

INDEPENDENT EXPENDITURES

NAME OF PERSON MAKING THE INDEPENDENT EXPENDITURE <i>(As reported on Page 1, Line 1)</i>	TYPE OF REPORT
AFSCME	24 Hour IE Report

SUMMARY

	COLUMN A This Period	COLUMN B Aggregate
8. Expenditures Made by a Person <i>(Section A - Page 3)</i>	\$15,439.45	\$141,619.98
9. Expenditures Obligated by a Person This Period but Not Paid <i>(Section B - Page 4)</i>	\$0	
10. Total Outstanding Expenditures Obligated by a Person still Unpaid <i>(Section B - Page 4)</i>	\$7,837.88	

INDEPENDENT EXPENDITURES

NAME OF PERSON MAKING INDEPENDENT EXPENDITURE (As reported on Page 1, Line 1)				TYPE OF REPORT	
AFSCME				24 Hour IE Report	
A. Independent Expenditures Made by Person					
Name of Payee					Date of Expenditure
Red Horse Strategies					10/25/2018
Street Address			City	State	Zip Code
55 Washington Street, Suite 702			Brooklyn	NY	11201
Independent Expenditure on behalf of more than one candidate?		Description			
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, complete Section A. Addendum</i>		Mail piece			
Name of Candidate <i>(only complete if Independent Expenditure is on behalf of ONE candidate—If more than one, Complete Section A. Addendum)</i>				Office Sought	
Ned Lamont				Governor	
				<input checked="" type="checkbox"/> Supported <input type="checkbox"/> Opposed	
Purpose of Expenditure <i>(by code)</i>		Expenditure Number <i>(if applicable)</i>	Associated with Referendum?		Amount
A-DM		16	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$15,439.45
Name of Payee					Date of Expenditure
Street Address			City	State	Zip Code
Independent Expenditure on behalf of more than one candidate?		Description			
<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, complete Section A. Addendum</i>					
Name of Candidate <i>(only complete if Independent Expenditure is on behalf of ONE candidate—If more than one, Complete Section A. Addendum)</i>				Office Sought	
				<input type="checkbox"/> Supported <input type="checkbox"/> Opposed	
Purpose of Expenditure <i>(by code)</i>		Expenditure Number <i>(if applicable)</i>	Associated with Referendum?		Amount
			<input type="checkbox"/> Yes <input type="checkbox"/> No		
Name of Payee					Date of Expenditure
Street Address			City	State	Zip Code
Independent Expenditure on behalf of more than one candidate?		Description			
<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, complete Section A. Addendum</i>					
Name of Candidate <i>(only complete if Independent Expenditure is on behalf of ONE candidate—If more than one, Complete Section A. Addendum)</i>				Office Sought	
				<input type="checkbox"/> Supported <input type="checkbox"/> Opposed	
Purpose of Expenditure <i>(by code)</i>		Expenditure Number <i>(if applicable)</i>	Associated with Referendum?		Amount
			<input type="checkbox"/> Yes <input type="checkbox"/> No		
SUBTOTAL Section A. - This Page					\$15,439.45
TOTAL of additional Section A. Pages					\$0
TOTAL OF ALL INDEPENDENT EXPENDITURES MADE BY PERSON THIS PERIOD <i>(Enter total on Column A, Line 8)</i>					\$15,439.45

INDEPENDENT EXPENDITURES

NAME OF PERSON MAKING INDEPENDENT EXPENDITURE <i>(As reported on Page 1, Line 1)</i>				TYPE OF REPORT	
AFSCME				24 Hour IE Report	
B. Independent Expenditures Obligated by Person this Period but Not Paid					
Name of Creditor					Date Obligated
Street Address			City	State	Zip Code
Independent Expenditure on behalf of more than one candidate? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, complete Section B. Addendum</i>		Description			
Name of Candidate <i>(only complete if Independent Expenditure is on behalf of ONE candidate—If more than one, Complete Section B. Addendum)</i>				Office Sought	<input type="checkbox"/> Supported <input type="checkbox"/> Opposed
Purpose of Expenditure <i>(by code)</i>	Expenditure Number <i>(if applicable)</i>	Associated with Referendum? <input type="checkbox"/> Yes <input type="checkbox"/> No		Amount Obligated	
Name of Creditor					Date Obligated
Street Address			City	State	Zip Code
Independent Expenditure on behalf of more than one candidate? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, complete Section B. Addendum</i>		Description			
Name of Candidate <i>(only complete if Independent Expenditure is on behalf of ONE candidate—If more than one, Complete Section B. Addendum)</i>				Office Sought	<input type="checkbox"/> Supported <input type="checkbox"/> Opposed
Purpose of Expenditure <i>(by code)</i>	Expenditure Number <i>(if applicable)</i>	Associated with Referendum? <input type="checkbox"/> Yes <input type="checkbox"/> No		Amount Obligated	
Name of Creditor					Date Obligated
Street Address			City	State	Zip Code
Independent Expenditure on behalf of more than one candidate? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, complete Section B. Addendum</i>		Description			
Name of Candidate <i>(only complete if Independent Expenditure is on behalf of ONE candidate—If more than one, Complete Section B. Addendum)</i>				Office Sought	<input type="checkbox"/> Supported <input type="checkbox"/> Opposed
Purpose of Expenditure <i>(by code)</i>	Expenditure Number <i>(if applicable)</i>	Associated with Referendum? <input type="checkbox"/> Yes <input type="checkbox"/> No		Amount Obligated	
Name of Creditor					Date Obligated
Street Address			City	State	Zip Code
Independent Expenditure on behalf of more than one candidate? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, complete Section B. Addendum</i>		Description			
Name of Candidate <i>(only complete if Independent Expenditure is on behalf of ONE candidate—If more than one, Complete Section B. Addendum)</i>				Office Sought	<input type="checkbox"/> Supported <input type="checkbox"/> Opposed
Purpose of Expenditure <i>(by code)</i>	Expenditure Number <i>(if applicable)</i>	Associated with Referendum? <input type="checkbox"/> Yes <input type="checkbox"/> No		Amount Obligated	
SUBTOTAL Section B. - This Page				\$0	
TOTAL of additional Section B. Pages				\$0	
TOTAL OF ALL INDEPENDENT EXPENDITURES OBLIGATED BY PERSON DURING THIS PERIOD BUT NOT PAID <i>(Enter total on Column A, Line 9)</i>				\$0	
Previous Reported Independent Expenditures Unpaid and Still Outstanding				\$7,837.88	
TOTAL OF ALL INDEPENDENT EXPENDITURES OBLIGATED BUT NOT PAID <i>(Enter total on Column A, Line 10)</i>				\$7,837.88	