

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) New Power PAC		FEC IDENTIFICATION NUMBER ▼ C C00489252	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Allegra Print & Imaging		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 04 / 2022	
Mailing Address 198 Moore Drive		Amount 1576.55	
City Lexington	State KY	Zip Code 40503	Transaction ID : SE.6468
Purpose of Expenditure candidate sticky notes for canvassing		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 05 / 04 / 2022
Name of Federal Candidate BOOKER, CHARLES, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: KY
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee Allegra Print & Imaging		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 04 / 2022	
Mailing Address 198 Moore Drive		Amount 999.00	
City Lexington	State KY	Zip Code 40503	Transaction ID : SE.6478
Purpose of Expenditure candidate door hangers for canvassing		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 05 / 04 / 2022
Name of Federal Candidate SCOTT, ATTICA WOODSON, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: KY
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	2575.55
(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.

Mahoney, Heather, Roe, Ms,

[Electronically Filed]

Date

MM / DD / YYYY
05 / 04 / 2022

Signature

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(Schedule E)PAGE 2 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) New Power PAC		FEC IDENTIFICATION NUMBER ▼ C C00489252
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on

Full Name of Payee Martin, Shauntrice, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 04 / 2022
Mailing Address 735 Lampton Street Suite 202		Amount 225.00
City Louisville	State KY	Zip Code 40203
Purpose of Expenditure candidate flyer and postcards	Category/ Type 004	Transaction ID : SE.6479 Date of Disbursement or Obligation MM / DD / YYYY 05 / 04 / 2022
Name of Federal Candidate BOOKER, CHARLES, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: KY
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Martin, Shauntrice, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 04 / 2022
Mailing Address 735 Lampton Street Suite 202		Amount 225.00
City Louisville	State KY	Zip Code 40203
Purpose of Expenditure candidate flyer and postcards	Category/ Type 004	Transaction ID : SE.6480 Date of Disbursement or Obligation MM / DD / YYYY 05 / 04 / 2022
Name of Federal Candidate SCOTT, ATTICA WOODSON, , ,		Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: KY
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	450.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	3025.55

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.

*Mahoney, Heather, Roe, Ms,**[Electronically Filed]*

Date

MM / DD / YYYY
05 / 04 / 2022

Signature