### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (S

Schedule E)	IDITOTILO	PAGE 1 OF 5 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
ASSOCIATION FOR EMERGENCY RESPON FIREFIGHTERS	DERS AND	C C00622472
Check if 24-hour report 48-hour report New	report X Amends report file	d on 01 01 1900
Full Name of Payee Cloud Data Services		Date of Public Distribution/Dissemination
		11 18 2021
Mailing Address 1350 W SOUTHPORT ROAD BOX 130		Amount
City State	Zip Code	2408.83
INDIANAPOLIS IN	46217	Transaction ID : SE-S433004  Date of Disbursement or Obligation
Purpose of Expenditure Leads / Phone Lists(Estimate)	Category/ Type 004	M = M / D = D / Y = Y = Y = Y
Name of Federal Candidate	<b>✗</b> Support Office	ee Sought: House District:
Collins, Susan, , ,	Oppose	President Senate State: ME
Calendar Year-To-Date Per Election for Office Sought	262181.50 Disb 2026	ursement For:   Primary General  Other (specify)
Full Name of Payee	<u> </u>	Date of Public Distribution/Dissemination
Cloud Data Services		11 18 2021
Mailing Address 1350 W SOUTHPORT ROAD		Amount
BOX 130		
City State INDIANAPOLIS IN	Zip Code 46217	2408.81 Transaction ID : SE-S433006
Purpose of Expenditure Leads / Phone Lists(Estimate)	Category/ Type 004	Date of Disbursement or Obligation
Name of Federal Candidate	Support Office	ce Sought: <b>x</b> House District: 24
Carbajal, Salud, , ,	Oppose	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	262181.08 Disk 202	oursement For:  Primary General  Other (specify)   Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	•	4817.64
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	<b>•</b>	
Under penalty of perjury I certify that the independent expenditu with, or at the request or suggestion of, any candidate or authority party committee) any political party committee or its agent.		
PIARO, ROBERT, , , [Elect	11 17:11 17	12 02 2021

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

**PAGE** OF (Schedule E) FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ ASSOCIATION FOR EMERGENCY RESPONDERS AND C00622472 **FIREFIGHTERS** 24-hour report **✗** 48-hour report New report | X | Amends report filed on Check if 01 1900 01 Full Name of Payee Date of Public Distribution/Dissemination **EYP Consultants LLC** 2021 11 18 Mailing Address 2949 NW 120th Way Amount State Zip Code City 301.10 FL 33323 Transaction ID : SE-S433012 Sunrise Date of Disbursement or Obligation Purpose of Expenditure Category/ PAYMENT PROCESSING(Estimate) 004 Type Name of Federal Candidate **✗** Support Office Sought: House District: Collins, Susan, , , ME **x** Senate Oppose President State: Disbursement For: **X** Primary General Calendar Year-To-Date 262181.50 2026 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination EYP Consultants LLC 11 18 2021 Mailing Address 2949 NW 120th Way Amount City State Zip Code 301.10 FL Transaction ID: SE-S433014 33323 Sunrise Date of Disbursement or Obligation Purpose of Expenditure Category/ PAYMENT PROCESSING(Estimate) 004 Type Name of Federal Candidate 24 **✗** Support Office Sought: **✗** House District: Carbajal, Salud, , , CA Oppose President Senate State: **X** Primary Disbursement For: Calendar Year-To-Date General 2022 262181.08 Per Election for Office Sought Other (specify) ▶ (a) SUBTOTAL of Itemized Independent Expenditures..... 602.20 (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. PIARO, ROBERT, , , [Electronically Filed] 12 02 2021 Date Signature

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

**PAGE** OF FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ ASSOCIATION FOR EMERGENCY RESPONDERS AND C00622472 **FIREFIGHTERS** 24-hour report ¥ 48-hour report New report | X | Amends report filed on Check if 01 1900 01 Full Name of Payee Date of Public Distribution/Dissemination LAV Services LLC 2021 11 18 Mailing Address 3468 Ruth Dr Amount State Zip Code City 602.21 NV89121 Transaction ID: SE-S433016 Las Vegas Date of Disbursement or Obligation Purpose of Expenditure Category/ Phonebank Payroll Services(Estimate) 004 Type Name of Federal Candidate **✗** Support Office Sought: House District: Collins, Susan, , , ME **x** Senate Oppose President State: Disbursement For: **X** Primary General Calendar Year-To-Date 262181.50 2026 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination LAV Services LLC 11 18 2021 Mailing Address 3468 Ruth Dr Amount City State Zip Code 602.20 NV Transaction ID: SE-S433018 89121 Las Vegas Date of Disbursement or Obligation Purpose of Expenditure Category/ 004 Phonebank Payroll Services(Estimate) Type Name of Federal Candidate 24 **✗** Support Office Sought: **✗** House District: Carbajal, Salud, , , CA Oppose President Senate State: **X** Primary Disbursement For: Calendar Year-To-Date General 2022 262181.08 Per Election for Office Sought Other (specify) ▶ (a) SUBTOTAL of Itemized Independent Expenditures..... 1204.41 (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. PIARO, ROBERT, , , [Electronically Filed] 12 02 2021 Date Signature

