

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

NAME OF COMMITTEE (In Full) Pro-Choice Majority 2024		FEC IDENTIFICATION NUMBER ▼ C C00864363	
Check if ☒ 24-hour report ☐ 48-hour report		☒ New report ☐ Amends report filed on	

Full Name of Payee 4C Partners, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 10 / 2024	
Non-Contribution Account		Amount 175000.00	
Mailing Address PO Box 25755		Transaction ID : 500071197	
City State Zip Code Alexandria VA 22313-5755		Date of Disbursement or Obligation MM / DD / YYYY 05 / 10 / 2024	
Purpose of Expenditure Radio Advertising Buy & Production		Category/Type	
Name of Federal Candidate ELFRETH, SARAH, KELLY, ,		☒ Support ☐ Oppose	
Office Sought: ☐ President ☐ Senate		District: 03 State: MD	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount	
City State Zip Code		Date of Disbursement or Obligation MM / DD / YYYY	
Purpose of Expenditure		Category/Type	
Name of Federal Candidate		☐ Support ☐ Oppose	
Office Sought: ☐ President ☐ Senate		District: _____ State: _____	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	175000.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	175000.00

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.

Pettersen, Jay, , ,

Signature

Date

MM / DD / YYYY
05 / 10 / 2024