

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 5
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Indivisible Action			FEC IDENTIFICATION NUMBER ▼ C C00678839		
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 Blue State Digital			Date of Public Distribution/Dissemination 10 / 17 / 2024		
Mailing Address 41 Flatbush Ave FI 8			Amount 5000.00		
City Brooklyn		State NY	Zip Code 11217-1160		Transaction ID : 500191981
Purpose of Expenditure Digital Ads (estimate)		Category/ Type		Date of Disbursement or Obligation 10 / 17 / 2024	
Name of Federal Candidate ALLRED, COLIN, , ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: TX
Calendar Year-To-Date Per Election for Office Sought			6276.84 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
Full Name of Payee Blue State Digital			Date of Public Distribution/Dissemination 10 / 17 / 2024		
Mailing Address 41 Flatbush Ave FI 8			Amount 5000.00		
City Brooklyn		State NY	Zip Code 11217-1160		Transaction ID : 500191982
Purpose of Expenditure Digital Ads (estimate)		Category/ Type		Date of Disbursement or Obligation 10 / 17 / 2024	
Name of Federal Candidate TESTER, JON, , ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: ☐ President ☒ Senate State: MT
Calendar Year-To-Date Per Election for Office Sought			5734.24 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			10000.00		
(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 Ramey, Elizabeth, , ,			Date 10 / 18 / 2024		

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NAME OF COMMITTEE (In Full) Indivisible Action		FEC IDENTIFICATION NUMBER ▼ C C00678839	
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 Blue State Digital			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 17 / 2024		
Mailing Address 41 Flatbush Ave FI 8			Amount 5000.00		
City Brooklyn	State NY	Zip Code 11217-1160	Transaction ID : 500191994		
Purpose of Expenditure Digital Ads (estimate)		Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 17 / 2024		
Name of Federal Candidate Harris, Kamala, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought		82408.83	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		

Full Name of Payee Blue State Digital			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 17 / 2024		
Mailing Address 41 Flatbush Ave FI 8			Amount 1000.00		
City Brooklyn	State NY	Zip Code 11217-1160	Transaction ID : 500191995		
Purpose of Expenditure Digital Ads (estimate)		Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 17 / 2024		
Name of Federal Candidate CRUZ, RAFAEL, TED, ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: TX		
Calendar Year-To-Date Per Election for Office Sought		6276.84	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	6000.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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Ramey, Elizabeth, , ,
Signature

Date M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2024

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NAME OF COMMITTEE (In Full) Indivisible Action		FEC IDENTIFICATION NUMBER ▼ C C00678839	
Check if ☒ 24-hour report ☐ 48-hour report		☒ New report ☐ Amends report filed on	

Full Name of Payee Busy Beaver Button Co		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 17 / 2024	
Mailing Address 3407 W Armitage Ave		Amount 1445.00	
City Chicago	State IL	Zip Code 60647-3719	Transaction ID : 500192002
Purpose of Expenditure Buttons (estimate)		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 15 / 2024
Name of Federal Candidate Harris, Kamala, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		82408.83	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee Facebook		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 02 / 2024	
Mailing Address 1 Hacker Way		Amount 600.00	
City Menlo Park	State CA	Zip Code 94025-1456	Transaction ID : 500192003
Purpose of Expenditure Digital Ads (estimate)		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 02 / 2024
Name of Federal Candidate TESTER, JON, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: MT
Calendar Year-To-Date Per Election for Office Sought		5734.24	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	2045.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Ramey, Elizabeth, , ,

Signature

Date

MM / DD / YYYY
10 / 18 / 2024

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NAME OF COMMITTEE (In Full) Indivisible Action			FEC IDENTIFICATION NUMBER ▼ C C00678839	
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 Office Depot			Date of Public Distribution/Dissemination 09 / 07 / 2024	
Mailing Address 10100 N 90Th St			Amount 54.12	
City Scottsdale	State AZ	Zip Code 85258-4403	Transaction ID : 500191996	
Purpose of Expenditure Literature		Category/ Type 	Date of Disbursement or Obligation 09 / 16 / 2024	
Name of Federal Candidate ALLRED, COLIN, ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: TX	
Calendar Year-To-Date Per Election for Office Sought		6276.84	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	
Full Name of Payee The Spoken Hub LLC			Date of Public Distribution/Dissemination 10 / 01 / 2024	
Mailing Address PO Box 615			Amount 222.72	
City Manhasset	State NY	Zip Code 11030-0615	Transaction ID : 500191999	
Purpose of Expenditure Telephone Calls		Category/ Type 	Date of Disbursement or Obligation 10 / 01 / 2024	
Name of Federal Candidate ALLRED, COLIN, ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: TX	
Calendar Year-To-Date Per Election for Office Sought		6276.84	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			276.84	
(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 Ramey, Elizabeth, ,			Date 10 / 18 / 2024	

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NAME OF COMMITTEE (In Full) Indivisible Action			FEC IDENTIFICATION NUMBER ▼ C C00678839		
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 Y Y					
Full Name of Payee The Spoken Hub LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y Y Y 10 / 17 / 2024		
Mailing Address PO Box 615			Amount 34.98		
City Manhasset		State NY	Zip Code 11030-0615		Transaction ID : 500192000
Purpose of Expenditure Telephone Calls		Category/ Type		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y Y Y 10 / 17 / 2024	
Name of Federal Candidate Harris, Kamala, , ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 82408.83			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
Full Name of Payee			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y Y Y		
Mailing Address			Amount 		
City		State	Zip Code		Date of Disbursement or Obligation M M M / D D D / Y Y 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..... ▶			34.98		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶			18356.82		
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 <i>Ramey, Elizabeth, , ,</i> Date M M M / D D D / Y Y Y Y Y Y Y Y 10 / 18 / 2024					