

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

NAME OF COMMITTEE (In Full) PAF			FEC IDENTIFICATION NUMBER ▼ C C00754069		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee Beeswax.io			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 01 / 2024		
Mailing Address 275 7th Ave 21st Floor			Amount 20000.00		
City New York		State NY	Zip Code 10001		Transaction ID : WFT202411840-1
Purpose of Expenditure Digital Advertising		Category/ Type		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate Pilip, Mazi, , ,			☐ Support ☒ Oppose		Office Sought: ☒ House District: 03 ☐ President ☐ Senate State: NY
Calendar Year-To-Date Per Election for Office Sought			181992.00		Disbursement For: ☐ Primary ☐ General 2024 ☒ Other (specify) ▶ Special
Full Name of Payee			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y		
Mailing Address			Amount 		
City		State	Zip Code		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Purpose of Expenditure		Category/ Type			
Name of Federal Candidate			☐ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☐ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought					Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶ _____
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			20000.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶			20000.00		
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.					
Signature Schuman, Blair, , ,			Date M M / D D / Y Y Y Y Y Y 02 / 01 / 2024		