

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) UNITED WOMEN'S HEALTH ALLIANCE PAC
FEC IDENTIFICATION NUMBER C C00755694
Check if 24-hour report 48-hour report New report Amends report filed on 01/01/2015

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004

Date of Public Distribution/Dissemination 12/01/2021
Amount 909.85
Transaction ID : SE-S434225
Date of Disbursement or Obligation

Name of Federal Candidate CORNYN, JOHN, , Sen, Support
Calendar Year-To-Date Per Election for Office Sought 8043.44

Office Sought: House District: 00
Senate State: TX
Disbursement For: Primary General 2026

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004

Date of Public Distribution/Dissemination 12/01/2021
Amount 909.85
Transaction ID : SE-S434227
Date of Disbursement or Obligation

Name of Federal Candidate TILLIS, THOM, R., Sen, Support
Calendar Year-To-Date Per Election for Office Sought 8043.41

Office Sought: House District: 00
Senate State: NC
Disbursement For: Primary General 2026

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 1819.70

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 MASTROIANNI, STEPHANIE, , [Electronically Filed] Date 04/01/2022

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F24A  
Transaction ID :

This amendment is to VOID the 8 x Schedule E's on 2021-11-10 for \$1140.xx. This was a mistake/duplicate invoice. This was discovered and the erroneous SE's were removed from the 2021-Year end report. We are amending this F24 to reflect it as well.

Form/Schedule:  
Transaction ID:

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) UNITED WOMEN'S HEALTH ALLIANCE PAC
FEC IDENTIFICATION NUMBER C C00755694
Check if 24-hour report [ ] 48-hour report [x] New report [ ] Amends report filed on 01/01/2015

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate LAWRENCE, BRENDA, LULENAR, , Support [x] Oppose [ ]
Calendar Year-To-Date Per Election for Office Sought 8043.41

Date of Public Distribution/Dissemination 12/01/2021
Amount 909.85
Transaction ID : SE-S434229
Date of Disbursement or Obligation
Office Sought: [x] House District: 14
Disbursement For: [x] Primary 2022

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate LESKO, DEBBIE, , Support [x] Oppose [ ]
Calendar Year-To-Date Per Election for Office Sought 8043.40

Date of Public Distribution/Dissemination 12/01/2021
Amount 909.84
Transaction ID : SE-S434231
Date of Disbursement or Obligation
Office Sought: [x] House District: 08
Disbursement For: [x] Primary 2022

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 1819.69

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 MASTROIANNI, STEPHANIE, , [Electronically Filed] Date 04/01/2022

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) UNITED WOMEN'S HEALTH ALLIANCE PAC
FEC IDENTIFICATION NUMBER C C00755694
Check if 24-hour report [ ] 48-hour report [x] New report [ ] Amends report filed on 01/01/2015

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate SHAHEEN, JEANNE, , , [x] Support [ ] Oppose
Calendar Year-To-Date Per Election for Office Sought 8043.42

Date of Public Distribution/Dissemination 12/01/2021
Amount 909.84
Transaction ID : SE-S434233
Date of Disbursement or Obligation
Office Sought: [ ] House District: 00 [ ] President [x] Senate State: NH
Disbursement For: [x] Primary [ ] General 2026 [ ] Other (specify)

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate BLUNT, ROY, , , [x] Support [ ] Oppose
Calendar Year-To-Date Per Election for Office Sought 8043.45

Date of Public Distribution/Dissemination 12/01/2021
Amount 909.84
Transaction ID : SE-S434235
Date of Disbursement or Obligation
Office Sought: [ ] House District: 00 [ ] President [x] Senate State: MO
Disbursement For: [x] Primary [ ] General 2022 [ ] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1819.68
(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.
MASTROIANNI, STEPHANIE, , , [Electronically Filed] Date 04/01/2022
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) UNITED WOMEN'S HEALTH ALLIANCE PAC
FEC IDENTIFICATION NUMBER C C00755694
Check if 24-hour report 48-hour report New report Amends report filed on 01/01/2015

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate MURRAY, PATTY, , , Support
Calendar Year-To-Date Per Election for Office Sought 8043.44

Date of Public Distribution/Dissemination 12/01/2021
Amount 909.84
Transaction ID : SE-S434237
Date of Disbursement or Obligation
Office Sought: House District: 00
President Senate State: WA
Disbursement For: Primary General 2022 Other (specify)

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate VAN HOLLEN, CHRIS, , , Support
Calendar Year-To-Date Per Election for Office Sought 8043.44

Date of Public Distribution/Dissemination 12/01/2021
Amount 909.84
Transaction ID : SE-S434239
Date of Disbursement or Obligation
Office Sought: House District: 00
President Senate State: MD
Disbursement For: Primary General 2022 Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 1819.68

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 MASTROIANNI, STEPHANIE, , , [Electronically Filed] Date 04/01/2022

