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

Schedule E)		PAGE 1 OF 47 FOR SE OF FORM 24/48
IAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Community Change Voters		
		C C00612820
check if 24-hour report X 48-hour report New re	eport Amends repor	t filed on
Full Name of Payee		Date of Public Distribution/Dissemination
Community Change Action		M M / D D / Y Y Y Y
Mailing Address 1536 U Street NW		10 15 2022
5 1550 O Stieet NW		Amount
City State	Zip Code	218.75
Washington DC	20009	Transaction ID : 24-01-00884-02566
Purpose of Expenditure		Date of Disbursement or Obligation
Staff: Drafting communications	Category/ Type	10 19 / 2022
Name of Federal Candidate	Support	Office Sought:
Schweikert, David, , ,	X Oppose	President Senate State: AZ
Calendar Year-To-Date		Disbursement For: Primary K General
Per Election for Office Sought	218.75	2022
Full Name of Payee		Date of Public Distribution/Dissemination
Caliz-Aguilar, Franco, , ,		M M / D D / Y Y Y Y
Mailing Address 1536 U St NW		
		Amount
City State	Zip Code	373.48
Washington DC	20009	Transaction ID : 24-01-00883-0039 Date of Disbursement or Obligation
Purpose of Expenditure Reimbursed Ride Share Services - See Memo's	Category/ Type	10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	C	Office Sought: House District: 02
Bishop, Sanford, , ,	Support	
	Oppose	Fresiderit Seriate State.
Calendar Year-To-Date Per Election for Office Sought	373.48	Disbursement For: Primary General 2022
To Election to Cine Googin		Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures		592.23
40 OUDTOTAL (11 %) 1 1 1 1 1 1 5 1 1 1 1 1 1 1 1 1 1 1 1		
(b) SUBTOTAL of Unitemized Independent Expenditures		>
(c) TOTAL Independent Expenditures		
(6) TOTAL Independent Expenditures		7 7
Under nearly of negion 1 could take take to the could be a	no vonovtost beverte	not mode in connection consulted as
Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.	•	
Young, Ryan, , , [Electro	onically Filed] Date	10 19 2022
Signature		

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Community Change Voters	C C00612820
Check if 24-hour report 48-hour report New report Amends report filed	i on M = M / D = D / Y = Y = Y
Full Name of Payee ABS Car Service	Date of Public Distribution/Dissemination
X	10 13 2022
Mailing Address 4355 Cobb Pkwy	Amount
City State Zip Code	30.20
Atlanta GA 30339	Transaction ID: 24-01-00883-02563 Date of Disbursement or Obligation
Purpose of Expenditure Ride Share Services Category/ Type	10 / 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Offic	e Sought: X House District: 02
Bishop, Sanford, , ,	President Senate State: GA
Calendar Year-To-Date Per Election for Office Sought Disb 2022	ursement For: Primary X General Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Tiger Limo	10 13 2022
Mailing Address 1821 Opelika Rd	Amount
City State Zip Code	163.50
Auburn AL 36830	Transaction ID : 24-01-00883-02562 Date of Disbursement or Obligation
Purpose of Expenditure Ride Share Services Category/ Type	10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District: 02
Bishop, Sanford, , ,	President Senate State: GA
Calendar Year-To-Date Per Election for Office Sought Disb 2022	ursement For: Primary
	Curior (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	•
	10 19 2022
Signature	

Schedule E)	LAF LINDI	TOTILO		PAGE 3 OF 47 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Community Change Voters				C C00612820
Check if 24-hour report X 48-hour report	X New repo	ort Amends repo		M / D = D / Y = Y = Y
Full Name of Payee			Date of	of Public Distribution/Dissemination
Blacklane x			M	10 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address Feuigstrasse 59			Amou	nt
City	State	Zip Code	— I	179.78
Berlin, Germany		20001		action ID: 24-01-00883-02561 of Disbursement or Obligation
Purpose of Expenditure Ride Share Services		Category/ Type	M	10 19 / 2022
Name of Federal Candidate		x Support	Office Sough	t: X House District: 02
Bishop, Sanford, , ,		Oppose	Preside	ent Senate State: GA
Calendar Year-To-Date Per Election for Office Sought		0.00	Disbursemen 2022 O	t For: Primary X General ther (specify) ▶
Full Name of Payee			Date	of Public Distribution/Dissemination
Community Change Action			TN	10 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1536 U Street NW			Amou	nt
City	State	Zip Code	$-\Gamma$	326.33
Washington	DC	20009		ction ID: 24-01-00884-02575 of Disbursement or Obligation
Purpose of Expenditure Staff: Drafting communications		Category/ Type	N	10 19 / 2022
Name of Federal Candidate		x Support	Office Sough	t: X House District: 07
Slotkin, Elissa, , ,		Oppose	Preside	ent Senate State: MI
Calendar Year-To-Date Per Election for Office Sought		326.33	Disbursemen 2022	t For:
(a) SUBTOTAL of Itemized Independent Expenditures			•	326.33
(b) SUBTOTAL of Unitemized Independent Expenditure	es		•	4 1 4 1 4 1
(c) TOTAL Independent Expenditures			•	7 7
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its ag	or authorized			
Young, Ryan, , ,	[Electroni	cally Filed] Date	10	19 / 2022
Signature				

Schedule E)	NOLIVI EXI END	TTOTILO		PAGE 4 OF 47 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			F	EC IDENTIFICATION NUMBER ▼
Community Change Voters				C C00612820
Check if 24-hour report x 48-hour rep	port New rep	port Amends repo	ort filed on	M / D = D / Y = Y = Y = Y
Full Name of Payee Caliz-Aguilar, Franco, , ,			Date of	Public Distribution/Dissemination
Mailing Address 1536 U St NW			Amount	
City Washington	State DC	Zip Code 20009	Transac	231.99 ction ID : 24-01-00889-0032
Purpose of Expenditure Reimbursed Ride Share Services - See Me	mo's	Category/ Type	М	Disbursement or Obligation O 19 2022
Name of Federal Candidate Slotkin, Elissa, , ,		Support Oppose	Office Sought:	House District: 07
Calendar Year-To-Date Per Election for Office Sought		558.32	Disbursement I	Seriale State.
Full Name of Payee DHM Transportation x Mailing Address PO Box 460			Date of	Public Distribution/Dissemination
City	State	Zip Code	Amount	231.99
Purpose of Expenditure	MI	48066 Category/	Date of	
Ride Share Services Name of Federal Candidate		Type Support	Office Sought:	0 19 2022 ** House District:07
Slotkin, Elissa, , ,		Oppose	Presiden	t Senate State: MI
Calendar Year-To-Date Per Election for Office Sought		0.00	Disbursement 2022 Oth	For: Primary General er (specify)
(a) SUBTOTAL of Itemized Independent Ex	penditures			231.99
(b) SUBTOTAL of Unitemized Independent	Expenditures			7 1 7 1 7
(c) TOTAL Independent Expenditures			· -	7 1 7 1 2
Under penalty of perjury I certify that the ir with, or at the request or suggestion of, any party committee) any political party committee	candidate or authorized			
Young, Ryan, , , Signature	[Electron	nically Filed] Date	4.0	19 / 2022

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

	include Ly	FOR SE OF FORM 24/48
	ME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
C	Community Change Voters	C C00612820
Ch	eck if 24-hour report 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y
	Full Name of Payee	Date of Public Distribution/Dissemination
	Community Change Action	10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 1536 U Street NW	Amount
	City State Zip Code	16.67
	Washington DC 20009	Transaction ID: 24-01-00884-02570 Date of Disbursement or Obligation
	Purpose of Expenditure Staff: Drafting communications Category/ Type	10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate Support Office	e Sought: X House District: 08
	Kildee, Daniel, T., , Oppose	President Senate State: MI
	Calcificat To Bate	ursement For: Primary (x) General
	Per Election for Office Sought 16.67 2022	Other (specify) ▶
	Full Name of Payee Caliz-Aguilar, Franco, , ,	Date of Public Distribution/Dissemination
	Mailing Address 1536 U St NW	Amount
	City State Zip Code	231.99
	Washington DC 20009	Transaction ID: 24-01-00889-0037 Date of Disbursement or Obligation
	Purpose of Expenditure Reimbursed Ride Share Services - See Memo's Category/ Type	10 19 2022
	Name of Federal Candidate Support Office	e Sought: 🗶 House District:08
	Kildee, Daniel, T., , Oppose	President Senate State: MI
	Calendar Year-To-Date Per Election for Office Sought Disb 248.66	ursement For: Primary X General Other (specify) ▶
	(a) SUBTOTAL of Itemized Independent Expenditures	248.66
	(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
	(c) TOTAL Independent Expenditures	
	Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of eithe party committee) any political party committee or its agent.	
		M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Signature	
_		

PAGE 5

OF

47

Schedule E)	itti EXI EITE	TIONES		PAGE 6 OF 47 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Community Change Voters				C C00612820
Check if 24-hour report 48-hour report	X New rep	port Amends repo		M = M / D = D / Y = Y = Y
Full Name of Payee			Date	of Public Distribution/Dissemination
DHM Transportation			[10 15 2022
Mailing Address PO Box 460			Amou	unt
City	State	Zip Code	-	231.99
Roseville	MI	48066		saction ID: 24-01-00889-02590 of Disbursement or Obligation
Purpose of Expenditure Ride Share Services		Category/ Type		10 19 / 2022
Name of Federal Candidate		✗ Support	Office Sough	nt: 🗶 House District: 08
Kildee, Daniel, T., ,		Oppose	Presid	
Calendar Year-To-Date Per Election for Office Sought	, ,	0.00	Disbursemen 2022	nt For:
Full Name of Payee			Date	of Public Distribution/Dissemination
Community Change Action				10 15 2022
Mailing Address 1536 U Street NW			Amo	unt
City	State	Zip Code	— r	16.67
Washington	DC	20009		action ID: 24-01-00884-02568 of Disbursement or Obligation
Purpose of Expenditure Staff: Drafting communications		Category/ Type] [10 19 / 2022
Name of Federal Candidate		x Support	Office Soug	ht: X House District: 10
Marlinga, Carl, , ,		Oppose	Presid	dent Senate State: MI
Calendar Year-To-Date Per Election for Office Sought		16.67	Disburseme 2022	nt For:
(a) SUBTOTAL of Itemized Independent Expendit	tures			16.67
(a) 002.01.12 of norm200 mappendom 2points.				7 7 7
(b) SUBTOTAL of Unitemized Independent Exper	nditures		• •	
(c) TOTAL Independent Expenditures			· -	7
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any canon party committee) any political party committee or	lidate or authorize			
Young, Ryan, , , Signature	[Electron	nically Filed] Date	10	19 / 2022
Olynatul e				

