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

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 file	ed on
Full Name of Payee	Date of Public Distribution/Dissemination
Stones' Phones	M = M / D = D / Y = Y = Y
Mailing Address 41-750 Ranco Las Palmas Dr Ste E-3	10 14 2022 Amount
City State Zip Code	23876.70
Rancho Mirage CA 92270	Transaction ID: 24-01-00868-02451  Date of Disbursement or Obligation
Purpose of Expenditure GOTV Calls  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 Offi	ice Sought: House District:00
Cortez Masto, Catherine, , ,	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought  23876.70  Dis 202	bursement For: Primary General  Other (specify)
Full Name of Payee	Date of Public Distribution/Dissemination
Trilogy Interactive, LLC	M M / D D / Y Y Y Y
Mailing Address PO Box 4177	10
1 0 BOX 1111	Amount
City State Zip Code	137.24
Mountain View CA 94040	Transaction ID: 24-01-00869-02452 Date of Disbursement or Obligation
Purpose of Expenditure Category/	M M / D D / Y Y Y Y
Digital Ads Type	10 13 2022
Name of Federal Candidate Support Off	ice Sought: House District: 00
Cortez Masto, Catherine, , ,	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought  24013.94  Dis 24013.94	
	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	24013.94
(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 eith party committee) any political party committee or its agent.	· · · · · · · · · · · · · · · · · · ·
Young, Ryan, , ,  [Electronically Filed] Date	10 16 2022
Signature	

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

Schedule E)	JENT EXILID	HOHLO		PAGE 2 OF 9 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 repor	t New rep	port Amends repo		M
Full Name of Payee Trilogy Interactive, LLC				of Public Distribution/Dissemination
Mailing Address PO Box 4177			Amou	10 02 2022 unt
City	State	Zip Code		129.64
Mountain View	CA	94040		saction ID : 24-01-00869-02453 of Disbursement or Obligation
Purpose of Expenditure Digital Ads		Category/ Type		10 13 2022
Name of Federal Candidate		<b>✗</b> Support	Office Sough	nt: House District: 00
Cortez Masto, Catherine, , ,		Oppose	Presid	
Calendar Year-To-Date Per Election for Office Sought		24143.58	Disbursemer 2022	nt For:
Full Name of Payee			Date	of Public Distribution/Dissemination
Trilogy Interactive, LLC			Г	10 03 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 4177				10 00 2022
			Amou	unt
City	State	Zip Code		236.53
Mountain View	CA	94040		action ID: 24-01-00869-02454 of Disbursement or Obligation
Purpose of Expenditure Digital Ads		Category/ Type		10 / 13 / 2022
Name of Federal Candidate		<b>x</b> Support	Office Sough	nt: House District: 00
Cortez Masto, Catherine, , ,		Oppose	Presid	lent Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		24380.11	Disbursemer 2022	nt For:  Primary
(a) SUBTOTAL of Itemized Independent Expen	nditures		. •	366.17
(b) SUBTOTAL of Unitemized Independent Ex	penditures		<b>-</b>	1 4 1 1 4 1 4 1
(c) TOTAL Independent Expenditures			·- •	7
Under penalty of perjury I certify that the inde with, or at the request or suggestion of, any caparty committee) any political party committee	andidate or authorized			
Young, Ryan, , ,	[Electron	nically Filed] Date	e 10	16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature				

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

Schedule E)	FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼		
Community Change Voters  C C00612820			
	5 233.2325		
Check if 24-hour report 48-hour report New report Amends	s report filed on		
Full Name of Payee	Date of Public Distribution/Dissemination		
Trilogy Interactive, LLC	10 04 Y Y Y Y Y		
Mailing Address PO Box 4177	Amount		
City State Zip Code	253.91		
Mountain View CA 94040	Transaction ID : 24-01-00869-02455  Date of Disbursement or Obligation		
Purpose of Expenditure Digital Ads  Category/ Type	10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Name of Federal Candidate	ort Office Sought: House District: 00		
Cortez Masto, Catherine, , , Oppo	se President X Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought 24634.02	Disbursement For:  Primary  General 2022  Gher (specify) ▶		
Full Name of Payee	Date of Public Distribution/Dissemination		
Trilogy Interactive, LLC	10 05 / Y Y Y Y Y		
Mailing Address PO Box 4177	Amount		
City State Zip Code	257.38		
Mountain View CA 94040	Transaction ID: 24-01-00869-02456 Date of Disbursement or Obligation		
Purpose of Expenditure Digital Ads  Category/ Type	10 / 13 / 2022		
Name of Federal Candidate	port Office Sought: House District: 00		
Cortez Masto, Catherine, , ,	ose President X Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought 24891.40	Disbursement For: Primary  2022  Other (specify) ▶		
	Onier (specify) F		
(a) SUBTOTAL of Itemized Independent Expenditures	511.29		
(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 again party committee) any political party committee or its agent.			
Young, Ryan, , , [Electronically Filed]	Date 10 16 2022		
Signature			

