

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

PAGE 1 OF 1
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) New Power PAC		FEC IDENTIFICATION NUMBER ▼ C C00489252	
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 Facebook inc			Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 11 / 2020		
Mailing Address 1 Hacker Way			Amount 904.84		
City Menlo Park	State CA	Zip Code 94025	Transaction ID : SE.5750		
Purpose of Expenditure social media ads		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 06 / 11 / 2020		
Name of Federal Candidate BOOKER, CHARLES, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: KY		
Calendar Year-To-Date Per Election for Office Sought		8979.63	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee Facebook inc			Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 12 / 2020		
Mailing Address 1 Hacker Way			Amount 900.00		
City Menlo Park	State CA	Zip Code 94025	Transaction ID : SE.5751		
Purpose of Expenditure social media ads		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 06 / 12 / 2020		
Name of Federal Candidate BOOKER, CHARLES, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: KY		
Calendar Year-To-Date Per Election for Office Sought		9879.63	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1804.84
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	1804.84

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.

Mahoney, Heather, Roe, Ms,

[Electronically Filed]

Date

MM / DD / YYYY
06 / 12 / 2020

Signature