group, Inc. [MEMO ITEM] *		10 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1509 16Th St NW	Ar	mount
FI 3		47000 50
City State Washington DC		17620.50 ansaction ID: VPEP0A85B21 ate of Disbursement or Obligation
Purpose of Expenditure Printing & Production Estimated Costs	Category/ Type	M M / D D / Y Y Y Y
Name of Federal Candidate	Support Office Sc	ought: House District: 12
Bost, Michael, , ,	X Oppose Pre	esident Senate State: IL
Calendar Year-To-Date Per Election for Office Sought	456050.51 Disburser 2018	ment For:
-		
(a) SUBTOTAL of Itemized Independent Expenditures	·····	12144.89
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	·······	12144.89
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.	•	•
	cally Filed] Date 10	07 2018
Signature		