Schedule E	E)	ENDENT EXPEND	TOTILO		[PAGE 7	OF 47 FORM 24/48
	MMITTEE (In Full)				FEC ID		ON NUMBER ▼
Commun	ity Change Voters				I all	C00612820	
Check if	24-hour report X 48-hour	report New repo	ort Amends re	eport filed	on Man /	D = D /	Y = Y = Y = Y
Full Name Caliz-A	of Payee Aguilar, Franco, , ,				Date of Public	: Distribution/	Dissemination
Mailing Ac	dress 1536 U St NW						
					Amount		
City		State	Zip Code				231.99
Washingt	on	DC	20009		Transaction II Date of Disbu		
	f Expenditure ed Ride Share Services - See N	/lemo's	Category/ Type		10	19	2022
Name of F	ederal Candidate		✗ Support	Office	e Sought:	House	District:10
Marlinga,	Carl, , ,		Oppose		President	Senate	State: MI
	ndar Year-To-Date Election for Office Sought		248.66	Disbu 2022	ursement For: Other (spe	Primary	✗ General
Full Name	of Payee						/Dissemination
DHM T	ransportation				M M /	15	2022
Mailing Ad	Idress PO Box 460				Amount	10	ZOZZ
					7 tillount		
City		State	Zip Code		T	24.24.222	231.99
Roseville		MI	48066		Transaction ID Date of Disbu		
	of Expenditure re Services		Category/ Type		10	19	2022
Name of	Federal Candidate		x Support	Offic	e Sought:	∢ House	District: 10
Marlinga,	Carl, , ,		Oppose		President	Senate	State: MI
	ndar Year-To-Date		0.00	Disb 2022	ursement For:	Primary	X General
Per t	Election for Office Sought		0.00		Other (sp	ecify) 🕨	
(a) SUBTO	TAL of Itemized Independent	Expenditures		····· ▶			231.99
(b) SUBTO	TAL of Unitemized Independent	nt Expenditures		····· >			
(c) TOTAL	Independent Expenditures			······ >			
with, or at t	lty of perjury I certify that the he request or suggestion of, a littee) any political party comm	ny candidate or authorized					
	Young, Ryan, , ,	CT12	:		M / D D		Y Y
Signatur	e	[Electroni	ically Filed] D	ate 1	0 19	202	2

Schedule E)	PAGE 8 OF 47 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Community Change Voters	C C00612820
Check if 24-hour report 48-hour report New report Amends report f	illed on M = M / D = D / Y = Y = Y
Full Name of Payee Caliz-Aguilar, Franco, , ,	Date of Public Distribution/Dissemination
Mailing Address 1536 U St NW	Amount
City State Zip Code Washington DC 20009	751.29 Transaction ID : 24-01-00889-0040
Purpose of Expenditure Reimbursed Ride Share Services - See Memo's Category/ Type	Date of Disbursement or Obligation 10 19 2022
Suksa Emilia	office Sought: W House District: 13 Procident Separa State: OH
Calendar Year-To-Date	isbursement For: Primary X General
Full Name of Payee Blacklane	Date of Public Distribution/Dissemination 10 Other (specify) ▶ 10 Date of Public Distribution/Dissemination
Mailing Address Feuigstrasse 59	Amount
City State Zip Code Berlin, Germany 20001	751.29 Transaction ID: 24-01-00889-02587 Date of Disbursement or Obligation
Purpose of Expenditure Ride Share Services Category/ Type	10 19 2022
Name of Federal Candidate Sykes, Emilia, , , Oppose	Office Sought: W House District: 13
	Disbursement For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures	751.29
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of e party committee) any political party committee or its agent.	
Young, Ryan, , , [Electronically Filed] Date	10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

Schedule E)	IDENT EXTEND	HONES		PAGE 9 OF 47 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FE	C IDENTIFICATION NUMBER ▼
Community Change Voters			C	C00612820
Check if 24-hour report 🗴 48-hour report	ort New rep	ort Amends repo	ort filed on	/ / D = D / Y = Y = Y
Full Name of Payee Trilogy Interactive, LLC			Date of F	
Mailing Address PO Box 4177			Amount	11 2022
City	State	Zip Code		341.70
Mountain View	CA	94040		ion ID : 24-01-00882-02555 Disbursement or Obligation
Purpose of Expenditure Digital Ads		Category/ Type	10	M / D D / Y T Y T Y
Name of Federal Candidate		✗ Support	Office Sought:	House District: 00
Kelly, Mark, , ,		Oppose	President	Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought	,,,,,	341.70	Disbursement For 2022 Other	or: Primary x General r (specify) ▶
Full Name of Payee Trilogy Interactive, LLC			Date of F	Public Distribution/Dissemination
Mailing Address PO Box 4177			09 Amount	30 2022
			/ tillount	
City Mountain View	State CA	Zip Code 94040		161.98 on ID : 24-01-00882-02557
Purpose of Expenditure Digital Ads		Category/ Type	Date of L	
Name of Federal Candidate		✗ Support	Office Sought:	House District: 00
Kelly, Mark, , ,		Oppose	President	Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought	,	503.68	Disbursement For 2022 Othe	or: Primary X General r (specify) ▶
(a) SUBTOTAL of Itemized Independent Exp	enditures		.	503.68
(b) SUBTOTAL of Unitemized Independent E	xpenditures			
(c) TOTAL Independent Expenditures			•	7 1 7 1 7
Under penalty of perjury I certify that the inc with, or at the request or suggestion of, any party committee) any political party committee	candidate or authorized			
Young, Ryan, , , Signature	[Electron	nically Filed] Date		19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature				

Schedule E)		ATOTILO		PAGE 10 OF 47 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			F	EC IDENTIFICATION NUMBER ▼
Community Change Voters				C C00612820
Check if 24-hour report 48-hour report	New re	port Amends repo	ort filed on	M / D = D / Y = Y = Y
Full Name of Payee Trilogy Interactive, LLC			M	
Mailing Address PO Box 4177			Amount	0 16 2022
City	State	Zip Code		349.21
Mountain View	CA	94040		tion ID: 24-01-00882-02560 Disbursement or Obligation
Purpose of Expenditure Digital Ads		Category/ Type	M 1	M / D D / Y Y Y Y
Name of Federal Candidate		x Support	Office Sought:	House District: 00
Kelly, Mark, , ,		Oppose	President	
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	852.89	Disbursement F 2022 Other	For: Primary X General er (specify) ▶
Full Name of Payee Trilogy Interactive, LLC			Date of	Public Distribution/Dissemination
Mailing Address PO Box 4177			1	0 01 2022
			Amount	
City	State	Zip Code		211.99
Mountain View	CA	94040		ion ID: 24-01-00882-02511 Disbursement or Obligation
Purpose of Expenditure Digital Ads		Category/ Type	M 10	
Name of Federal Candidate		x Support	Office Sought:	House District: 00
Kelly, Mark, , ,		Oppose	Presiden	t Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought		1064.88	Disbursement I 2022 Oth	For: Primary ★ General er (specify) ►
(a) SUBTOTAL of Itemized Independent Expendi	tures			561.20
(b) OUDTOTAL of Heliconical Independent Francisco	- Phone -			7 7 7
(b) SUBTOTAL of Unitemized Independent Exper	nditures		• -	4 4 4
(c) TOTAL Independent Expenditures			•	7 1 7 1 7
Under penalty of perjury I certify that the independent, or at the request or suggestion of, any canon party committee) any political party committee or	lidate or authorize			
Young, Ryan, , ,	[Electro	nically Filed] Date		19 2022
Signature				

Schedule E)	I EXI END	ITOTILO		PAGE 11 OF 47 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Community Change Voters				C C00612820
Check if 24-hour report 48-hour report	X New rep	ort Amends repo	ort filed on	M
Full Name of Payee Trilogy Interactive, LLC				of Public Distribution/Dissemination
Mailing Address PO Box 4177			Amou	10 12 2022 unt
City	State	Zip Code		332.89
Mountain View	CA	94040		saction ID: 24-01-00882-02514 of Disbursement or Obligation
Purpose of Expenditure Digital Ads		Category/ Type		10 19 / 2022
Name of Federal Candidate		x Support	Office Sough	nt: House District: 00
Kelly, Mark, , ,		Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought	7 7	1397.77	Disbursemen 2022	nt For:
Full Name of Payee Trilogy Interactive, LLC				of Public Distribution/Dissemination
Mailing Address PO Box 4177			Amou	10 13 2022 unt
City	State	Zip Code		330.67
Mountain View	CA	94040		action ID: 24-01-00882-02515 of Disbursement or Obligation
Purpose of Expenditure Digital Ads		Category/ Type		10 19 2022
Name of Federal Candidate		x Support	Office Sough	nt: House District: 00
Kelly, Mark, , ,		Oppose	Presid	lent Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought	, , ,	1728.44	Disbursemer 2022	nt For: Primary X General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditure	es		. [663.56
(b) SUBTOTAL of Unitemized Independent Expendit	turge			7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
(b) SOBTOTAL OF OTHER MIZES INSEPTEMENT EXPENSION				1 1/2 1 1 1/2 1
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Young, Ryan, , , Signature	[Electron	ically Filed] Date	10	19 / 2022
Olyriature				