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) UNITED WOMEN'S HEALTH ALLIANCE PAC
FEC IDENTIFICATION NUMBER C C00755694
Check if 24-hour report 48-hour report New report Amends report filed on 01/01/2015

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate CORNYN, JOHN, , Sen, Support
Calendar Year-To-Date Per Election for Office Sought 9023.57

Date of Public Distribution/Dissemination 12/08/2021
Amount 980.13
Transaction ID : SE-S434241
Date of Disbursement or Obligation
Office Sought: House District: 00
President Senate State: TX
Disbursement For: Primary General 2026 Other (specify)

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate TILLIS, THOM, R., Sen, Support
Calendar Year-To-Date Per Election for Office Sought 9023.54

Date of Public Distribution/Dissemination 12/08/2021
Amount 980.13
Transaction ID : SE-S434243
Date of Disbursement or Obligation
Office Sought: House District: 00
President Senate State: NC
Disbursement For: Primary General 2026 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1960.26
(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.
MASTROIANNI, STEPHANIE, , [Electronically Filed] Date 04/01/2022
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) UNITED WOMEN'S HEALTH ALLIANCE PAC
FEC IDENTIFICATION NUMBER C C00755694
Check if 24-hour report [ ] 48-hour report [x] New report [ ] Amends report filed on 01/01/2015

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate LAWRENCE, BRENDA, LULENAR, , Support [x] Oppose [ ]
Calendar Year-To-Date Per Election for Office Sought 9023.54

Date of Public Distribution/Dissemination 12/08/2021
Amount 980.13
Transaction ID : SE-S434245
Date of Disbursement or Obligation
Office Sought: [x] House District: 14 [ ] President [ ] Senate State: MI
Disbursement For: [x] Primary [ ] General 2022 [ ] Other (specify)

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate LESKO, DEBBIE, , Support [x] Oppose [ ]
Calendar Year-To-Date Per Election for Office Sought 9023.53

Date of Public Distribution/Dissemination 12/08/2021
Amount 980.13
Transaction ID : SE-S434247
Date of Disbursement or Obligation
Office Sought: [x] House District: 08 [ ] President [ ] Senate State: AZ
Disbursement For: [x] Primary [ ] General 2022 [ ] Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 1960.26, (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.
MASTROIANNI, STEPHANIE, , [Electronically Filed] Date 04/01/2022
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) UNITED WOMEN'S HEALTH ALLIANCE PAC
FEC IDENTIFICATION NUMBER C C00755694
Check if 24-hour report [ ] 48-hour report [x] New report [ ] Amends report filed on 01/01/2015

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004

Date of Public Distribution/Dissemination 12/08/2021
Amount 980.13
Transaction ID : SE-S434249
Date of Disbursement or Obligation

Name of Federal Candidate SHAHEEN, JEANNE, , ,
[x] Support [ ] Oppose
Office Sought: [ ] House [x] Senate
District: 00 State: NH

Disbursement For: [x] Primary [ ] General
2026 [ ] Other (specify)

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004

Date of Public Distribution/Dissemination 12/08/2021
Amount 980.13
Transaction ID : SE-S434251
Date of Disbursement or Obligation

Name of Federal Candidate BLUNT, ROY, , ,
[x] Support [ ] Oppose
Office Sought: [ ] House [x] Senate
District: 00 State: MO

Disbursement For: [x] Primary [ ] General
2022 [ ] Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 1960.26

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 MASTROIANNI, STEPHANIE, , , [Electronically Filed] Date 04/01/2022



24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) UNITED WOMEN'S HEALTH ALLIANCE PAC
FEC IDENTIFICATION NUMBER C C00755694
Check if 24-hour report 48-hour report New report Amends report filed on 01/01/2015

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate MURRAY, PATTY, , , Support
Calendar Year-To-Date Per Election for Office Sought 9023.57

Date of Public Distribution/Dissemination 12/08/2021
Amount 980.13
Transaction ID : SE-S434253
Date of Disbursement or Obligation
Office Sought: House District: 00 Senate State: WA
Disbursement For: Primary General 2022 Other (specify)

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate VAN HOLLEN, CHRIS, , , Support
Calendar Year-To-Date Per Election for Office Sought 9023.57

Date of Public Distribution/Dissemination 12/08/2021
Amount 980.13
Transaction ID : SE-S434255
Date of Disbursement or Obligation
Office Sought: House District: 00 Senate State: MD
Disbursement For: Primary General 2022 Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 1960.26, (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.
MASTROIANNI, STEPHANIE, , , [Electronically Filed] Date 04/01/2022
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) UNITED WOMEN'S HEALTH ALLIANCE PAC
FEC IDENTIFICATION NUMBER C C00755694
Check if 24-hour report 48-hour report New report Amends report filed on 01/01/2015

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate CORNYN, JOHN, , Sen, Support
Calendar Year-To-Date Per Election for Office Sought 1375.00

