

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

NAME OF COMMITTEE (In Full) People Power Pennsylvania			FEC IDENTIFICATION NUMBER ▼ C C00882381		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M M / D D D / Y Y Y Y Y Y					
Full Name of Payee Commonwealth Communications [MEMO ITEM]			Date of Public Distribution/Dissemination 10 / 29 / 2024		
Mailing Address PO Box 22611			Amount 50.00		
City Philadelphia		State PA	Zip Code 19110-2611		Transaction ID : E3531EFEC02E049DDB6B
Purpose of Expenditure Staff Time - Production (Estimate)		Category/ Type		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y	
Name of Federal Candidate Trump, Donald, J., ,			☐ Support ☒ Oppose		Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: ZZ
Calendar Year-To-Date Per Election for Office Sought 2586125.91			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
Full Name of Payee Commonwealth Communications [MEMO ITEM]			Date of Public Distribution/Dissemination 10 / 29 / 2024		
Mailing Address PO Box 22611			Amount 50.00		
City Philadelphia		State PA	Zip Code 19110-2611		Transaction ID : E5F51610FA45442BEBB9
Purpose of Expenditure Staff Time - Production (Estimate)		Category/ Type		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y	
Name of Federal Candidate Harris, Kamala, , ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: ZZ
Calendar Year-To-Date Per Election for Office Sought 2586125.91			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			0		
(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.					
Signature Perrone, Victoria, , ,			Date 11 / 01 / 2024		

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

NAME OF COMMITTEE (In Full) People Power Pennsylvania		FEC IDENTIFICATION NUMBER ▼ C C00882381
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee Left Hook Strategy		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 31 / 2024
Mailing Address 2601 Ocean Park Ste 324		Amount 42500.00
City Santa Monica	State CA	Zip Code 90405-5297
Purpose of Expenditure Digital Advertising	Category/ Type	Transaction ID : E7A9959CBD32944C2AF2 Date of Disbursement or Obligation MM / DD / YYYY 10 / 31 / 2024
Name of Federal Candidate Harris, Kamala, , ,		Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: ZZ
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee Left Hook Strategy		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 31 / 2024
Mailing Address 2601 Ocean Park Ste 324		Amount 42500.00
City Santa Monica	State CA	Zip Code 90405-5297
Purpose of Expenditure Digital Advertising	Category/ Type	Transaction ID : EC1B1331808334FE6816 Date of Disbursement or Obligation MM / DD / YYYY 10 / 31 / 2024
Name of Federal Candidate Trump, Donald, J., ,		Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: ZZ
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	85000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	85100.00

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.

Perrone, Victoria, , ,

Signature

Date

MM / DD / YYYY
11 / 01 / 2024