Schedule E)	II EXPEND	ITUNES		PAGE 12 OF 47 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Community Change Voters				C C00612820
Check if 24-hour report X 48-hour report	X New rep	oort Amends repo		M = M / D = D / Y = Y = Y
Full Name of Payee Trilogy Interactive, LLC				of Public Distribution/Dissemination
Mailing Address PO Box 4177			L	10 14 2022
TO BOX 4111			Amou	ınt
City	State	Zip Code		334.43
Mountain View	CA	94040		saction ID: 24-01-00882-02516 of Disbursement or Obligation
Purpose of Expenditure Digital Ads		Category/ Type		10 19 / 2022
Name of Federal Candidate		x Support	Office Sough	nt: House District: 00
Kelly, Mark, , ,		Oppose	Presid	ent Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought	, , ,	2062.87	Disbursemer 2022	nt For:
Full Name of Payee	_		Date	of Public Distribution/Dissemination
Trilogy Interactive, LLC				10 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 4177			Amou	unt
City	State	Zip Code	— F	210.43
Mountain View	CA	94040		action ID: 24-01-00882-02517 of Disbursement or Obligation
Purpose of Expenditure Digital Ads		Category/ Type		10 19 / 2022
Name of Federal Candidate		✗ Support	Office Sough	ht: House District: 00
Kelly, Mark, , ,		Oppose	Presid	Δ7
Calendar Year-To-Date Per Election for Office Sought	7	2273.30	Disbursemer 2022	nt For:
(a) SUBTOTAL of Itemized Independent Expenditure				
(a) SOBTOTAL of Remized Independent Expenditure	es		•	544.86
(b) SUBTOTAL of Unitemized Independent Expend	itures		• •	
(c) TOTAL Independent Expenditures			•	7 1 7 1 7
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized			
Young, Ryan, , ,	[Electron	nically Filed] Date	10	19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature				

Schedule E)	APENDITORES	PAGE 13 OF 47 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Community Change Voters		C C00612820
Check if 24-hour report 🗶 48-hour report	New report Amends report	filed on fil
Full Name of Payee Trilogy Interactive, LLC		Date of Public Distribution/Dissemination
Mailing Address PO Box 4177		10 03 2022
		Amount
City Stat	e Zip Code	217.74
Mountain View CA	94040	Transaction ID: 24-01-00882-02518 Date of Disbursement or Obligation
Purpose of Expenditure Digital Ads	Category/ Type	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	✗ Support (Office Sought: House District:00
Kelly, Mark, , ,	Oppose	President State: AZ
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary General 2022 Other (specify)
Full Name of Payee		Date of Public Distribution/Dissemination
Trilogy Interactive, LLC		10 04 2022
Mailing Address PO Box 4177		Amount
City Sta	te Zip Code	205.45
Mountain View CA	A 94040	Transaction ID : 24-01-00882-02519 Date of Disbursement or Obligation
Purpose of Expenditure Digital Ads	Category/ Type	10 19 / 2022
Name of Federal Candidate	✗ Support	Office Sought: House District:00
Kelly, Mark, , ,	Oppose	President State: AZ
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary Queen General Other (specify) ☐ Primary ☐ General ☐ General
(a) SUBTOTAL of Itemized Independent Expenditures		
(a) CODIONIZ SI NOMIZOU MUSPOMONI ZAPOMAKAIOOMMI		423.19
(b) SUBTOTAL of Unitemized Independent Expenditures.		>
(c) TOTAL Independent Expenditures		•
Under penalty of perjury I certify that the independent ex with, or at the request or suggestion of, any candidate or party committee) any political party committee or its agent	authorized committee or agent of	
Young, Ryan, , ,	[Electronically Filed] Date	10 19 2022
Signature		

Schedule E)	DENT EXICITE	TIONES		PAGE 14 OF 47 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC I	DENTIFICATION NUMBER ▼
Community Change Voters			С	C00612820
Check if 24-hour report X 48-hour report	rt New re	port Amends repo	rt filed on	/ D = D / Y = Y = Y
Full Name of Payee Trilogy Interactive, LLC			M = M	ic Distribution/Dissemination
Mailing Address PO Box 4177			Amount	05 2022
City	State	Zin Codo		244.65
Mountain View	CA	Zip Code 94040		214.65 ID: 24-01-00882-02520 pursement or Obligation
Purpose of Expenditure Digital Ads		Category/ Type	10	19 2022
Name of Federal Candidate		x Support	Office Sought:	House District: 00
Kelly, Mark, , ,		Oppose	President	Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought		2911.14	Disbursement For: 2022 Other (s	Primary x General pecify) ▶
Full Name of Payee Trilogy Interactive, LLC			M = M	lic Distribution/Dissemination
Mailing Address PO Box 4177			Amount	06 2022
City	State	Zip Code		266.77
Mountain View	CA	94040		ID : 24-01-00882-02521 bursement or Obligation
Purpose of Expenditure Digital Ads		Category/ Type	10	19 / 2022
Name of Federal Candidate		x Support	Office Sought:	House District: 00
Kelly, Mark, , ,		Oppose	President	Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought		3177.91	Disbursement For: 2022 Other (s	Primary X General specify) ▶
(a) SUBTOTAL of Itemized Independent Expe	nditures			481.42
(b) SUBTOTAL of Unitemized Independent Ex	roondituroo			4
(b) SOBTOTAL OF OFFICE INTERPRETATION OF THE PROPERTY OF THE P	penditures		-	495
(c) TOTAL Independent Expenditures)	
Under penalty of perjury I certify that the indewith, or at the request or suggestion of, any committee) any political party committee	andidate or authorize			
Young, Ryan, , , Signature	[Electro	nically Filed] Date	10 19	2022
Jigilatul e				

Schedule E)	LXI LIVUI	TOTILO		PAGE 15 OF 47 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Community Change Voters				C C00612820
Check if 24-hour report 48-hour report	x New repo	ort Amends repo		M / D D / Y Y Y Y Y
Full Name of Payee Trilogy Interactive, LLC			M	of Public Distribution/Dissemination
Mailing Address PO Box 4177			Amour	10 07 2022 nt
l '	State CA	Zip Code 94040		259.77 action ID : 24-01-00882-02522
Purpose of Expenditure Digital Ads		Category/ Type		of Disbursement or Obligation 10 19 2022
Name of Federal Candidate Kelly, Mark, , ,		Support Oppose	Office Sought	
Calendar Year-To-Date Per Election for Office Sought		3437.68	Disbursement 2022	For: Primary X General
Full Name of Payee Trilogy Interactive, LLC	,		Date o	ther (specify) ► of Public Distribution/Dissemination 10 08 2022
Mailing Address PO Box 4177			Amour	
1 '	State CA	Zip Code 94040		287.74 ction ID : 24-01-00882-02523 of Disbursement or Obligation
Purpose of Expenditure Digital Ads		Category/ Type	M	10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Kelly, Mark, , ,		Support Oppose	Office Sought	Δ7
Calendar Year-To-Date Per Election for Office Sought		3725.42	Disbursement 2022	t For: Primary General ther (specify)
(a) SUBTOTAL of Itemized Independent Expenditures				547.51
(b) SUBTOTAL of Unitemized Independent Expenditure	?S		•	
(c) TOTAL Independent Expenditures			•	711717
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its age	or authorized			
Young, Ryan, , , Signature	[Electroni	cally Filed] Date	10	19 / 2022

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

	silicatic Ly	FOR SE OF FORM 24/48
	AME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
C	Community Change Voters	C C00612820
Ch	neck if 24-hour report 48-hour report New report Amends report file	ed on Man / Dad / Yayayay
	Full Name of Payee	Date of Public Distribution/Dissemination
	Trilogy Interactive, LLC	10 09 2022
	Mailing Address PO Box 4177	Amount
	City State Zip Code	292.36
	Mountain View CA 94040	Transaction ID : 24-01-00882-02524 Date of Disbursement or Obligation
	Purpose of Expenditure Digital Ads Category/ Type	10 19 2022
	Name of Federal Candidate Support Off	ice Sought: House District:00
	Kelly, Mark, , ,	President X Senate State: AZ
	odicinda iodi io bato	bursement For: Primary X General
	Per Election for Office Sought 4017.78 202	Other (specify)
	Full Name of Payee Trilogy Interactive, LLC	Date of Public Distribution/Dissemination
	Mailing Address PO Box 4177	10 10 2022 Amount
	City State Zip Code	308.69
	Mountain View CA 94040	Transaction ID : 24-01-00882-02525 Date of Disbursement or Obligation
	Purpose of Expenditure Digital Ads Category/ Type	M 10 / 19 / Y Y Y Y Y Y Y
	Name of Federal Candidate Support Off	ice Sought: House District:00
	Kelly, Mark, , ,	President Senate State: AZ
	Calendar Year-To-Date Per Election for Office Sought Dis 20.	sbursement For: Primary General Other (specify) ☐ Primary ☐ General
	(a) SUBTOTAL of Itemized Independent Expenditures	601.05
	(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
	(c) TOTAL Independent Expenditures	
	Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	
	Young, Ryan, , , [Electronically Filed] Date	10 19 2022
	Signature	
_		