Date of Public Distribution/Dissemination 10/13/2021
Amount 1375.00
Transaction ID : SE-S431194
Date of Disbursement or Obligation 10/06/2021
Office Sought: House District: 00
President Senate State: TX
Disbursement For: Primary General 2026 Other (specify)

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate TILLIS, THOM, R., Sen, Support
Calendar Year-To-Date Per Election for Office Sought 1375.00

Date of Public Distribution/Dissemination 10/13/2021
Amount 1375.00
Transaction ID : SE-S431196
Date of Disbursement or Obligation 10/06/2021
Office Sought: House District: 00
President Senate State: NC
Disbursement For: Primary General 2026 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 2750.00
(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.
MASTROIANNI, STEPHANIE, , [Electronically Filed] Date 04/01/2022
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) UNITED WOMEN'S HEALTH ALLIANCE PAC
FEC IDENTIFICATION NUMBER C C00755694
Check if 24-hour report [ ] 48-hour report [x] New report [ ] Amends report filed on 01/01/2015

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004

Date of Public Distribution/Dissemination 10/13/2021
Amount 1375.00
Transaction ID : SE-S431198
Date of Disbursement or Obligation 10/06/2021

Name of Federal Candidate LAWRENCE, BRENDA, LULENAR,
[x] Support [ ] Oppose
Calendar Year-To-Date Per Election for Office Sought 1375.00

Office Sought: [x] House [ ] President [ ] Senate District: 14 State: MI
Disbursement For: [x] Primary [ ] General 2022 [ ] Other (specify)

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004

Date of Public Distribution/Dissemination 10/13/2021
Amount 1375.00
Transaction ID : SE-S431200
Date of Disbursement or Obligation 10/06/2021

Name of Federal Candidate LESKO, DEBBIE,
[x] Support [ ] Oppose
Calendar Year-To-Date Per Election for Office Sought 1375.00

Office Sought: [x] House [ ] President [ ] Senate District: 08 State: AZ
Disbursement For: [x] Primary [ ] General 2022 [ ] Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 2750.00, (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 MASTROIANNI, STEPHANIE, , [Electronically Filed] Date 04/01/2022

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) UNITED WOMEN'S HEALTH ALLIANCE PAC
FEC IDENTIFICATION NUMBER C C00755694
Check if 24-hour report [ ] 48-hour report [x] New report [ ] Amends report filed on 01 / 01 / 2015

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate SHAHEEN, JEANNE, , , [x] Support [ ] Oppose
Calendar Year-To-Date Per Election for Office Sought 1375.00

Date of Public Distribution/Dissemination 10 / 13 / 2021
Amount 1375.00
Transaction ID : SE-S431202
Date of Disbursement or Obligation 10 / 06 / 2021
Office Sought: [ ] House District: 00 [ ] President [x] Senate State: NH
Disbursement For: [x] Primary [ ] General 2026 [ ] Other (specify) ▶

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate BLUNT, ROY, , , [x] Support [ ] Oppose
Calendar Year-To-Date Per Election for Office Sought 1375.00

Date of Public Distribution/Dissemination 10 / 13 / 2021
Amount 1375.00
Transaction ID : SE-S431204
Date of Disbursement or Obligation 10 / 06 / 2021
Office Sought: [ ] House District: 00 [ ] President [x] Senate State: MO
Disbursement For: [x] Primary [ ] General 2022 [ ] Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 2750.00
(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.
MASTROIANNI, STEPHANIE, , , [Electronically Filed] Date 04 / 01 / 2022
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) UNITED WOMEN'S HEALTH ALLIANCE PAC
FEC IDENTIFICATION NUMBER C C00755694
Check if 24-hour report 48-hour report New report Amends report filed on 01/01/2015

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate MURRAY, PATTY, , , Support
Calendar Year-To-Date Per Election for Office Sought 1375.00

Date of Public Distribution/Dissemination 10/13/2021
Amount 1375.00
Transaction ID : SE-S431206
Date of Disbursement or Obligation 10/06/2021
Office Sought: House District: 00
President Senate State: WA
Disbursement For: Primary General 2022 Other (specify)

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate VAN HOLLEN, CHRIS, , , Support
Calendar Year-To-Date Per Election for Office Sought 1375.00

Date of Public Distribution/Dissemination 10/13/2021
Amount 1375.00
Transaction ID : SE-S431208
Date of Disbursement or Obligation 10/06/2021
Office Sought: House District: 00
President Senate State: MD
Disbursement For: Primary General 2022 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 2750.00
(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.
MASTROIANNI, STEPHANIE, , , [Electronically Filed] Date 04/01/2022
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) UNITED WOMEN'S HEALTH ALLIANCE PAC
FEC IDENTIFICATION NUMBER C C00755694
Check if 24-hour report [ ] 48-hour report [x] New report [ ] Amends report filed on 01/01/2015