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 4 OF 9 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	ort filed on
Full Name of Payee Trilogy Interactive, LLC	Date of Public Distribution/Dissemination
Mailing Address PO Box 4177	10 06 2022 Amount
City State Zip Code  Mountain View CA 94040	327.94 Transaction ID : 24-01-00869-02457
Purpose of Expenditure Digital Ads  Category/ Type	Date of Disbursement or Obligation  10 13 2022
Name of Federal Candidate  Cortez Masto, Catherine, , ,  Oppose	Office Sought: House District: 00  President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 25219.34	Disbursement For: Primary   Other (specify)   Other (specify)   General
Full Name of Payee Trilogy Interactive, LLC	Date of Public Distribution/Dissemination
Mailing Address PO Box 4177	Amount
City State Zip Code  Mountain View CA 94040	324.07  Transaction ID: 24-01-00869-02458  Date of Disbursement or Obligation
Purpose of Expenditure Digital Ads  Category/ Type	10 13 2022
Name of Federal Candidate  Cortez Masto, Catherine, , ,  Oppose	Office Sought: House District: 00  President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 25543.41	Disbursement For: Primary   2022  Other (specify) ▶ General
(a) SUBTOTAL of Itemized Independent Expenditures	▶ 652.01
(b) SUBTOTAL of Unitemized Independent Expenditures	>
(c) TOTAL Independent Expenditures	. >
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	
Young, Ryan, , ,  [Electronically Filed] Date	e 10 / 16 / 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			
	5, 555,1245		
Check if 24-hour report 48-hour report New report Amend	ds report filed on M M / D D / Y Y Y Y Y		
Full Name of Payee	Date of Public Distribution/Dissemination		
Trilogy Interactive, LLC	10 08 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	344.59		
Mountain View CA 94040	Transaction ID : 24-01-00869-02459 Date of Disbursement or Obligation		
Purpose of Expenditure Digital Ads  Category/ Type	10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Name of Federal Candidate Sup	port Office Sought: House District: 00		
Cortez Masto, Catherine, , ,	oose President X Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought 25888.00	Disbursement For: Primary   ☐ General  Other (specify)  ☐ ☐		
Full Name of Payee	Date of Public Distribution/Dissemination		
Trilogy Interactive, LLC	10 09 / 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	351.74		
Mountain View CA 94040	Transaction ID: 24-01-00869-02460 Date of Disbursement or Obligation		
Purpose of Expenditure Digital Ads  Category/ Type	10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Name of Federal Candidate Sup	pport Office Sought: House District: 00		
Cortez Masto, Catherine, , ,	pose President Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought 26239.74	Disbursement For: Primary General 2022 Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures	696.33		
(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]	Date 10 16 2022		
Signature			