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OF

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Schedule E)	I ENDITORIES	PAGE 17 OF 47 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Community Change Voters		C C00612820
Check if 24-hour report 48-hour report	New report Amends report file	ed on Man / Dad / Yayayay
Full Name of Payee Trilogy Interactive, LLC		Date of Public Distribution/Dissemination
Mailing Address PO Box 4177		10 15 2022 Amount
City State Mountain View CA	Zip Code 94040	342.36 Transaction ID : 24-01-00882-02528
Purpose of Expenditure Digital Ads	Category/	Date of Disbursement or Obligation 10 19 2022
Name of Federal Candidate Kelly, Mark, , ,		ce Sought: House District: 00
Calendar Year-To-Date Per Election for Office Sought	Oppose Dis 4668.83	bursement For: Primary Seneral
Full Name of Payee Trilogy Interactive, LLC		Date of Public Distribution/Dissemination 10 17 2022
Mailing Address PO Box 4177		Amount
City State Mountain View CA		3031.17 Transaction ID : 24-01-00882-02529 Date of Disbursement or Obligation
Purpose of Expenditure Digital Ads	Category/ Type	10 19 2022
Name of Federal Candidate Kelly, Mark, , ,	Support Off Oppose	rice Sought: House District: O President Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought	7700.00 Dis 202	bursement For: Primary ☐ Primary ☐ General ☐ Other (specify) ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
(a) SUBTOTAL of Itemized Independent Expenditures	•	3373.53
(b) SUBTOTAL of Unitemized Independent Expenditures	>	
(c) TOTAL Independent Expenditures	·····	
Under penalty of perjury I certify that the independent exp with, or at the request or suggestion of, any candidate or a party committee) any political party committee or its agent.		
Young, Ryan, , , Signature	[Electronically Filed] Date	10 19 / 2022

Schedule E)	PAGE 18 OF 47 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Community Change Voters	C C00612820
Check if 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
Full Name of Payee Caliz-Aguilar, Franco, , ,	Date of Public Distribution/Dissemination
Mailing Address 1536 U St NW	mount
**************************************	122.91 Fransaction ID: 24-01-00883-0029 Date of Disbursement or Obligation
Purpose of Expenditure Reimbursed Ride Share Services - See Memo's Category/ Type	10 19 2022
Name of Federal Candidate X Support Office So	ought: House District: 00
Kelly Mark	resident Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought Disburse 2022	ement For: Primary x General Other (specify) ▶
Full Name of Payee Blacklane x	Date of Public Distribution/Dissemination
Mailing Address Feuigstrasse 59	Amount
City State Zip Code	122.91
Purpose of Expanditure	ansaction ID: 24-01-00883-02564 Date of Disbursement or Obligation
Ride Share Services Category/ Type	10 19 / 2022
Name of Federal Candidate Kelly, Mark, , , Onnose	
Calendar Year-To-Date Disburse	resident X Senate State: A2 ement For: Primary X General
Per Election for Office Sought 0.00 2022	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	122.91
(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 with, or at the request or suggestion of, any candidate or authorized committee or agent of either, o party committee) any political party committee or its agent.	
Young, Ryan, , , [Electronically Filed] Date 10	19 2022
Oignatule	

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Community Change Voters	C C00612820
Check if 24-hour report 48-hour report New report Amends report filed	on Man / Dab / Yayayay
Full Name of Payee Community Change Action	Date of Public Distribution/Dissemination
, ,	10 31 2022
Mailing Address 1536 U Street NW	Amount
City State Zip Code	31.25
Washington DC 20009	Transaction ID: 24-01-00884-02565 Date of Disbursement or Obligation
Purpose of Expenditure Staff: Drafting communications Category/ Type	10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	Sought: House District: 00
Kelly, Mark, , ,	President Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought Disbut 2022	rsement For: Primary X General Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Community Change Action	10 15 2022
Mailing Address 1536 U Street NW	Amount
City State Zip Code	218.75
Washington DC 20009	Transaction ID: 24-01-00884-02567 Date of Disbursement or Obligation
Purpose of Expenditure Staff: Drafting communications Category/ Type	10 19 2022
Name of Federal Candidate Support Office	e Sought: House District: 00
Masters, Blake, , ,	President Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought Disbut 2022	orsement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	250.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	· · · · · · · · · · · · · · · · · · ·
Young, Ryan, , , [Electronically Filed] Date 1	0 19 2022
Signature	

Schedule E)	PAGE 20 OF 47 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	DENTIFICATION NUMBER ▼
Community Change Voters	C00612820
Check if 24-hour report	/ D = D / Y = Y = Y
Community Change Action	ic Distribution/Dissemination
Mailing Address 1536 U Street NW Amount	15 2022
City State Zip Code Washington DC 20009 Transaction	90.91 ID : 24-01-00884-02571
Purpose of Expenditure Staff: Drafting communications Category/ Type Date of Disbrate of	ursement or Obligation 19 2022
Name of Federal Candidate X Support Office Sought:	House District: 00
Calendar Year-To-Date Disbursement For:	Senate State: AZ Primary General
Other (sp	pecify) ▶ic Distribution/Dissemination
Stones' Phones	19 2022
Amount	
	20000.10 D : 24-01-00876-02494 ursement or Obligation
Purpose of Expenditure Live Calls Category/ Type 10	18 2022
Name of Federal Candidate Support Office Sought:	House District: 00
Warnock, Raphael, , , Oppose President	Senate State: GA
Calendar Year-To-Date Per Election for Office Sought Disbursement For: 2022 Other (s	Primary X General pecify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	20091.01
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	4 1 4
Under penalty of perjury I certify that the independent expenditures reported herein were not made in coopera with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the rep party committee) any political party committee or its agent.	
Young, Ryan, , , [Electronically Filed] Date 10 19	2022

Schedule E)		71101120		PAGE 21 OF 47 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FFC	IDENTIFICATION NUMBER ▼
Community Change Voters			C	C00612820
Check if 24-hour report X 48-hour report	X New re	port Amends repo	ort filed on	/ D D / Y D Y D Y
Full Name of Payee Trilogy Interactive, LLC			M = M	olic Distribution/Dissemination
Mailing Address PO Box 4177			Amount	17 2022
City Mountain View	State CA	Zip Code 94040		4054.89 n ID : 24-01-00882-02559
Purpose of Expenditure Digital Ads		Category/ Type	Date of Dis	bursement or Obligation / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Warnock, Raphael, , ,		Support Oppose	Office Sought:	House District: 00 Separate State: GA
Calendar Year-To-Date Per Election for Office Sought		34127.60	Disbursement For:	
Full Name of Payee Trilogy Interactive, LLC	<u> </u>			blic Distribution/Dissemination 16 2022
Mailing Address PO Box 4177			Amount	
City Mountain View	State CA	Zip Code 94040		645.11 ID: 24-01-00882-02526 Sursement or Obligation
Purpose of Expenditure Digital Ads		Category/ Type	10	19 / 2022
Name of Federal Candidate Warnock, Raphael, , ,		Support Oppose	Office Sought:	House District: 00 Senate State: GA
Calendar Year-To-Date Per Election for Office Sought		34772.71	Disbursement For 2022 Other	: Primary ★ General
(a) SUBTOTAL of Itemized Independent Expendent	ditures		>	4700.00
(b) SUBTOTAL of Unitemized Independent Exp	enditures		·· •	7- 1-7- 1-75-
(c) TOTAL Independent Expenditures			· •	7 1 7 1 7
Under penalty of perjury I certify that the indep with, or at the request or suggestion of, any car party committee) any political party committee o	ndidate or authorize			
Young, Ryan, , , Signature	[Electro	nically Filed] Date	10 19	

Schedule E)	PAGE 22 OF 47 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Community Change Voters	C C00612820
Check if 24-hour report 48-hour report New report Amends report file	ed on Mam / Dad / Yayayay
Full Name of Payee Community Change Action	Date of Public Distribution/Dissemination
Mailing Address 1536 U Street NW	10 15 2022 Amount
City State Zip Code Washington DC 20009	75.00 Transaction ID : 24-01-00884-02569
Purpose of Expenditure Staff: Drafting communications Category/ Type	Date of Disbursement or Obligation
Name of Federal Candidate Support Offi Beasley, Cheri, , ,	ce Sought: House District: 00 President Senate State: NC
	bursement For: Primary X General
Full Name of Payee Community Change Action	Date of Public Distribution/Dissemination
Mailing Address 1536 U Street NW	Amount
City State Zip Code Washington DC 20009	39.63 Transaction ID: 24-01-00885-02576 Date of Disbursement or Obligation
Purpose of Expenditure Live Calls Category/ Type	10 19 2022
Name of Federal Candidate Beasley, Cheri, , , Oppose Offi	ce Sought: House District: 00 President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought Dis 202	bursement For: Primary ★ General 22 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	114.63
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not r with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	
Young, Ryan, , , [Electronically Filed] Date	10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

Schedule E)	DENT EXILID	TTOTILO		PAGE 23 OF 47 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				ENTIFICATION NUMBER ▼
Community Change Voters				C00612820
Check if 24-hour report 🗶 48-hour repor	t New rep	port Amends repo	ort filed on	D = D / Y = Y = Y
Full Name of Payee Community Change Action			M = M /	Distribution/Dissemination
Mailing Address 1536 U Street NW			Amount	13 2022
City Washington	State DC	Zip Code 20009	Transaction II	66.47 D : 24-01-00890-02593
Purpose of Expenditure Live Calls		Category/ Type	Date of Disbur	rsement or Obligation 19 2022
Name of Federal Candidate Beasley, Cheri, , ,		✗ Support	Office Sought:	House District: 00
Calendar Year-To-Date Per Election for Office Sought		Oppose 181.10	Disbursement For: 2022	Primary General
Full Name of Payee Community Change Action	7			: Distribution/Dissemination
Mailing Address 1536 U Street NW			Amount	14 2022
City Washington	State DC	Zip Code 20009	Transaction ID	0.25 : 24-01-00890-02594
Purpose of Expenditure Live Calls		Category/ Type	Date of Disbu	rsement or Obligation
Name of Federal Candidate Beasley, Cheri, , ,		Support Oppose	Office Sought:	House District: 00 Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		181.35	Disbursement For: 2022 Other (spe	Primary Seneral
(a) SUBTOTAL of Itemized Independent Expe	nditures			66.72
(b) SUBTOTAL of Unitemized Independent Ex	penditures		•	7 7
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the indewith, or at the request or suggestion of, any committee) any political party committee	andidate or authorized			
Young, Ryan, , , Signature	[Electron	nically Filed] Date	10 / 19	2022