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

**PAGE** OF FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ ASSOCIATION FOR EMERGENCY RESPONDERS AND C00622472 **FIREFIGHTERS** 24-hour report **✗** 48-hour report New report | X | Amends report filed on Check if 01 1900 01 Full Name of Payee Date of Public Distribution/Dissemination Standard Data Services LLC 2021 11 18 Mailing Address 513 Mill Ave SE Amount Suite 206 State Zip Code City 1338.24 Transaction ID : SE-S433008 OH 44663 New Philadelphia Date of Disbursement or Obligation Purpose of Expenditure Category/ Caging and Database Services(Estimate) 004 Type Name of Federal Candidate **✗** Support Office Sought: House District: Collins, Susan, , , ME **x** Senate Oppose President State: Disbursement For: **X** Primary General Calendar Year-To-Date 262181.50 2026 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Standard Data Services LLC 11 18 2021 Mailing Address 513 Mill Ave SE Amount Suite 206 City State Zip Code 1338.23 ОН Transaction ID: SE-S433010 New Philadelphia 44663 Date of Disbursement or Obligation Purpose of Expenditure Category/ 004 Caging and Database Services(Estimate) Type Name of Federal Candidate 24 **✗** Support Office Sought: **✗** House District: Carbajal, Salud, , , CA Oppose President Senate State: **X** Primary Disbursement For: Calendar Year-To-Date General 2022 262181.08 Per Election for Office Sought Other (specify) ▶ (a) SUBTOTAL of Itemized Independent Expenditures..... 2676.47 (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. PIARO, ROBERT, , , [Electronically Filed] 12 02 2021 Date Signature

