24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (S

Schedule E)		PAGE 1 OF 6 FOR SE OF FORM 24/48				
IAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENCY RESPONDER FIREFIGHTERS	RS AND	FEC IDENTIFICATION NUMBER ▼ C C00622472				
Check if 24-hour report X 48-hour report X New report	t Amends report	filed on Mam / Dad / Yayayay				
Full Name of Payee Cloud Data Services		Date of Public Distribution/Dissemination 07 29 2021				
Mailing Address 1350 W SOUTHPORT ROAD		Amount				
BOX 130						
1 '	ip Code 16217	8441.01 Transaction ID : SE-S321471 Date of Disbursement or Obligation				
Purpose of Expenditure Leads / Phone Lists(Estimate)	Category/ Type 004	M = M / D = D / Y = Y = Y				
Name of Federal Candidate	x Support	Office Sought: House District:				
Collins, Susan, , ,	Oppose	President Senate State: ME				
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ✓ Primary General Other (specify) ✓				
Full Name of Payee Cloud Data Services		Date of Public Distribution/Dissemination				
Mailing Address 1350 W SOUTHPORT ROAD		07 29 2021				
BOX 130		Amount				
City State Z	Zip Code	8441.01				
Durnoss of Evnanditure	46217	Transaction ID : SE-S321473 Date of Disbursement or Obligation				
Leads / Phone Lists(Estimate)	Category/ Type 004	M = M / D = D / Y = Y = Y				
Name of Federal Candidate	x Support	Office Sought: House District: 24				
Carbajal, Salud, , ,	Oppose	President Senate State: CA				
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ✓ Primary General Other (specify) ✓				
(a) SUBTOTAL of Itemized Independent Expenditures		16882.02				
(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, , , [Electronica	ally Filed] Date	07 29 2021				
Signature						

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 Amends report filed on Check if X New report Full Name of Payee Date of Public Distribution/Dissemination **EYP Consultants LLC** 2021 07 29 Mailing Address 2949 NW 120th Way Amount State Zip Code City 1055.13 FL 33323 Transaction ID: SE-S321475 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 93807.96 2026 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination EYP Consultants LLC 29 2021 Mailing Address 2949 NW 120th Way Amount City State Zip Code 1055.13 FL Transaction ID: SE-S321477 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 93807.84 Per Election for Office Sought Other (specify) ▶ (a) SUBTOTAL of Itemized Independent Expenditures..... 2110.26 (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] 07 29 2021 Date Signature

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

PAGE	3	OF	6	
FOR SI	OF	FORM 2	4/48	

Check if 24-hour report	emination 2021 2110.25 tion					
Check if 24-hour report	emination Y2021					
Check if 24-hour report	emination Y2021					
LAV Services LLC Mailing Address 3468 Ruth Dr City State Zip Code Las Vegas NV 89121 Transaction ID: SE-S321479 Date of Disbursement or Obliga Purpose of Expenditure Phonebank Payroll Services(Estimate) Name of Federal Candidate Collins, Susan, , , Oppose President X Senate Sta Calendar Year-To-Date Per Election for Office Sought Per Election for Office Sought Primary Disbursement For: X Primary 29 Amount Category/ Type Oo4 Disbursement For: X Primary Primary Disbursement For: X Primary Disbursement For: X Primary	2021 2021 1110.25 tion					
Mailing Address 3468 Ruth Dr City State Zip Code Las Vegas NV 89121 Purpose of Expenditure Phonebank Payroll Services(Estimate) Name of Federal Candidate Collins, Susan, , , Oppose Calendar Year-To-Date Per Election for Office Sought 93807.96 Amount Category/ Type 004 Transaction ID: SE-S321479 Date of Disbursement or Obliga M M / D D / Y Support Office Sought: House District State Disbursement For: X Primary 2026	2021 110.25 tion					
City State Zip Code Las Vegas NV 89121 Purpose of Expenditure Phonebank Payroll Services(Estimate) Name of Federal Candidate Collins, Susan, , , Calendar Year-To-Date Per Election for Office Sought Amount Transaction ID: SE-S321479 Date of Disbursement or Obligation M M M D D D D D D D D D D D D D D D D	tion					
Las Vegas Purpose of Expenditure Phonebank Payroll Services(Estimate) Name of Federal Candidate Collins, Susan, , , Calendar Year-To-Date Per Election for Office Sought NV 89121 Transaction ID: SE-S321479 Date of Disbursement or Obligation Category/ Type 004 Support Office Sought: House Distriction Fresident X Senate Sta Disbursement For: X Primary 2026	tion					
Purpose of Expenditure Phonebank Payroll Services(Estimate) Name of Federal Candidate Collins, Susan, , , Calegory/ Type Office Sought: House District Star Star Star Star Star Star Star Sta						
Purpose of Expenditure Phonebank Payroll Services(Estimate) Name of Federal Candidate Collins, Susan, , , Calegory/ Type Office Sought: House District Star Support Collins, Susan, , , Calendar Year-To-Date Per Election for Office Sought 93807.96 Disbursement For: Primary 2026						
Collins, Susan, , , Oppose President Senate Sta Calendar Year-To-Date Per Election for Office Sought 93807.96 Disbursement For: 2026 2026						
Collins, Susan, , , Oppose President Senate Sta Calendar Year-To-Date Disbursement For: Primary 2026 Primary 2026	ct:					
Per Election for Office Sought 93807.96 2026	te: ME					
	General					
Other (specify) ►						
Full Name of Payee LAV Services LLC Date of Public Distribution/Disse	emination					
Mailing Address 3468 Ruth Dr	2021					
Amount						
City State Zip Code 2	2110.25					
Las Vegas NV 89121 Transaction ID : SE-S321481 Date of Disbursement or Obliga	tion					
Purpose of Expenditure	YYYY					
Name of Federal Candidate	ct: 24					
Carbaial Salud	te: CA					
Calendar Year-To-Date Per Election for Office Sought Disbursement For: 2022 Disbursement For: 2022	General					
Other (specify)						
(a) SUBTOTAL of Itemized Independent Expenditures						
(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] Date 07 29 2021	Y					
Signature Date 07 29 2021						