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

NAME OF COMMITTEE (In Full)	1
	FEC IDENTIFICATION NUMBER ▼
Community Change Voters	C C00612820
Check if 24-hour report 48-hour report New report Amends report filed or	n M = M / D = D / Y = Y = Y = Y
	Date of Public Distribution/Dissemination
Community Change Action	10 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1536 U Street NW	Amount
City State Zip Code	8.33
	Transaction ID: 24-01-00890-02595 Date of Disbursement or Obligation
Purpose of Expenditure Live Calls Category/ Type	10 19 2022
Name of Federal Candidate Support Office S	Sought: House District: 00
Roadley Chari	President Senate State: NC
Calcificat to Bate	ement For: Primary
Per Election for Office Sought 189.68 2022	Other (specify) ▶
Full Name of Payee Trilogy Interactive, LLC	Date of Public Distribution/Dissemination
Mailing Address PO Box 4177	10 13 2022 Amount
City State Zip Code	3.27
	ransaction ID: 24-01-00881-02501 Date of Disbursement or Obligation
Purpose of Expenditure Digital Ads Category/ Type	10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office S	Sought: House District: 00
	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought Disburs 27879.97 Disburs	ement For: Primary General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	11.60
(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 with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
Young, Ryan, , , [Electronically Filed] Date 10	19 2022
Signature	

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Schedule E)	PAGE 25 OF 47 FOR SE OF FORM 24/48
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Community Change Voters	C C00612820
Check if 24-hour report	M = M / D = D / Y = Y = Y
Full Name of Payee Date	e of Public Distribution/Dissemination
Trilogy Interactive, LLC	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 4177 Amo	ount
City State Zip Code	398.65
Mountain View CA 94040 Tran	nsaction ID : 24-01-00881-02502 e of Disbursement or Obligation
Purpose of Expenditure Digital Ads Category/ Type	10 19 2022
Name of Federal Candidate Name of Federal Candidate Support Office Soug	ght: House District: 00
Cortez Masto, Catherine, , , Oppose Presi	ident State: NV
Calendar Year-To-Date Per Election for Office Sought Disburseme 2022	ent For: Primary General Other (specify)
	e of Public Distribution/Dissemination
Trilogy Interactive, LLC	10 15 2022
Mailing Address PO Box 4177 Amo	ount
City State Zip Code	411.80
	saction ID : 24-01-00881-02503 e of Disbursement or Obligation
Purpose of Expenditure Digital Ads Category/ Type	10 19 / 2022
Name of Federal Candidate Support Office Sou	ght: House District: 00
Cortez Masto, Catherine, , , Oppose Pres	ident State: NV
Calendar Year-To-Date Per Election for Office Sought Disburseme 28690.42 Disburseme 2022	ent For: Primary X General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	810.45
(I) CURTOTAL of Heiberies deleter and set Emperithmen	7 7 7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	1 195 1 105
(c) TOTAL Independent Expenditures	7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (party committee) any political party committee or its agent.	
Young, Ryan, , , [Electronically Filed] Date 10	19 2022
Signature	

Schedule E)	DENT EXICIO	TIONES		PAGE 26 OF 47 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC II	DENTIFICATION NUMBER ▼
Community Change Voters			C	C00612820
Check if 24-hour report X 48-hour repo	rt New rep	port Amends repo	rt filed on	/ D = D / Y = Y = Y
Full Name of Payee Trilogy Interactive, LLC			M = M	c Distribution/Dissemination
Mailing Address PO Box 4177			Amount	16 2022
0.1	Otata	7'- 0-1-		445.00
City Mountain View	State CA	Zip Code 94040		415.28 ID: 24-01-00881-02504 ursement or Obligation
Purpose of Expenditure Digital Ads		Category/ Type	M 10	/ 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		✗ Support	Office Sought:	House District: 00
Cortez Masto, Catherine, , ,		Oppose		Senate State: NV
Calendar Year-To-Date Per Election for Office Sought	,,,,,	29105.70	Disbursement For: 2022 Other (sp	Primary ✗ General pecify) ▶
Full Name of Payee Trilogy Interactive, LLC			Date of Publi	ic Distribution/Dissemination
Mailing Address PO Box 4177			Amount	17 2022
City	State	Zip Code		3471.00
Mountain View	CA	94040		D : 24-01-00881-02505 ursement or Obligation
Purpose of Expenditure Digital Ads		Category/ Type	10	19 2022
Name of Federal Candidate		x Support	Office Sought:	House District: 00
Cortez Masto, Catherine, , ,		Oppose	President	Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		32576.70	Disbursement For: 2022 Other (s	Primary ✗ General pecify) ▶
(a) SUBTOTAL of Itemized Independent Expo	enditures		>	3886.28
(b) SUBTOTAL of Unitemized Independent E	xpenditures		· • · · · · ·	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the ind with, or at the request or suggestion of, any oparty committee) any political party committee	candidate or authorize			
Young, Ryan, , , Signature	[Electron	nically Filed] Date	10 / 19	2022
•				

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

	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Community Change Voters	C C00612820
Check if 24-hour report 48-hour report New report Amends report filed or	1 M = M / D = D / Y = Y = Y = Y
Full Name of Payee	Date of Public Distribution/Dissemination
Community Change Action	10 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1536 U Street NW	Amount
City State Zip Code	309.66
Washington DC 20009	Fransaction ID: 24-01-00884-02573 Date of Disbursement or Obligation
Purpose of Expenditure Staff: Drafting communications Category/ Type	10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office S	Sought: House District: 00
Cortez Masto, Catherine, , ,	resident Senate State: NV
Calendar Year-To-Date Per Election for Office Sought Disburse 2022	ement For: Primary X General
Full Name of Payee	Other (specify)
Stones' Phones	Date of Public Distribution/Dissemination 10 21 2022
Mailing Address 41-750 Ranco Las Palmas Dr Ste E-3	Amount
City State Zip Code	8333.23
	ransaction ID: 24-01-00887-02584 Date of Disbursement or Obligation
Purpose of Expenditure Live Calls Category/ Type	10 / 19 / 2022
Name of Federal Candidate X Support Office S	Sought: House District: 00
Cortez Masto, Catherine, , , Oppose	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought Disburs 2022	ement For:
(a) SUBTOTAL of Itemized Independent Expenditures	8642.89
(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 with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
Young, Ryan, , , [Electronically Filed] Date 10	19 2022
Signature	

PAGE

OF

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Schedule E)	IDENT EXTEND	HONES		PAGE 28 OF 47 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Community Change Voters				C C00612820
Check if 24-hour report X 48-hour report	ort New rep	oort Amends repo	ort filed on	M / D = D / Y = Y = Y
Full Name of Payee			Date	of Public Distribution/Dissemination
Stones' Phones				10 17 2022
Mailing Address 41-750 Ranco Las Palmas	Dr Ste E-3		Amou	nt
City	State	Zip Code		13061.62
Rancho Mirage	CA	92270		action ID : 24-01-00875-02491 of Disbursement or Obligation
Purpose of Expenditure Live Calls		Category/ Type	N	10 18 / 2022
Name of Federal Candidate		x Support	Office Sough	t: House District:00
Barnes, Mandela, , ,		Oppose	Preside	ent Senate State: WI
Calendar Year-To-Date Per Election for Office Sought		13061.62	Disbursemen 2022 O	t For: Primary X General ther (specify) ▶
Full Name of Payee			Date	of Public Distribution/Dissemination
Trilogy Interactive, LLC				10 03 7 2022
Mailing Address PO Box 4177			Amou	nt
City	State	Zip Code	— I .	264.72
Mountain View	CA	94040		oction ID: 24-01-00882-02534 of Disbursement or Obligation
Purpose of Expenditure Digital Ads		Category/ Type		10 / 19 / 2022
Name of Federal Candidate		x Support	Office Sough	it: House District: 00
Barnes, Mandela, , ,		Oppose	Preside	ent Senate State: WI
Calendar Year-To-Date Per Election for Office Sought		13326.34	Disbursemer 2022	tt For:
(a) SUBTOTAL of Itemized Independent Exp	enditures			13326.34
			,	7 7
(b) SUBTOTAL of Unitemized Independent E	xpenditures		•	7 7
(c) TOTAL Independent Expenditures			· •	7
Under penalty of perjury I certify that the inc with, or at the request or suggestion of, any party committee) any political party committee	candidate or authorized			
Young, Ryan, , ,	[Electron	nically Filed] Date	e 10	19 2022
Signature				

Schedule E)	PAGE 29 OF 47 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Community Change Voters	C C00612820
Check if 24-hour report	M / D D / Y D Y D Y
Trilogy Interactive, LLC	Public Distribution/Dissemination
Mailing Address PO Box 4177 Amount	16 2022
City State Zip Code Mountain View CA 94040 Transac	531.54 ction ID : 24-01-00882-02535
Purpose of Expenditure Category/	Disbursement or Obligation 10 19 2022
Name of Federal Candidate X Support Office Sought:	
Barnes, Mandela, , , Calendar Year-To-Date Disbursement	
	ner (specify) f Public Distribution/Dissemination
Trilogy Interactive, LLC	10 16 2022
Mailing Address PO Box 4177 Amount	t
	114.86 tion ID: 24-01-00882-02536 f Disbursement or Obligation
Purpose of Expenditure Category/	0 / 19 / 2022
Name of Federal Candidate Support Office Sought:	House District:00
Johnson, Ron, Harold, , Presider	nt Senate State: WI
Calendar Year-To-Date Per Election for Office Sought Disbursement 2022 Oth	For: Primary X General ner (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	646.40
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in co- with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the party committee) any political party committee or its agent.	
Young, Ryan, , , [Electronically Filed] Date 10	19 / 2022