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

PAGE	5	OF	5
FOR SE	OF	FORM	24/48

Full Name of Payee Wired4Data  Mailing Address 55 Lake Havasu Ave South F-677  City State Zip Code Lake Havasu City AZ 86403  Purpose of Expenditure PHONEBANK IT/TECH SUPPORT(Estimate)  Name of Federal Candidate Collins, Susan, ,	ation Y Y
Check if 24-hour report	ation Y Y Y Y
Check if	ation Y Y Y Y
Mailing Address 55 Lake Havasu Ave South F-677  City State Zip Code 1371  Lake Havasu City AZ 86403  Purpose of Expenditure PHONEBANK IT/TECH SUPPORT(Estimate)  Name of Federal Candidate Collins, Susan, ,	69
Mailing Address 55 Lake Havasu Ave South F-677  City State Zip Code Lake Havasu City AZ 86403  Purpose of Expenditure PHONEBANK IT/TECH SUPPORT(Estimate)  Name of Federal Candidate Calendar Year-To-Date Per Election for Office Sought  F-677  City State Zip Code President ★ Senate State:  Calendar Year-To-Date Per Election for Office Sought  F-677  City State Zip Code Wired4Data  Mailing Address 55 Lake Havasu Ave South F-677  City State Zip Code Lake Havasu City AZ 86403  Purpose of Expenditure PHONEBANK IT/TECH SUPPORT(Estimate)  Purpose of Expenditure PHONEBANK IT/TECH SUPPORT(Estimate)  Name of Federal Candidate Category/ Type  Od4  Transaction ID: SE-S433020 Date of Disbursement For: ★ Primary Od4  Amount  Transaction ID: SE-S433020 Transaction ID: SE-S433022 Date of Disbursement or Obligation  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	69 Y Y
F-677  City State Zip Code 1371  Lake Havasu City AZ 86403  Purpose of Expenditure PHONEBANK IT/TECH SUPPORT(Estimate)  Name of Federal Candidate  Collins, Susan, , Oppose President	Y Y
City State Zip Code  AZ 86403  Purpose of Expenditure PHONEBANK IT/TECH SUPPORT(Estimate)  Name of Federal Candidate  Calegory/ Type  Oppose  Calendar Year-To-Date Per Election for Office Sought  Full Name of Payee Wired4Data  Mailing Address  55 Lake Havasu Ave South F-677  City Lake Havasu City  State  State  Category/ Type  Oppose  Disbursement For:  Primary  Oppose  Disbursement For:  Primary  Other (specify) ►  Date of Public Distribution/Dissemin  Amount  Amount  F-677  City State Lake Havasu City  AZ  86403  Transaction ID: SE-S433020  Date of Disbursement For:  Primary  Other (specify) ►  Category/ Type  Out  Transaction ID: SE-S433022  Date of Disbursement For:  Name of Federal Candidate  Category/ Type  Out  Type  Out  Transaction ID: SE-S433022  Date of Disbursement or Obligation  Oppose  President  Senate State:  Calendar Year-To-Date	Y Y
Lake Havasu City  Purpose of Expenditure PHONEBANK IT/TECH SUPPORT(Estimate)  Name of Federal Candidate  Collins, Susan, ,	Y Y
Purpose of Expenditure PHONEBANK IT/TECH SUPPORT(Estimate)  Name of Federal Candidate  Collins, Susan, ,	
Collins, Susan, , ,	
Collins, Susan, , ,	,
Per Election for Office Sought  Per Election for Office Sought  262181.50  2026  Other (specify) ▶  Date of Public Distribution/Dissemir  Mailing Address  55 Lake Havasu Ave South  F-677  City  State  Zip Code  Lake Havasu City  AZ  86403  Transaction ID: SE-S433022  Date of Disbursement or Obligation  Purpose of Expenditure  PHONEBANK IT/TECH SUPPORT(Estimate)  Name of Federal Candidate  Carbajal, Salud, , ,  Oppose  President  Senate  State:  Calendar Year-To-Date	ME
Tell Name of Payee Wired4Data  Mailing Address 55 Lake Havasu Ave South F-677  City State Zip Code Lake Havasu City AZ 86403  Purpose of Expenditure PHONEBANK IT/TECH SUPPORT(Estimate)  Name of Federal Candidate  Carbajal, Salud, , ,  Calendar Year-To-Date  Date of Public Distribution/Dissemir  Amount  Table 1 11 1 18 20  Amount  Transaction ID : SE-S433022 Date of Disbursement or Obligation  M M M / D D / Y Y  Type 004  Name of Federal Candidate  X Support Office Sought: X House District: Carbajal, Salud, , ,  Calendar Year-To-Date	eneral
Mailing Address 55 Lake Havasu Ave South F-677  City State Zip Code Lake Havasu City AZ 86403  Purpose of Expenditure PHONEBANK IT/TECH SUPPORT(Estimate)  Name of Federal Candidate Carbajal, Salud, , ,  Calendar Year-To-Date  M M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 55 Lake Havasu Ave South F-677  City State Zip Code Lake Havasu City AZ 86403  Purpose of Expenditure PHONEBANK IT/TECH SUPPORT(Estimate)  Name of Federal Candidate Carbajal, Salud, , ,  Calendar Year-To-Date  Tansaction ID : SE-S433022 Date of Disbursement or Obligation  Oppose President Senate State:	ation
F-677  City State Zip Code  Lake Havasu City AZ 86403  Purpose of Expenditure PHONEBANK IT/TECH SUPPORT(Estimate)  Name of Federal Candidate Carbajal, Salud, , ,  Calendar Year-To-Date  Amount  Transaction ID : SE-S433022 Date of Disbursement or Obligation  M M M / D D / Y Y  Support Office Sought:  House District:  Senate State:  Disbursement For:  Primary  (2022)	
City State Zip Code  Lake Havasu City AZ 86403  Purpose of Expenditure PHONEBANK IT/TECH SUPPORT(Estimate)  Name of Federal Candidate Carbajal, Salud, , ,  Calendar Year-To-Date  State Zip Code  1371  Transaction ID : SE-S433022  Date of Disbursement or Obligation  M M / D D / Y Y Y  Support Office Sought:	
Lake Havasu City  AZ 86403  Transaction ID: SE-S433022 Date of Disbursement or Obligation  Purpose of Expenditure PHONEBANK IT/TECH SUPPORT(Estimate)  Name of Federal Candidate  Carbajal, Salud, , ,  Oppose  President  Senate State:  Calendar Year-To-Date  Transaction ID: SE-S433022 Date of Disbursement or Obligation  M M M / D D / Y Y  Finany  Oppose  Disbursement For: X Primary	60
Purpose of Expenditure PHONEBANK IT/TECH SUPPORT(Estimate)  Name of Federal Candidate  Carbajal, Salud, , ,  Calendar Year-To-Date  Category/ Type  Odd  Support  Office Sought:  President  Senate  State:  Disbursement For:  X Primary  Ogo  Ogo  Ogo  Ogo  Ogo  Ogo  Ogo  Og	8
PHONEBANK IT/TECH SUPPORT(Estimate)  Name of Federal Candidate  Carbajal, Salud, , ,  Calendar Year-To-Date  Output  Support  Office Sought:  President  Senate  State:  Disbursement For:	Y
Carbajal, Salud, , ,  Calendar Year-To-Date  Support  Office Sought.  X House District.  Oppose  President  Senate State: .  Disbursement For: X Primary  2023	
Calendar Year-To-Date  Disbursement For:  Primary	24
2022	CA
	eneral
Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	8
(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 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 party committee) any political party committee or its agent.	U
PIARO, ROBERT, , ,  [Electronically Filed] Date 12 02 2021	oncert
Signature Date 12 02 2021	oncert