Signature

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 Amends report filed on Check if X New report Full Name of Payee Date of Public Distribution/Dissemination Ridge Innovative 2021 07 29 Mailing Address 2124 Union ave. Amount State Zip Code City 1524.08 CA 92627 Transaction ID: SE-S321483 Costa Mesa Date of Disbursement or Obligation Purpose of Expenditure Category/ Phonebank Long Distance(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 93807.96 2026 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Ridge Innovative 29 2021 Mailing Address 2124 Union ave. Amount City State Zip Code 1524.06 CA Transaction ID: SE-S321485 Costa Mesa 92627 Date of Disbursement or Obligation Purpose of Expenditure Category/ 004 Phonebank Long Distance(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 93807.84 Per Election for Office Sought Other (specify) ▶ (a) SUBTOTAL of Itemized Independent Expenditures..... 3048.14 (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, , ,

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Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES **PAGE** OF 5 (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 Amends report filed on Check if X New report Full Name of Payee Date of Public Distribution/Dissemination Standard Data Services LLC 2021 07 29 Mailing Address 513 Mill Ave SE Amount Suite 206 State Zip Code City 3165.39 OH 44663 Transaction ID: SE-S321467 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 93807.96 2026 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Standard Data Services LLC 29 2021 Mailing Address 513 Mill Ave SE Amount Suite 206 City State Zip Code 3165.38 ОН Transaction ID: SE-S321469 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 93807.84 Per Election for Office Sought Other (specify) ▶ (a) SUBTOTAL of Itemized Independent Expenditures..... 6330.77 (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]

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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

PAGE OF 6 (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 Amends report filed on Check if X New report Full Name of Payee Date of Public Distribution/Dissemination Wired4Data 2021 07 29 Mailing Address 55 Lake Havasu Ave South Amount F-677 State Zip Code City 4806.69 ΑZ 86403 Transaction ID: SE-S321487 Lake Havasu City Date of Disbursement or Obligation Purpose of Expenditure Category/ PHONEBANK IT/TECH SUPPORT(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 93807.96 2026 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Wired4Data 29 2021 Mailing Address 55 Lake Havasu Ave South Amount F-677 City State Zip Code 4806.69 ΑZ Transaction ID: SE-S321489 86403 Lake Havasu City Date of Disbursement or Obligation Purpose of Expenditure Category/ PHONEBANK IT/TECH SUPPORT(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 93807.84 Per Election for Office Sought Other (specify) ▶ (a) SUBTOTAL of Itemized Independent Expenditures..... 9613.38 (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... 42205.07 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]

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