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

Schedule E)	FOR SE OF FORM 24/48
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Community Change Voters	C C00612820
Check if 24-hour report 48-hour report New report Amends report filed	on Mam / Dab / Yayayay
Full Name of Payee Trilogy Interactive, LLC	Date of Public Distribution/Dissemination
	10 17 2022
Mailing Address PO Box 4177	Amount
City State Zip Code	4885.53
Mountain View CA 94040	Transaction ID: 24-01-00882-02537 Date of Disbursement or Obligation
Purpose of Expenditure Digital Ads Category/ Type	10 19 / 2022
Name of Federal Candidate Support Office	e Sought: House District: 00
Barnes, Mandela, , ,	President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought Disbut 2022	ursement For: Primary X General Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Trilogy Interactive, LLC	10 04 7 2022
Mailing Address PO Box 4177	Amount
City State Zip Code	379.09
Mountain View CA 94040	Transaction ID : 24-01-00882-02538
Purpose of Expenditure Digital Ads Category/	Date of Disbursement or Obligation 10 19 2022
Туре	10 13 2022
	e Sought: House District: 00
Barnes, Mandela, , , Oppose	President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought Disbut 2022	orsement For: Primary
-	
(a) SUBTOTAL of Itemized Independent Expenditures	5264.62
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	· · · · · · · · · · · · · · · · · · ·
Young, Ryan, , , [Electronically Filed] Date 1	0 19 2022
Signature	

47 PAGE OF (Schedule E) FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ Community Change Voters C00612820 24-hour report **✗** 48-hour report X New report Amends report filed on Check if Full Name of Payee Date of Public Distribution/Dissemination Trilogy Interactive, LLC 2022 10 05 Mailing Address PO Box 4177 Amount State Zip Code City 403.74 Transaction ID: 24-01-00882-02539 Mountain View CA 94040 Date of Disbursement or Obligation Purpose of Expenditure Category/ Digital Ads 10 19 2022 Type Name of Federal Candidate 00 Office Sought: × Support House District: Barnes, Mandela, , , WI Oppose **X** Senate President State: Disbursement For: Primary **✗** General Calendar Year-To-Date 19641.10 2022 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Trilogy Interactive, LLC 06 2022 Mailing Address PO Box 4177 Amount City State Zip Code 431.77 CA 94040 Transaction ID: 24-01-00882-02540 Mountain View Date of Disbursement or Obligation Purpose of Expenditure Category/ Digital Ads 10 19 2022 Type Name of Federal Candidate 00 **✗** Support Office Sought: House District: Barnes, Mandela, , , WI Oppose President Senate State: Primary **✗** General Calendar Year-To-Date Disbursement For: 2022 20072.87 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 835.51 (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. Young, Ryan, , , [Electronically Filed] 10 19 2022 Date Signature

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

Schedule E)	FOR SE OF FORM 24/48
JAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Community Change Voters	C C00612820
Check if 24-hour report 48-hour report New report Amends report filed	on Man / Dab / Yayayay
Full Name of Payee Trilogy Interactive, LLC	Date of Public Distribution/Dissemination
	10 07 2022
Mailing Address PO Box 4177	Amount
City State Zip Code	431.66
Mountain View CA 94040	Transaction ID: 24-01-00882-02541 Date of Disbursement or Obligation
Purpose of Expenditure Digital Ads Category/ Type	10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District: 00
Barnes, Mandela, , , Oppose	President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought Disbut 20504.53	ursement For: Primary X General Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Trilogy Interactive, LLC	10 08 2022
Mailing Address PO Box 4177	Amount
City State Zip Code	466.20
Mountain View CA 94040	Transaction ID : 24-01-00882-02542
Purpose of Expenditure Digital Ads Category/	Date of Disbursement or Obligation 10 19 2022
Туре	10 19 2022
	e Sought: House District: 00
Barnes, Mandela, , , Oppose	President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought Disbrace 20970.73	orsement For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures	897.86
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	· · · · · · · · · · · · · · · · · · ·
	0 19 2022
Signature	

Schedule E)	PAGE 33 OF 47 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Community Change Voters	C C00612820
Check if 24-hour report 48-hour report New report A	Amends report filed on
Full Name of Payee Trilogy Interactive, LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 4177	10 09 2022 Amount
City State Zip Code Mountain View CA 94040	465.21 Transaction ID : 24-01-00882-02543
Purpose of Expenditure Digital Ads Category Type	
Name of Federal Candidate Barnes, Mandela, , ,	Support Office Sought: House District: 00
Calendar Year-To-Date Per Election for Office Sought 21435.9	Oppose President X Senate State: WI Disbursement For: Primary General 2022
Full Name of Payee Trilogy Interactive, LLC	Other (specify) ► Date of Public Distribution/Dissemination
Mailing Address PO Box 4177	10 10 2022
City State Zip Code	Amount 479.77
Mountain View CA 94040 Purpose of Expenditure Category.	Transaction ID : 24-01-00882-02544 Date of Disbursement or Obligation
Name of Fodoral Condidate	Se 10 19 2022
Barnes, Mandela, , ,	Support Office Sought: House District: 00 Oppose President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 21915.7	Disbursement For: Primary ★ General 2022 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	944.98
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported h with, or at the request or suggestion of, any candidate or authorized committee party committee) any political party committee or its agent.	
Young, Ryan, , , [Electronically Filed] Signature	Date 10 19 2022

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

Schedule E)	FOR SE OF FORM 24/48
JAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Community Change Voters	C C00612820
Check if 24-hour report 48-hour report New report Amends report filed	i on Mam / Dad / Yayayay
Full Name of Payee Trilogy Interactive, LLC	Date of Public Distribution/Dissemination
,	10 01 2022
Mailing Address PO Box 4177	Amount
City State Zip Code	22.19
Mountain View CA 94040	Transaction ID : 24-01-00882-02545 Date of Disbursement or Obligation
Purpose of Expenditure Digital Ads Category/ Type	10 19 / 2022
Name of Federal Candidate Support Office	e Sought: House District: 00
Johnson, Ron, Harold, ,	President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought Disbut 21937.90	ursement For: Primary General Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Trilogy Interactive, LLC	10 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 4177	Amount
City State Zip Code	49.78
Mountain View CA 94040	Transaction ID: 24-01-00882-02546
Purpose of Expenditure Digital Ads Category/ Type	Date of Disbursement or Obligation 10 19 2022
Name of Federal Candidate Support Office	e Sought: House District: 00
Johnson, Ron, Harold, ,	President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought Disb 2022	ursement For: Primary General Other (specify) Other
, , ,	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	71.97
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	•
	10 19 2022
Signature	

Schedule E)	IDENT EXTEND	TIONES		PAGE 35 OF 47 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FE	C IDENTIFICATION NUMBER ▼
Community Change Voters			C	C00612820
Check if 24-hour report X 48-hour report	ort New rep	port Amends repo	ort filed on	/ D = D / Y = Y = Y
Full Name of Payee Trilogy Interactive, LLC			Date of P	ublic Distribution/Dissemination
Mailing Address PO Box 4177			Amount	00 2022
City	State	Zip Code		49.93
Mountain View	CA	94040		on ID : 24-01-00882-02547 isbursement or Obligation
Purpose of Expenditure Digital Ads		Category/ Type	10	
Name of Federal Candidate		Support	Office Sought:	House District: 00
Johnson, Ron, Harold, ,		X Oppose	President	Senate State: WI
Calendar Year-To-Date Per Election for Office Sought		22037.61	Disbursement Fo	or: Primary x General (specify) ►
Full Name of Payee Trilogy Interactive, LLC			Date of P	Public Distribution/Dissemination
Mailing Address PO Box 4177			10 Amount	04 2022
City Mountain View	State CA	Zip Code 94040		48.13 on ID : 24-01-00882-02548 Disbursement or Obligation
Purpose of Expenditure Digital Ads		Category/ Type	10	
Name of Federal Candidate		Support	Office Sought:	House District: 00
Johnson, Ron, Harold, ,		X Oppose	President	Senate State: WI
Calendar Year-To-Date Per Election for Office Sought		22085.74	Disbursement For 2022 Other	or: Primary General (specify)
(a) SUBTOTAL of Itemized Independent Exp	enditures		· [98.06
(b) SUBTOTAL of Unitemized Independent E	xpenditures		· •	47
(c) TOTAL Independent Expenditures			.	4
Under penalty of perjury I certify that the inc with, or at the request or suggestion of, any party committee) any political party committee	candidate or authorize			
Young, Ryan, , , Signature	[Electro	nically Filed] Date		19 / 2022
Signature				