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Date of Public Distribution/Dissemination 10/20/2021
Amount 1400.26
Transaction ID : SE-S431107
Date of Disbursement or Obligation 10/13/2021
Name of Federal Candidate CORNYN, JOHN, , Sen. Support [x] Oppose [ ]
Office Sought: House [ ] Senate [x] District: 00 State: TX
Calendar Year-To-Date Per Election for Office Sought 2775.26
Disbursement For: Primary [x] General [ ] Other (specify) [ ]

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Date of Public Distribution/Dissemination 10/20/2021
Amount 1400.25
Transaction ID : SE-S431109
Date of Disbursement or Obligation 10/13/2021
Name of Federal Candidate TILLIS, THOM, R., Sen. Support [x] Oppose [ ]
Office Sought: House [ ] Senate [x] District: 00 State: NC
Calendar Year-To-Date Per Election for Office Sought 2775.25
Disbursement For: Primary [x] General [ ] Other (specify) [ ]

(a) SUBTOTAL of Itemized Independent Expenditures 2800.51
(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.
MASTROIANNI, STEPHANIE, , [Electronically Filed] Date 04/01/2022
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) UNITED WOMEN'S HEALTH ALLIANCE PAC
FEC IDENTIFICATION NUMBER C C00755694
Check if 24-hour report 48-hour report New report Amends report filed on 01/01/2015

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate LAWRENCE, BRENDA, LULENAR, Support
Calendar Year-To-Date Per Election for Office Sought 2775.25

Date of Public Distribution/Dissemination 10/20/2021
Amount 1400.25
Transaction ID : SE-S431111
Date of Disbursement or Obligation 10/13/2021
Office Sought: House District: 14 State: MI
Disbursement For: Primary General 2022

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate LESKO, DEBBIE, Support
Calendar Year-To-Date Per Election for Office Sought 2775.25

Date of Public Distribution/Dissemination 10/20/2021
Amount 1400.25
Transaction ID : SE-S431113
Date of Disbursement or Obligation 10/13/2021
Office Sought: House District: 08 State: AZ
Disbursement For: Primary General 2022

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 2800.50, (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.
MASTROIANNI, STEPHANIE, , , [Electronically Filed] Date 04/01/2022
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) UNITED WOMEN'S HEALTH ALLIANCE PAC
FEC IDENTIFICATION NUMBER C C00755694
Check if 24-hour report [ ] 48-hour report [x] New report [ ] Amends report filed on 01 / 01 / 2015

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate SHAHEEN, JEANNE, , , [x] Support [ ] Oppose
Calendar Year-To-Date Per Election for Office Sought 2775.25

Date of Public Distribution/Dissemination 10 / 20 / 2021
Amount 1400.25
Transaction ID : SE-S431115
Date of Disbursement or Obligation 10 / 13 / 2021
Office Sought: [ ] House District: 00 [ ] President [x] Senate State: NH
Disbursement For: [x] Primary [ ] General 2026 [ ] Other (specify) ▶

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate BLUNT, ROY, , , [x] Support [ ] Oppose
Calendar Year-To-Date Per Election for Office Sought 2775.26

Date of Public Distribution/Dissemination 10 / 20 / 2021
Amount 1400.26
Transaction ID : SE-S431117
Date of Disbursement or Obligation 10 / 13 / 2021
Office Sought: [ ] House District: 00 [ ] President [x] Senate State: MO
Disbursement For: [x] Primary [ ] General 2022 [ ] Other (specify) ▶

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 2800.51, (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 MASTROIANNI, STEPHANIE, , , [Electronically Filed] Date 04 / 01 / 2022



24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) UNITED WOMEN'S HEALTH ALLIANCE PAC
FEC IDENTIFICATION NUMBER C C00755694
Check if 24-hour report 48-hour report New report Amends report filed on 01/01/2015

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate MURRAY, PATTY, , , Support
Calendar Year-To-Date Per Election for Office Sought 2775.25

Date of Public Distribution/Dissemination 10/20/2021
Amount 1400.25
Transaction ID : SE-S431119
Date of Disbursement or Obligation 10/13/2021
Office Sought: House District: 00
President Senate State: WA
Disbursement For: Primary General 2022 Other (specify)

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate VAN HOLLEN, CHRIS, , , Support
Calendar Year-To-Date Per Election for Office Sought 2775.25

Date of Public Distribution/Dissemination 10/20/2021
Amount 1400.25
Transaction ID : SE-S431121
Date of Disbursement or Obligation 10/13/2021
Office Sought: House District: 00
President Senate State: MD
Disbursement For: Primary General 2022 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 2800.50
(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.
MASTROIANNI, STEPHANIE, , , [Electronically Filed] Date 04/01/2022
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) UNITED WOMEN'S HEALTH ALLIANCE PAC
FEC IDENTIFICATION NUMBER C C00755694
Check if 24-hour report 48-hour report New report Amends report filed on 01/01/2015

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate CORNYN, JOHN, , Sen, Support
Calendar Year-To-Date Per Election for Office Sought 4063.05

