

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

NAME OF COMMITTEE (In Full) Serving CA			FEC IDENTIFICATION NUMBER ▼ C C00940346		
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y					
Full Name of Payee SKDKnickerbocker LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 02 / 2026 M M / D D / Y Y Y Y Y Y		
Mailing Address 285 Fulton Street 69th Floor			Amount 121584.62		
City State Zip Code New York NY 10007		Transaction ID : E-52 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 17 / 2026 M M / D D / Y Y Y Y Y Y			
Purpose of Expenditure Television Ads		Category/ Type 004			
Name of Federal Candidate Marni, Von, Wilpert, ,			☐ Support ☒ Oppose Office Sought: ☒ House District: 48 ☐ President ☐ Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought			257806.81 Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶		
Full Name of Payee SKDKnickerbocker LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 02 / 2026 M M / D D / Y Y Y Y Y Y		
Mailing Address 285 Fulton Street 69th Floor			Amount 6000.00		
City State Zip Code New York NY 10007		Transaction ID : E-56 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 04 / 2026 M M / D D / Y Y Y Y Y Y			
Purpose of Expenditure ESTIMATED: Ad Production		Category/ Type			
Name of Federal Candidate Marni, Von, Wilpert, ,			☐ Support ☒ Oppose Office Sought: ☒ House District: 48 ☐ President ☐ Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought			257806.81 Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			127584.62		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶			127584.62		
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 Coston, Max, , ,			Date M M / D D / Y Y Y Y Y Y 05 / 04 / 2026 M M / D D / Y Y Y Y Y Y		