Schedule E)	ORT OF INDEPEN	IDENT EXPEND	ITORES			PAGE 36 FOR SE OF	OF 47 FORM 24/48
NAME OF COMMITTEE					FEC ID	ENTIFICATIO	N NUMBER ▼
Community Cha	ange voters				C	C00612820	
Check if 24-hour r	eport 🗶 48-hour repo	rt New rep	ort Amends repo	ort filed on	M = M /	D D /	Y Y Y Y Y
Full Name of Payer Trilogy Intera	ictive, LLC			D	Date of Public	: Distribution/l	Dissemination
Mailing Address Po	D Box 4177			Α	10 mount	05	2022
City		State	Zip Code				48.21
Mountain View		CA	94040		ransaction II Date of Disbur		
Purpose of Expend Digital Ads	iture		Category/ Type		10	19	2022
Name of Federal C	andidate		Support	Office S	ought:	House I	District: 00
Johnson, Ron, Hard	old, ,		X Oppose	Pr	resident X	Senate	State: WI
Calendar Year- Per Election fo	To-Date or Office Sought		22133.95	Disburse 2022	ement For:	Primary	✗ General
Full Name of Payer							Dissemination
Trilogy Interac					10	06	2022
Mailing Address	PO Box 4177			Δ.	Amount		
City		State	Zip Code				48.69
Mountain View		CA	94040		ansaction ID Date of Disbu		
Purpose of Expend Digital Ads	iture		Category/ Type		10	19	2022
Name of Federal C	andidate		Support	Office S	ought:	House	District:00
Johnson, Ron, Hard	old, ,		X Oppose	Pı	resident x	✓ Senate	State: WI
Calendar Year Per Election fo	To-Date or Office Sought		22182.64	Disburse 2022	ement For: Other (sp	Primary ecify) Primary	✗ General
(a) SURTOTAL of It	emized Independent Expe	andituras		, г			06.00
(a) COBTOTAL OF I	omized macpendent Expe	511dita105			7	7	96.90
(b) SUBTOTAL of U	Initemized Independent E	xpenditures		·· •	7	7	
(c) TOTAL Independ	lent Expenditures			•	7	7	4
with, or at the reque	rjury I certify that the ind st or suggestion of, any or political party committee	candidate or authorized					
Young, I	Ryan, , ,	[Electron	ically Filed] Date	e 10	/ 19	/ Y Y Y 202	
Signature							

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

	Siledule Ly			FOR SE OF FORM	24/48
	ME OF COMMITTEE (In Full)		FEC ID	ENTIFICATION NU	MBER ▼
C	Community Change Voters		С	C00612820	
Ch	neck if 24-hour report 48-hour report New report Amends re	eport filed on	M = M /	D D / Y Y	* Y * Y
	Full Name of Payee		ate of Public	Distribution/Dissem	ination
	Trilogy Interactive, LLC		10 /)22
	Mailing Address PO Box 4177	А	mount		
	City State Zip Code	—— г			18.51
	Mountain View CA 94040			D: 24-01-00882-025	51
	Purpose of Expenditure Digital Ads Category/ Type		10	D D / Y Y	022
	Name of Federal Candidate Support	t Office S	ought:	House District	00
	Johnson, Ron, Harold, ,			Senate State	WI
	Calendar Year-To-Date		ement For:	Primary X	General
	Per Election for Office Sought 22231.15	2022	Other (sp	ecify) ►	
	Full Name of Payee Trilogy Interactive, LLC		M = M		YYY
	Mailing Address PO Box 4177	A	10 Amount	08 2	022
	City State Zip Code				50.24
	Mountain View CA 94040			D: 24-01-00882-025 ursement or Obligation	
	Purpose of Expenditure Digital Ads Category/ Type		10	/ D D / Y Y	022
	Name of Federal Candidate Suppor	t Office S	ought:	House District	:00
	Johnson, Ron, Harold, , Oppose	P	resident	Senate State	:WI
	Calendar Year-To-Date Per Election for Office Sought 22281.39	Disburse 2022	ement For: Other (sp		General
	(a) SUBTOTAL of Itemized Independent Expenditures	·····		9	8.75
	(b) SUBTOTAL of Unitemized Independent Expenditures	····· •			-
	(c) TOTAL Independent Expenditures	····· •	1 7		
	Under penalty of perjury I certify that the independent expenditures reported herein we with, or at the request or suggestion of, any candidate or authorized committee or ager party committee) any political party committee or its agent.				
	Young, Ryan, , , [Electronically Filed]	Date 10	/ 19	2022	
	Signature				l
_					

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

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Community Change Voters	C C00612820
Check if 24-hour report 48-hour report New report Amends report filed	d on Mam / Dab / Yayaya
Full Name of Payee Trilogy Interactive, LLC	Date of Public Distribution/Dissemination
	10 09 2022
Mailing Address PO Box 4177	Amount
City State Zip Code	51.80
Mountain View CA 94040	Transaction ID : 24-01-00882-02553 Date of Disbursement or Obligation
Purpose of Expenditure Digital Ads Category/ Type	10 19 / 2022
Name of Federal Candidate Support Office	ee Sought: House District: 00
Johnson, Ron, Harold, ,	President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought Disb 22333.19	ursement For: Primary
Full Name of Payee	Date of Public Distribution/Dissemination
Trilogy Interactive, LLC	10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 4177	Amount
City State Zip Code	74.44
Mountain View CA 94040	Transaction ID : 24-01-00882-02554 Date of Disbursement or Obligation
Purpose of Expenditure Digital Ads Category/ Type	10 19 2022
Name of Federal Candidate Support Office	ce Sought: House District: 00
Johnson, Ron, Harold, ,	President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought Disb 22407.63	oursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	126.24
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
	10 19 2022
Signature	

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

Schedule E)	FOR S	SE OF FORM 24/48
IAME OF COMMITTEE (In Full)	FEC IDENTIF	ICATION NUMBER ▼
Community Change Voters		
	C C00612	2020
Check if 24-hour report	nends report filed on	D / Y = Y = Y
Full Name of Payee	Date of Public Distrib	oution/Dissemination
Trilogy Interactive, LLC	10 11	
Mailing Address PO Box 4177		2022
	Amount	
City State Zip Code		519.63
Mountain View CA 94040	Transaction ID : 24-I Date of Disbursemen	
Purpose of Expenditure Digital Ads Category Type	M M / D	D / Y Y Y Y Y
Name of Federal Candidate	Support Office Sought: House	se District: 00
Barnes, Mandela, , ,	Oppose President X Sena	ate State: WI
Calendar Year-To-Date		rimary X General
Per Election for Office Sought 22927.2	Other (specify)	·
Full Name of Payee Trilogy Interactive, LLC	Date of Public Distrit	
	10 17	
Mailing Address PO Box 4177	Amount	
City State Zip Code		1562.68
Mountain View CA 94040	Transaction ID : 24-0 Date of Disbursemer	
Purpose of Expenditure Digital Ads Category Type	M M / D 10	D / Y Y Y Y Y
Name of Federal Candidate	Support Office Sought: Hou	se District: 00
Johnson, Ron, Harold, ,	Oppose President Sen	10//
Calendar Year-To-Date		rimary X General
Per Election for Office Sought 24489.9	2022 Other (specify)	·
(a) SUBTOTAL of Itemized Independent Expenditures	······································	2082.31
(b) SUBTOTAL of Unitemized Independent Expenditures	······	4
(c) TOTAL Independent Expenditures	······	4
Under penalty of perjury I certify that the independent expenditures reported h with, or at the request or suggestion of, any candidate or authorized committee party committee) any political party committee or its agent.	•	•
Young, Ryan, , , [Electronically Filed]	Date 10 19	2022
Signature		

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

FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ Community Change Voters C00612820 **✗** 48-hour report X New report Amends report filed on Check if 24-hour report Full Name of Payee Date of Public Distribution/Dissemination Trilogy Interactive, LLC 2022 10 11 Mailing Address PO Box 4177 Amount State Zip Code City 106.51 Transaction ID: 24-01-00882-02506 Mountain View CA 94040 Date of Disbursement or Obligation Purpose of Expenditure Category/ Digital Ads 10 19 2022 Type Name of Federal Candidate 00 Office Sought: Support House District: Johnson, Ron, Harold, , WI Oppose **X** Senate President State: Disbursement For: Primary **✗** General Calendar Year-To-Date 24596.45 2022 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Trilogy Interactive, LLC 2022 Mailing Address PO Box 4177 Amount City State Zip Code 102.64 CA 94040 Transaction ID: 24-01-00882-02507 Mountain View Date of Disbursement or Obligation Purpose of Expenditure Category/ Digital Ads 10 19 2022 Type Name of Federal Candidate 00 Support Office Sought: House District: Johnson, Ron, Harold, , WI X Oppose President Senate State: Primary **X** General Calendar Year-To-Date Disbursement For: 2022 24699.09 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 209.15 (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. Young, Ryan, , , [Electronically Filed] 10 19 2022 Date Signature

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Schedule E)	PAGE 41 OF 47 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Community Change Voters	C C00612820
Check if 24-hour report 48-hour report New report Amend	ds report filed on
Full Name of Payee Trilogy Interactive, LLC	Date of Public Distribution/Dissemination
Mailing Address PO Box 4177	10 13 2022 Amount
City State Zip Code Mountain View CA 94040	106.49 Transaction ID : 24-01-00882-02508
Purpose of Expenditure Digital Ads Category/ Type	Date of Disbursement or Obligation
Name of Federal Candidate Sup	14/1
Calendar Year-To-Date	Disbursement For: President Senate State: WI General 2022
Full Name of Payee	Other (specify) ▶ Date of Public Distribution/Dissemination
Trilogy Interactive, LLC Mailing Address PO Box 4177	10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Zip Code	Amount 107.09
Mountain View CA 94040	Transaction ID : 24-01-00882-02509 Date of Disbursement or Obligation
Purpose of Expenditure Digital Ads Category/ Type	10 / 19 / Y Y Y Y Y Y
Name of Federal Candidate Johnson, Ron, Harold, , Sup	port Office Sought: House District: 00 pose President X Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 24912.67	Disbursement For: Primary ★ General 2022 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	213.58
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	······································
Under penalty of perjury I certify that the independent expenditures reported herein with, or at the request or suggestion of, any candidate or authorized committee or a party committee) any political party committee or its agent.	
Young, Ryan, , , [Electronically Filed] Signature	Date 10 19 / 2022

