

# FEC FORM 5

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation <b>SOUTH BAY AFL-CIO LABOR COUNCIL</b>		3. FEC Identification Number <b>C C90012444</b>
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 2302 Zanker Road		
(c) City, State and ZIP Code SAN JOSE CA 95131		
2. Occupation and Name of Employer (for Individual Filers Only)		

4. TYPE OF REPORT (check appropriate boxes):

(a)  April 15 Quarterly Report

July 15 Quarterly Report

24-Hour Report

October 15 Quarterly Report

48-Hour Report

January 31 Year-End Report

b) Is this Report an amendment?  No  Yes, it amends the report filed on

M M	/	D D	/	Y Y Y Y
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5. COVERING PERIOD:

FROM

M M	/	D D	/	Y Y Y Y
01		01		2024

THROUGH

M M	/	D D	/	Y Y Y Y
03		31		2024

6. TOTAL CONTRIBUTIONS.....

0.00
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7. TOTAL INDEPENDENT EXPENDITURES .....

1615.88
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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 any political party committee or its agent.

**TYPE OR PRINT NAME OF PERSON COMPLETING FORM**

**SIGNATURE**

**DATE**

Fernandez, Enrique, , ,

Fernandez, Enrique, , ,

04/15/2024

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 52 U.S.C. §30109.

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

**SCHEDULE 5-E**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
SOUTH BAY AFL-CIO LABOR COUNCIL

Full Name (Last, First, Middle Initial) of Payee The Merrill Strategy Group		Date of Public Distribution/Dissemination 01 / 20 / 2024	
Mailing Address 2342 Shattuck Avenue, Suite 507		Amount 403.97	
City Berkeley	State CA	Zip Code 94704	Transaction ID : F57.4104
Purpose of Expenditure Mailer	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 17
Name of Federal Candidate Supported or Opposed by Expenditure: KHANNA, ROHIT, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee The Merrill Strategy Group		Date of Public Distribution/Dissemination 01 / 20 / 2024	
Mailing Address 2342 Shattuck Avenue, Suite 507		Amount 403.97	
City Berkeley	State CA	Zip Code 94704	Transaction ID : F57.4105
Purpose of Expenditure Mailer	Category/Type 004	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 18
Name of Federal Candidate Supported or Opposed by Expenditure: LOFGREN, ZOE, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee The Merrill Strategy Group		Date of Public Distribution/Dissemination 01 / 20 / 2024	
Mailing Address 2342 Shattuck Avenue, Suite 507		Amount 403.97	
City Berkeley	State CA	Zip Code 94704	Transaction ID : F57.4108
Purpose of Expenditure Mailer	Category/Type 004	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 19
Name of Federal Candidate Supported or Opposed by Expenditure: PANETTA, JIMMY, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1211.91
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
SOUTH BAY AFL-CIO LABOR COUNCIL

Full Name (Last, First, Middle Initial) of Payee The Merrill Strategy Group		Date of Public Distribution/Dissemination 01 / 20 / 2024	
Mailing Address 2342 Shattuck Avenue, Suite 507		Amount 403.97	
City Berkeley	State CA	Zip Code 94704	Transaction ID : F57.4109
Purpose of Expenditure Mailer	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 16
Name of Federal Candidate Supported or Opposed by Expenditure: LOW, EVAN, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	403.97
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	1615.88