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

schedule E)	PAGE 1 OF 6 FOR SE OF FORM 24/48
ASSOCIATION FOR EMERGENCY RESPONDERS AND	FEC IDENTIFICATION NUMBER ▼
FIREFIGHTERS	C C00622472
check if 24-hour report 48-hour report New report Amends report fi	iled on M M / D D / Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
Cloud Data Services	01 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1350 W SOUTHPORT ROAD	Amount
BOX 130  City State Zip Code	888.22
City State Zip Code INDIANAPOLIS IN 46217	Transaction ID : SE-S442094 Date of Disbursement or Obligation
Purpose of Expenditure Leads / Phone Lists(Estimate)  Category/ Type  004	Date of Disbursement of Obligation
Name of Federal Candidate Support O	ffice Sought: House District:
Collins, Susan, , ,	President X Senate State: ME
Odichadi Todi To Dato	isbursement For:  Primary General 026 Other (specify)    Other (specify)
Full Name of Payee	Date of Public Distribution/Dissemination
Cloud Data Services	01 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1350 W SOUTHPORT ROAD	Amount
BOX 130  City State Zip Code	888.22
INDIANAPOLIS IN 46217	Transaction ID : SE-S442096 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 Support O	office Sought: 🗶 House District: 24
Carbajal, Salud, , ,	President Senate State: CA
	oisbursement For:   ✓ Primary General  Other (specify)   ✓
•	
(a) SUBTOTAL of Itemized Independent Expenditures	1776.44
(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 eigenty committee) any political party committee or its agent.	
PIARO, ROBERT, , ,  [Electronically Filed] Date	01 13 / 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)

**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 Amends report filed on Check if X New report Full Name of Payee Date of Public Distribution/Dissemination **EYP Consultants LLC** 01 13 2022 Mailing Address 2949 NW 120th Way Amount State Zip Code City 111.03 Transaction ID : SE-S442102 FL 33323 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 4903.50 2026 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination EYP Consultants LLC 01 13 2022 Mailing Address 2949 NW 120th Way Amount City State Zip Code 111.03 FL Transaction ID: SE-S442104 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 4903.48 Per Election for Office Sought Other (specify) ▶ (a) SUBTOTAL of Itemized Independent Expenditures..... 222.06 (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] 01 13 2022 Date 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 LAV Services LLC 2022 01 13 Mailing Address 3468 Ruth Dr Amount State Zip Code City 222.06 NV89121 Transaction ID: SE-S442106 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 4903.50 2026 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination LAV Services LLC 01 13 2022 Mailing Address 3468 Ruth Dr Amount City State Zip Code 222.05 NV Transaction ID: SE-S442108 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 4903.48 Per Election for Office Sought Other (specify) ▶ (a) SUBTOTAL of Itemized Independent Expenditures..... 444.11 (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] 01 13 2022 Date Signature

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

**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 01 13 2022 Mailing Address 2124 Union ave. Amount State Zip Code City 160.37 CA 92627 Transaction ID: SE-S442112 Costa Mesa Date of Disbursement or Obligation Purpose of Expenditure Category/ Phonebank Long Distance(Estimate) 004 Type Name of Federal Candidate 24 × Support Office Sought: **X** House District: Carbajal, Salud, , , CA Oppose President Senate State: Disbursement For: X Primary General Calendar Year-To-Date 4903.48 2022 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Ridge Innovative 01 13 2022 Mailing Address 2124 Union ave. Amount City State Zip Code 160.37 CA Transaction ID: SE-S442110 Costa Mesa 92627 Date of Disbursement or Obligation Purpose of Expenditure Category/ 004 Phonebank Long Distance(Estimate) Type Name of Federal Candidate **✗** Support Office Sought: House District: Collins, Susan, , , ME Oppose **x** | Senate President State: **x** Primary Disbursement For: Calendar Year-To-Date General 2026 4903.50 Per Election for Office Sought Other (specify) ▶ (a) SUBTOTAL of Itemized Independent Expenditures..... 320.74 (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] 01 13 2022 Date Signature

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

**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 01 13 2022 Mailing Address 513 Mill Ave SE Amount Suite 206 State Zip Code City 333.08 Transaction ID: SE-S442098 OH 44663 New Philadelphia Date of Disbursement or Obligation Purpose of Expenditure Category/ Caging and Database Services(Estimate) 004 Type Name of Federal Candidate X Support Office Sought: House District: Collins, Susan, , , ME **x** Senate Oppose President State: Disbursement For: **X** Primary General Calendar Year-To-Date 4903.50 2026 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Standard Data Services LLC 01 13 2022 Mailing Address 513 Mill Ave SE Amount Suite 206 City State Zip Code 333.08 ОН Transaction ID: SE-S442100 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 4903.48 Per Election for Office Sought Other (specify) ▶ (a) SUBTOTAL of Itemized Independent Expenditures..... 666.16 (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] 01 13 2022 Date Signature

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

**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 01 13 2022 Mailing Address 55 Lake Havasu Ave South Amount F-677 State Zip Code City 505.79 ΑZ 86403 Transaction ID: SE-S442114 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 4903.50 2026 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Wired4Data 01 13 2022 Mailing Address 55 Lake Havasu Ave South Amount F-677 City State Zip Code 505.79 ΑZ Transaction ID: SE-S442116 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 4903.48 Per Election for Office Sought Other (specify) ▶ (a) SUBTOTAL of Itemized Independent Expenditures..... 1011.58 (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... 4441.09 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] 01 13 2022 Date Signature