Date of Public Distribution/Dissemination 11/03/2021
Amount 1287.79
Transaction ID : SE-S434145
Date of Disbursement or Obligation 10/27/2021
Office Sought: House District: 00
Senate State: TX
Disbursement For: Primary General 2026 Other (specify)

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate TILLIS, THOM, R., Sen, Support
Calendar Year-To-Date Per Election for Office Sought 4063.04

Date of Public Distribution/Dissemination 11/03/2021
Amount 1287.79
Transaction ID : SE-S434147
Date of Disbursement or Obligation 10/27/2021
Office Sought: House District: 00
Senate State: NC
Disbursement For: Primary General 2026 Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 2575.58, (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.
MASTROIANNI, STEPHANIE, , [Electronically Filed] Date 04/01/2022
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) UNITED WOMEN'S HEALTH ALLIANCE PAC
FEC IDENTIFICATION NUMBER C C00755694
Check if 24-hour report [ ] 48-hour report [x] New report [ ] Amends report filed on 01/01/2015

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate LAWRENCE, BRENDA, LULENAR, , Support [x] Oppose [ ]
Calendar Year-To-Date Per Election for Office Sought 4063.04

Date of Public Distribution/Dissemination 11/03/2021
Amount 1287.79
Transaction ID : SE-S434149
Date of Disbursement or Obligation 10/27/2021
Office Sought: [x] House District: 14 [ ] President [ ] Senate State: MI
Disbursement For: [x] Primary [ ] General 2022 [ ] Other (specify) >

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate LESKO, DEBBIE, , Support [x] Oppose [ ]
Calendar Year-To-Date Per Election for Office Sought 4063.04

Date of Public Distribution/Dissemination 11/03/2021
Amount 1287.79
Transaction ID : SE-S434151
Date of Disbursement or Obligation 10/27/2021
Office Sought: [x] House District: 08 [ ] President [ ] Senate State: AZ
Disbursement For: [x] Primary [ ] General 2022 [ ] Other (specify) >

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 2575.58; (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.
MASTROIANNI, STEPHANIE, , [Electronically Filed] Date 04/01/2022
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) UNITED WOMEN'S HEALTH ALLIANCE PAC
FEC IDENTIFICATION NUMBER C C00755694
Check if 24-hour report [ ] 48-hour report [x] New report [ ] Amends report filed on 01/01/2015

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate SHAHEEN, JEANNE, , , [x] Support [ ] Oppose
Calendar Year-To-Date Per Election for Office Sought 4063.04

Date of Public Distribution/Dissemination 11/03/2021
Amount 1287.79
Transaction ID : SE-S434153
Date of Disbursement or Obligation 10/27/2021
Office Sought: [ ] House District: 00 [ ] President [x] Senate State: NH
Disbursement For: [x] Primary [ ] General 2026 [ ] Other (specify)

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate BLUNT, ROY, , , [x] Support [ ] Oppose
Calendar Year-To-Date Per Election for Office Sought 4063.06

Date of Public Distribution/Dissemination 11/03/2021
Amount 1287.80
Transaction ID : SE-S434155
Date of Disbursement or Obligation 10/27/2021
Office Sought: [ ] House District: 00 [ ] President [x] Senate State: MO
Disbursement For: [x] Primary [ ] General 2022 [ ] Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 2575.59, (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.
MASTROIANNI, STEPHANIE, , , [Electronically Filed] Date 04/01/2022
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) UNITED WOMEN'S HEALTH ALLIANCE PAC
FEC IDENTIFICATION NUMBER C C00755694
Check if 24-hour report 48-hour report New report Amends report filed on 01/01/2015

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate MURRAY, PATTY, , , Support
Calendar Year-To-Date Per Election for Office Sought 4063.05

Date of Public Distribution/Dissemination 11/03/2021
Amount 1287.80
Transaction ID : SE-S434157
Date of Disbursement or Obligation 10/27/2021
Office Sought: Senate State: WA
Disbursement For: Primary

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate VAN HOLLEN, CHRIS, , , Support
Calendar Year-To-Date Per Election for Office Sought 4063.05

Date of Public Distribution/Dissemination 11/03/2021
Amount 1287.80
Transaction ID : SE-S434159
Date of Disbursement or Obligation 10/27/2021
Office Sought: Senate State: MD
Disbursement For: Primary

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 2575.60, (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 MASTROIANNI, STEPHANIE, , , [Electronically Filed] Date 04/01/2022

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) UNITED WOMEN'S HEALTH ALLIANCE PAC
FEC IDENTIFICATION NUMBER C C00755694
Check if 24-hour report 48-hour report New report Amends report filed on 01 / 01 / 2015

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate CORNYN, JOHN, , Sen, Support
Calendar Year-To-Date Per Election for Office Sought 6223.75

Date of Public Distribution/Dissemination 11 / 17 / 2021
Amount 1120.60
Transaction ID : SE-S434177
Date of Disbursement or Obligation 11 / 03 / 2021
Office Sought: House District: 00
President Senate State: TX
Disbursement For: Primary General 2026 Other (specify)