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 6 OF 9 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 / D = D / Y = Y = Y
Trilogy Interactive, LLC	of Public Distribution/Dissemination
Mailing Address PO Box 4177 Amoun	10 10 2022 nt
City State Zip Code  Mountain View CA 94040 Transa	371.58 action ID : 24-01-00869-02461
Purpose of Expenditure	of Disbursement or Obligation
Name of Federal Candidate  Support  Office Sought	
Calendar Year-To-Date  Disbursement	
Full Name of Payee Date of	ther (specify) ▶ of Public Distribution/Dissemination
Trilogy Interactive, LLC  Mailing Address PO Box 4177	10 / 11 / 2022
City State Zip Code	nt 403.34
Mountain View CA 94040 Transa Date of	oction ID : 24-01-00869-02462 of Disbursement or Obligation
	10 / 13 / 2022
Name of Federal Candidate  Cortez Masto, Catherine, , ,  Oppose  Office Sough  Preside	NIV
Calendar Year-To-Date Per Election for Office Sought  Disbursement 2022  O	rt For: Primary   General  Wither (specify)   ■
(a) SUBTOTAL of Itemized Independent Expenditures	774.92
(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 c with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if t party committee) any political party committee or its agent.	
Young, Ryan, , , [Electronically Filed] Date 10	16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	.9	PAGE 7 OF 9 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 / D D / Y D Y D Y
Full Name of Payee Trilogy Interactive, LLC	M	f Public Distribution/Dissemination
Mailing Address PO Box 4177	Amoun	10 12 2022 ut
City State Zip Coo Mountain View CA 94040	Transa	389.21 action ID : <b>24-01-00869-02463</b>
Purpose of Expenditure Digital Ads  Category	ory/	f Disbursement or Obligation
Name of Federal Candidate  Cortez Masto, Catherine, , ,	X Support Office Sought: Oppose Preside	NIV/
Calendar Year-To-Date Per Election for Office Sought 2740	Disbursement 2022	
Full Name of Payee Trilogy Interactive, LLC	Date o	of Public Distribution/Dissemination
Mailing Address PO Box 4177	Amoun	
City State Zip Coo Mountain View CA 94040	Transac	88.50 ction ID : 24-01-00869-02464 of Disbursement or Obligation
Purpose of Expenditure Digital Ads  Category T	orv/	10 13 / Y 2022
Name of Federal Candidate  Cortez Masto, Catherine, , ,	Support Office Sought Oppose Preside	NIV
Calendar Year-To-Date Per Election for Office Sought 2749:	Disbursement 2022 Ot	For: Primary General
(a) SUBTOTAL of Itemized Independent Expenditures		477.71
(b) SUBTOTAL of Unitemized Independent Expenditures	······································	7
(c) TOTAL Independent Expenditures	······································	7
Under penalty of perjury I certify that the independent expenditures reported with, or at the request or suggestion of, any candidate or authorized commit party committee) any political party committee or its agent.		
Young, Ryan, , ,  [Electronically File Signature	ded] Date 10	16 / Y = Y = Y = Y = Y = Y

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

Schedule E)	DEITI EXI EITD			PAGE 8 OF 9 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Community Change Voters				C C00612820
Check if 24-hour report <b>X</b> 48-hour repo	rt 🗶 New rep	ort Amends repo		M / D D / Y Y Y Y Y
Full Name of Payee Trilogy Interactive, LLC			M	f Public Distribution/Dissemination
Mailing Address PO Box 4177			Amour	10 13 2022 t
City	State	Zip Code		384.33
Mountain View	CA	94040		action ID: 24-01-00869-02466 f Disbursement or Obligation
Purpose of Expenditure Digital Ads		Category/ Type		10 13 2022
Name of Federal Candidate		<b>✗</b> Support	Office Sought	: House District: 00
Cortez Masto, Catherine, , ,		Oppose	Preside	NIV/
Calendar Year-To-Date Per Election for Office Sought		27876.70	Disbursement 2022 Ot	For: Primary <b>X</b> General her (specify) ▶
Full Name of Payee Trilogy Interactive, LLC x Mailing Address PO Box 4177			M	of Public Distribution/Dissemination
011	01-1-	7:- 0-1-		0.07
City  Mountain View	State CA	Zip Code 94040		3.27  ction ID : 24-00-00026-00026  f Disbursement or Obligation
Purpose of Expenditure Digital Ads		Category/ Type	M	M / D D / Y Y Y Y
Name of Federal Candidate		<b>x</b> Support	Office Sought	: House District: 00
Cortez Masto, Catherine, , ,		Oppose	Preside	nt Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		0.00	Disbursement 2022 Ot	For: Primary   General  her (specify)
(a) SUBTOTAL of Itemized Independent Expe	enditures		•	384.33
(b) SUBTOTAL of Unitemized Independent E	xpenditures		· •	
(c) TOTAL Independent Expenditures			· ·	7
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 authorized			
Young, Ryan, , ,	[Electron	nically Filed] Date	e 10	16 2022
Signature				

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

Schedule E)	1101120	PAGE 9 OF 9 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	ort Amends report	filed on filed on
Full Name of Payee Trilogy Interactive, LLC		Date of Public Distribution/Dissemination
Mailing Address PO Box 4177		10
City State	Zip Code	394.66
Mountain View CA	94040	Transaction ID : 24-00-00031-00031  Date of Disbursement or Obligation
Purpose of Expenditure Digital Ads	Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate	<b>✗</b> Support (	Office Sought: House District:00
Cortez Masto, Catherine, , ,	Oppose	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary    General  Other (specify) ▶
Full Name of Payee		Date of Public Distribution/Dissemination
Mailing Address		M = M / D = D / Y = Y = Y
Walling Address		Amount
City State	Zip Code	
Purpose of Evpanditure		Date of Disbursement or Obligation
Purpose of Expenditure	Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate	Support	Office Sought: House District:
	Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought		Disbursement For:
		Other (specify) P
(a) SUBTOTAL of Itemized Independent Expenditures		0.00
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		27876.70
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
	ically Filed] Date	10 16 2022
Signature		