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

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Community Change Voters	C C00612820
Check if 24-hour report 48-hour report New report Amends report filed	on Man / Dab / Yayaya
Full Name of Payee Trilogy Interactive, LLC	Date of Public Distribution/Dissemination
	10 12 2022
Mailing Address PO Box 4177	Amount
City State Zip Code	509.51
Mountain View CA 94040	Transaction ID : 24-01-00882-02510 Date of Disbursement or Obligation
Purpose of Expenditure Digital Ads Category/ Type	10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District: 00
Barnes, Mandela, , ,	President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought Disbut 2022	ursement For: Primary X General Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Trilogy Interactive, LLC	10 13 7 2022
Mailing Address PO Box 4177	Amount
City State Zip Code	499.24
Mountain View CA 94040	Transaction ID: 24-01-00882-02512
Purpose of Expenditure Digital Ads Category/ Type	Date of Disbursement or Obligation 10 19 2022
Name of Federal Candidate Support Office	e Sought: House District: 00
Barnes, Mandela, , ,	President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought Disbut 25921.42	ursement For: Primary General Other (specify) Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	1008.75
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	· · · · · · · · · · · · · · · · · · ·
	0 19 2022
Signature	

Schedule E)	PAGE 43 OF 47 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Community Change Voters	C C00612820
Check if 24-hour report X 48-hour report X New	v report Amends report filed on Amends report
Full Name of Payee Trilogy Interactive, LLC	Date of Public Distribution/Dissemination
Mailing Address PO Box 4177	
City State Mountain View CA	Zip Code 502.90 94040 Transaction ID : 24-01-00882-02513
Purpose of Expenditure Digital Ads	Category/ Type Date of Disbursement or Obligation 19 2022
Name of Federal Candidate Barnes, Mandela, , ,	Support Office Sought: House District: 00 Oppose Provident V Separa State: WI
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary X General 2022
Full Name of Payee Trilogy Interactive, LLC	Other (specify) Date of Public Distribution/Dissemination
Mailing Address PO Box 4177	
City State Mountain View CA	Zip Code 107.81 94040 Transaction ID : 24-01-00882-02527
Purpose of Expenditure Digital Ads	Category/ Type Date of Disbursement or Obligation 10 19 2022
Name of Federal Candidate Johnson, Ron, Harold, ,	Support Office Sought: House District: 00
Calendar Year-To-Date Per Election for Office Sought	President Senate State: WI Disbursement For: Primary General 26532.13
Tel Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	610.71
(b) SUBTOTAL of Unitemized Independent Expenditures	>
(c) TOTAL Independent Expenditures	•
	itures reported herein were not made in cooperation, consultation, or concert orized committee or agent of either, or (if the reporting entity is not a political
Young, Ryan, , , [Ele Signature	ectronically Filed] Date 10 19 2022

Schedule E)	TI EXI END	TOTILO		PAGE 44 OF 47 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Community Change Voters				C C00612820
Check if 24-hour report 48-hour report	X New rep	port Amends repo		M / D D / Y Y Y Y Y
Full Name of Payee Trilogy Interactive, LLC				of Public Distribution/Dissemination
Mailing Address PO Box 4177			Amou	10 15 2022 nt
City Mountain View	State CA	Zip Code 94040		520.47 action ID : 24-01-00882-02530
Purpose of Expenditure Digital Ads		Category/ Type		of Disbursement or Obligation
Name of Federal Candidate Barnes, Mandela, , ,		✗ Support	Office Sough	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Calendar Year-To-Date Per Election for Office Sought		Oppose 27052.60	Disbursement 2022	t For: Primary X General
Full Name of Payee Trilogy Interactive, LLC			Date of	ther (specify) ▶ of Public Distribution/Dissemination
Mailing Address PO Box 4177			Amou	09 30 2022 nt
City Mountain View	State CA	Zip Code 94040		82.17 ction ID : 24-01-00882-02531
Purpose of Expenditure Digital Ads		Category/ Type		of Disbursement or Obligation
Name of Federal Candidate Barnes, Mandela, , ,		Support Oppose	Office Sough	
Calendar Year-To-Date Per Election for Office Sought	7-1-17	27134.77	Disbursemen 2022	
(a) SUBTOTAL of Itemized Independent Expenditu	res			602.64
(b) SUBTOTAL of Unitemized Independent Expendent	itures			7 1 7 1 7
(c) TOTAL Independent Expenditures				7 7 7
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candic party committee) any political party committee or its	late or authorize			
Young, Ryan, , , Signature	[Electron	nically Filed] Date	e 10	19 / 2022

Schedule E)	DENT EXICIO	TIONES		PAGE 45 OF 47 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FE	EC IDENTIFICATION NUMBER
Community Change Voters				C00612820
Check if 24-hour report 🗶 48-hour repo	rt New rep	port Amends repo	ort filed on	M / D = D / Y = Y = Y
Full Name of Payee Trilogy Interactive, LLC			Date of I	
Mailing Address PO Box 4177			Amount	01 2022
City	State	Zip Code		164.19
Mountain View	CA	94040		tion ID: 24-01-00882-02532 Disbursement or Obligation
Purpose of Expenditure Digital Ads		Category/ Type	M 10	
Name of Federal Candidate		x Support	Office Sought:	House District: 00
Barnes, Mandela, , ,		Oppose	President	Senate State: WI
Calendar Year-To-Date Per Election for Office Sought	, , ,	27298.96	Disbursement F 2022 Othe	or: Primary X General er (specify) ▶
Full Name of Payee Trilogy Interactive, LLC			Date of	
Mailing Address PO Box 4177			Amount	02 2022
City	State	Zip Code		162.66
Mountain View	CA	94040		on ID: 24-01-00882-02533 Disbursement or Obligation
Purpose of Expenditure Digital Ads		Category/ Type	10 10	
Name of Federal Candidate		x Support	Office Sought:	House District: 00
Barnes, Mandela, , ,		Oppose	President	Senate State: WI
Calendar Year-To-Date Per Election for Office Sought		27461.62	Disbursement F 2022 Othe	or (specify) ►
(a) SUBTOTAL of Itemized Independent Expe	nditures			326.85
(b) SUBTOTAL of Unitemized Independent Ex	openditures		· ·	
(c) TOTAL Independent Expenditures			•	7 7
Under penalty of perjury I certify that the indewith, or at the request or suggestion of, any committee) any political party committee	andidate or authorize			
Young, Ryan, , ,	[Electron	nically Filed] Date		19 2022
- · - · - · - · - · · -				

Schedule E)	EXI ENDI	TOTILO		PAGE 46 OF 47 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Community Change Voters				C C00612820
Check if 24-hour report 48-hour report	X New repo	ort Amends repo		M / D D / Y Y Y Y Y
Full Name of Payee Community Change Action				of Public Distribution/Dissemination
Mailing Address 1536 U Street NW			Amour	10 15 2022
1 '	tate DC	Zip Code 20009		218.75 action ID : 24-01-00884-02572
Purpose of Expenditure Staff: Drafting communications		Category/ Type		of Disbursement or Obligation 10 19 2022
Name of Federal Candidate Johnson, Ron, Harold, ,		Support Oppose	Office Sough	
Calendar Year-To-Date Per Election for Office Sought	,	27680.37	Disbursement 2022 Of	t For: Primary
Full Name of Payee Community Change Action				of Public Distribution/Dissemination
Mailing Address 1536 U Street NW			Amou	nt
1 '	State DC	Zip Code 20009		103.41 ction ID : 24-01-00884-02574 of Disbursement or Obligation
Purpose of Expenditure Staff: Drafting communications		Category/ Type		10 19 2022
Name of Federal Candidate Barnes, Mandela, , ,		SupportOppose	Office Sough	
Calendar Year-To-Date Per Election for Office Sought		27783.78	Disbursemen 2022 O	t For:
(a) SUBTOTAL of Itemized Independent Expenditures			•	322.16
(b) SUBTOTAL of Unitemized Independent Expenditures	s		· •	7 1 7 1 7
(c) TOTAL Independent Expenditures			•	7 1 7 1 7
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate of party committee) any political party committee or its age	or authorized			
Young, Ryan, , , Signature	[Electroni	cally Filed] Date	10	19 / 2022

Schedule E)	INI EXI END	ITOTILO		PAGE 47 OF 47 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Community Change Voters				C C00612820
Check if 24-hour report 🗶 48-hour report	X New rep	ort Amends repo		M = M / D = D / Y = Y = Y = Y
Full Name of Payee Stones' Phones				of Public Distribution/Dissemination
Mailing Address 41-750 Ranco Las Palmas Dr Ste	E-3		Amou	10 21 2022 unt
City Rancho Mirage	State CA	Zip Code 92270	Trans	3605.25
Purpose of Expenditure Live Calls	<u> </u>	Category/	Date	of Disbursement or Obligation
Name of Federal Candidate		Type Support	Office Sough	
Barnes, Mandela, , ,		Oppose	Presid	ent Senate State: WI
Calendar Year-To-Date Per Election for Office Sought	, , ,	31389.03	Disbursemer 2022	nt For:
Full Name of Payee			Date	of Public Distribution/Dissemination
Mailing Address			Amou	unt
City	State	Zip Code		
Purpose of Expenditure		Category/ Type	Date	of Disbursement or Obligation
Name of Federal Candidate		Support	Office Sough	
Calendar Year-To-Date Per Election for Office Sought	7		Disburseme	nt For:
(a) SUBTOTAL of Itemized Independent Expenditu	ıres			3605.25
(b) SUBTOTAL of Unitemized Independent Expendent	ditures		·· •	17117117
(c) TOTAL Independent Expenditures			· •	80184.68
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candid party committee) any political party committee or it	date or authorized			
Young, Ryan, , , Signature	[Electron	nically Filed] Date	10	19 / 2022