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate TILLIS, THOM, R., Sen, Support
Calendar Year-To-Date Per Election for Office Sought 6223.72

Date of Public Distribution/Dissemination 11 / 17 / 2021
Amount 1120.59
Transaction ID : SE-S434179
Date of Disbursement or Obligation 11 / 03 / 2021
Office Sought: House District: 00
President Senate State: NC
Disbursement For: Primary General 2026 Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 2241.19, (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.
MASTROIANNI, STEPHANIE, , [Electronically Filed] Date 04 / 01 / 2022
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) UNITED WOMEN'S HEALTH ALLIANCE PAC
FEC IDENTIFICATION NUMBER C C00755694
Check if 24-hour report [ ] 48-hour report [x] New report [ ] Amends report filed on 01/01/2015

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate LAWRENCE, BRENDA, LULENAR, , Support [x] Oppose [ ]
Calendar Year-To-Date Per Election for Office Sought 6223.72

Date of Public Distribution/Dissemination 11/17/2021
Amount 1120.59
Transaction ID : SE-S434181
Date of Disbursement or Obligation 11/03/2021
Office Sought: [x] House District: 14 [ ] President [ ] Senate State: MI
Disbursement For: [x] Primary [ ] General 2022 [ ] Other (specify) ▶

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate LESKO, DEBBIE, , Support [x] Oppose [ ]
Calendar Year-To-Date Per Election for Office Sought 6223.72

Date of Public Distribution/Dissemination 11/17/2021
Amount 1120.59
Transaction ID : SE-S434183
Date of Disbursement or Obligation 11/03/2021
Office Sought: [x] House District: 08 [ ] President [ ] Senate State: AZ
Disbursement For: [x] Primary [ ] General 2022 [ ] Other (specify) ▶

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 2241.18; (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.
MASTROIANNI, STEPHANIE, , [Electronically Filed] Date 04/01/2022
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) UNITED WOMEN'S HEALTH ALLIANCE PAC
FEC IDENTIFICATION NUMBER C C00755694
Check if 24-hour report 48-hour report New report Amends report filed on 01/01/2015

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate SHAHEEN, JEANNE, , , Support
Calendar Year-To-Date Per Election for Office Sought 6223.74

Date of Public Distribution/Dissemination 11/17/2021
Amount 1120.60
Transaction ID : SE-S434185
Date of Disbursement or Obligation 11/03/2021
Office Sought: House District: 00 Senate State: NH
Disbursement For: Primary General 2026 Other (specify)

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate BLUNT, ROY, , , Support
Calendar Year-To-Date Per Election for Office Sought 6223.76

Date of Public Distribution/Dissemination 11/17/2021
Amount 1120.60
Transaction ID : SE-S434187
Date of Disbursement or Obligation 11/03/2021
Office Sought: House District: 00 Senate State: MO
Disbursement For: Primary General 2022 Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 2241.20, (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 MASTROIANNI, STEPHANIE, , , [Electronically Filed] Date 04/01/2022



24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) UNITED WOMEN'S HEALTH ALLIANCE PAC
FEC IDENTIFICATION NUMBER C C00755694
Check if 24-hour report [ ] 48-hour report [x] New report [ ] Amends report filed on 01 / 01 / 2015

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate MURRAY, PATTY, , , [x] Support [ ] Oppose
Calendar Year-To-Date Per Election for Office Sought 6223.75

Date of Public Distribution/Dissemination 11 / 17 / 2021
Amount 1120.60
Transaction ID : SE-S434189
Date of Disbursement or Obligation 11 / 03 / 2021
Office Sought: [ ] House District: 00 [ ] President [x] Senate State: WA
Disbursement For: [x] Primary [ ] General 2022 [ ] Other (specify) >

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate VAN HOLLEN, CHRIS, , , [x] Support [ ] Oppose
Calendar Year-To-Date Per Election for Office Sought 6223.75

Date of Public Distribution/Dissemination 11 / 17 / 2021
Amount 1120.60
Transaction ID : SE-S434191
Date of Disbursement or Obligation 11 / 03 / 2021
Office Sought: [ ] House District: 00 [ ] President [x] Senate State: MD
Disbursement For: [x] Primary [ ] General 2022 [ ] Other (specify) >

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 2241.20; (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.
MASTROIANNI, STEPHANIE, , , [Electronically Filed] Date 04 / 01 / 2022
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) UNITED WOMEN'S HEALTH ALLIANCE PAC
FEC IDENTIFICATION NUMBER C C00755694
Check if 24-hour report [ ] 48-hour report [x] New report [ ] Amends report filed on 01 / 01 / 2015

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate CORNYN, JOHN, , Sen, Support [x] Oppose [ ]
Calendar Year-To-Date Per Election for Office Sought 6223.75

Date of Public Distribution/Dissemination 11 / 17 / 2021
Amount 1040.10
Transaction ID : SE-S434193
Date of Disbursement or Obligation 11 / 10 / 2021
Office Sought: House [ ] District: 00
Senate [x] State: TX
Disbursement For: Primary [x] General [ ] Other (specify) [ ]

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate TILLIS, THOM, R., Sen, Support [x] Oppose [ ]
Calendar Year-To-Date Per Election for Office Sought 6223.72

Date of Public Distribution/Dissemination 11 / 17 / 2021
Amount 1040.09
Transaction ID : SE-S434195
Date of Disbursement or Obligation 11 / 10 / 2021
Office Sought: House [ ] District: 00
Senate [x] State: NC
Disbursement For: Primary [x] General [ ] Other (specify) [ ]

(a) SUBTOTAL of Itemized Independent Expenditures 2080.19
(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.
MASTROIANNI, STEPHANIE, , [Electronically Filed] Date 04 / 01 / 2022
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) UNITED WOMEN'S HEALTH ALLIANCE PAC
FEC IDENTIFICATION NUMBER C C00755694
Check if 24-hour report [ ] 48-hour report [x] New report [ ] Amends report filed on 01/01/2015

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate LAWRENCE, BRENDA, LULENAR, , Support [x] Oppose [ ]
Calendar Year-To-Date Per Election for Office Sought 6223.72

Date of Public Distribution/Dissemination 11/17/2021
Amount 1040.09
Transaction ID : SE-S434197
Date of Disbursement or Obligation 11/10/2021
Office Sought: [x] House District: 14 [ ] President [ ] Senate State: MI
Disbursement For: [x] Primary [ ] General 2022 [ ] Other (specify) ▶

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate LESKO, DEBBIE, , Support [x] Oppose [ ]
Calendar Year-To-Date Per Election for Office Sought 6223.72

Date of Public Distribution/Dissemination 11/17/2021
Amount 1040.09
Transaction ID : SE-S434199
Date of Disbursement or Obligation 11/10/2021
Office Sought: [x] House District: 08 [ ] President [ ] Senate State: AZ
Disbursement For: [x] Primary [ ] General 2022 [ ] Other (specify) ▶

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 2080.18, (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.
MASTROIANNI, STEPHANIE, , [Electronically Filed] Date 04/01/2022
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) UNITED WOMEN'S HEALTH ALLIANCE PAC
FEC IDENTIFICATION NUMBER C C00755694
Check if 24-hour report 48-hour report New report Amends report filed on 01 / 01 / 2015

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate SHAHEEN, JEANNE, , , Support
Calendar Year-To-Date Per Election for Office Sought 6223.74

Date of Public Distribution/Dissemination 11 / 17 / 2021
Amount 1040.10
Transaction ID : SE-S434201
Date of Disbursement or Obligation 11 / 10 / 2021
Office Sought: House District: 00
President Senate State: NH
Disbursement For: Primary General 2026 Other (specify)

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate BLUNT, ROY, , , Support
Calendar Year-To-Date Per Election for Office Sought 6223.76

Date of Public Distribution/Dissemination 11 / 17 / 2021
Amount 1040.10
Transaction ID : SE-S434203
Date of Disbursement or Obligation 11 / 10 / 2021
Office Sought: House District: 00
President Senate State: MO
Disbursement For: Primary General 2022 Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 2080.20, (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.
MASTROIANNI, STEPHANIE, , , [Electronically Filed] Date 04 / 01 / 2022
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) UNITED WOMEN'S HEALTH ALLIANCE PAC
FEC IDENTIFICATION NUMBER C C00755694
Check if 24-hour report 48-hour report New report Amends report filed on 01 / 01 / 2015

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate MURRAY, PATTY, , , Support
Calendar Year-To-Date Per Election for Office Sought 6223.75

Date of Public Distribution/Dissemination 11 / 17 / 2021
Amount 1040.10
Transaction ID : SE-S434205
Date of Disbursement or Obligation 11 / 10 / 2021
Office Sought: House District: 00
President Senate State: WA
Disbursement For: Primary General 2022 Other (specify)

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate VAN HOLLEN, CHRIS, , , Support
Calendar Year-To-Date Per Election for Office Sought 6223.75

Date of Public Distribution/Dissemination 11 / 17 / 2021
Amount 1040.10
Transaction ID : SE-S434207
Date of Disbursement or Obligation 11 / 10 / 2021
Office Sought: House District: 00
President Senate State: MD
Disbursement For: Primary General 2022 Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 2080.20, (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.
MASTROIANNI, STEPHANIE, , , [Electronically Filed] Date 04 / 01 / 2022
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) UNITED WOMEN'S HEALTH ALLIANCE PAC
FEC IDENTIFICATION NUMBER C C00755694
Check if 24-hour report [ ] 48-hour report [x] New report [ ] Amends report filed on 01/01/2015

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate CORNYN, JOHN, , Sen, Support [x] Oppose [ ]
Calendar Year-To-Date Per Election for Office Sought 7133.59

Date of Public Distribution/Dissemination 11/24/2021
Amount 909.84
Transaction ID : SE-S434209
Date of Disbursement or Obligation 11/17/2021
Office Sought: House [ ] Senate [x] District: 00 State: TX
Disbursement For: Primary [x] General [ ] Other (specify) [ ]

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate TILLIS, THOM, R., Sen, Support [x] Oppose [ ]
Calendar Year-To-Date Per Election for Office Sought 7133.56

Date of Public Distribution/Dissemination 11/24/2021
Amount 909.84
Transaction ID : SE-S434211
Date of Disbursement or Obligation 11/17/2021
Office Sought: House [ ] Senate [x] District: 00 State: NC
Disbursement For: Primary [x] General [ ] Other (specify) [ ]

(a) SUBTOTAL of Itemized Independent Expenditures 1819.68
(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.

MASTROIANNI, STEPHANIE, , [Electronically Filed] Date 04/01/2022
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) UNITED WOMEN'S HEALTH ALLIANCE PAC
FEC IDENTIFICATION NUMBER C C00755694
Check if 24-hour report [ ] 48-hour report [x] New report [ ] Amends report filed on 01/01/2015

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate LAWRENCE, BRENDA, LULENAR, Support [x] Oppose [ ]
Calendar Year-To-Date Per Election for Office Sought 7133.56

Date of Public Distribution/Dissemination 11/24/2021
Amount 909.84
Transaction ID : SE-S434213
Date of Disbursement or Obligation 11/17/2021
Office Sought: House [x] Senate [ ] District: 14 State: MI
Disbursement For: Primary [x] General [ ] Other (specify) [ ]

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate LESKO, DEBBIE, Support [x] Oppose [ ]
Calendar Year-To-Date Per Election for Office Sought 7133.56

Date of Public Distribution/Dissemination 11/24/2021
Amount 909.84
Transaction ID : SE-S434215
Date of Disbursement or Obligation 11/17/2021
Office Sought: House [x] Senate [ ] District: 08 State: AZ
Disbursement For: Primary [x] General [ ] Other (specify) [ ]

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 1819.68; (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.
MASTROIANNI, STEPHANIE, Signature [Electronically Filed] Date 04/01/2022

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) UNITED WOMEN'S HEALTH ALLIANCE PAC
FEC IDENTIFICATION NUMBER C C00755694
Check if 24-hour report [ ] 48-hour report [x] New report [ ] Amends report filed on 01/01/2015

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Date of Public Distribution/Dissemination 11/24/2021
Amount 909.84
Transaction ID : SE-S434217
Date of Disbursement or Obligation 11/17/2021
Name of Federal Candidate SHAHEEN, JEANNE, , , Support [x] Oppose [ ]
Office Sought: House [ ] Senate [x] District: 00 State: NH
Calendar Year-To-Date Per Election for Office Sought 7133.58
Disbursement For: Primary [x] General [ ] Other (specify) [ ]

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Date of Public Distribution/Dissemination 11/24/2021
Amount 909.85
Transaction ID : SE-S434219
Date of Disbursement or Obligation 11/17/2021
Name of Federal Candidate BLUNT, ROY, , , Support [x] Oppose [ ]
Office Sought: House [ ] Senate [x] District: 00 State: MO
Calendar Year-To-Date Per Election for Office Sought 7133.61
Disbursement For: Primary [x] General [ ] Other (specify) [ ]

(a) SUBTOTAL of Itemized Independent Expenditures 1819.69
(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.
MASTROIANNI, STEPHANIE, , , [Electronically Filed] Date 04/01/2022
Signature



24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) UNITED WOMEN'S HEALTH ALLIANCE PAC
FEC IDENTIFICATION NUMBER C C00755694
Check if 24-hour report 48-hour report New report Amends report filed on 01/01/2015

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate MURRAY, PATTY, , , Support
Calendar Year-To-Date Per Election for Office Sought 7133.60

Date of Public Distribution/Dissemination 11/24/2021
Amount 909.85
Transaction ID : SE-S434221
Date of Disbursement or Obligation 11/17/2021
Office Sought: House District: 00
President Senate State: WA
Disbursement For: Primary General 2022 Other (specify)

Full Name of Payee LIVE TRANSFERS AND DONOR CREATION LLC
Mailing Address 1607 Ponce de Leon ave Suite GM8
City SAN JUAN State PR Zip Code 00909
Purpose of Expenditure Telephone Fundraising Category/Type 004
Name of Federal Candidate VAN HOLLEN, CHRIS, , , Support
Calendar Year-To-Date Per Election for Office Sought 7133.60

Date of Public Distribution/Dissemination 11/24/2021
Amount 909.85
Transaction ID : SE-S434223
Date of Disbursement or Obligation 11/17/2021
Office Sought: House District: 00
President Senate State: MD
Disbursement For: Primary General 2022 Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 1819.70, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures 72188.45

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.
MASTROIANNI, STEPHANIE, , , [Electronically Filed] Date 04/01/2022
Signature