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

NAME OF COMMITTEE (In Full)
Care in Action PAC

FEC IDENTIFICATION NUMBER ▼
C C00747998

Check if ☒ 24-hour report ☐ 48-hour report ☐ New report ☒ Amends report filed on 10 / 27 / 2024

Full Name of Payee
All Pro Charter Inc

Mailing Address 43666 Saint Helena Ter

City: Ashburn | State: VA | Zip Code: 20147-6962

Purpose of Expenditure
Actual Cost for Travel As Disclosed on 10/27 24-Hr Report

Category/ Type: 002

Date of Public Distribution/Dissemination: 10 / 26 / 2024

Amount: 4727.14

Transaction ID : 500000739

Date of Disbursement or Obligation: 10 / 26 / 2024

Name of Federal Candidate
Harris, Kamala, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House ☒ President ☐ Senate District: _____ State: _____

Calendar Year-To-Date Per Election for Office Sought: 3385428.23

Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____

Full Name of Payee
All Pro Charter Inc

Mailing Address 43666 Saint Helena Ter

City: Ashburn | State: VA | Zip Code: 20147-6962

Purpose of Expenditure
Actual Cost for Travel As Disclosed on 10/27 24-Hr Report

Category/ Type: 002

Date of Public Distribution/Dissemination: 10 / 26 / 2024

Amount: 4727.15

Transaction ID : 500000740

Date of Disbursement or Obligation: 10 / 26 / 2024

Name of Federal Candidate
Rosen, Jackie, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: _____ State: NV

Calendar Year-To-Date Per Election for Office Sought: 104893.36

Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 9454.29

(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.

Mirza, Sobaika, , ,
Signature

Date 12 / 23 / 2024

Image# 202412239739985257

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

NAME OF COMMITTEE (In Full)
Care in Action PAC

FEC IDENTIFICATION NUMBER ▼
C C00747998

Check if ☒ 24-hour report ☐ 48-hour report ☐ New report ☒ Amends report filed on 10 / 27 / 2024

Full Name of Payee
Amazon

Mailing Address 440 Terry Ave N

City: Seattle | State: WA | Zip Code: 98109-5210

Purpose of Expenditure
Actual Cost for Canvassing Supplies As Disclosed on 10/27 24-Hr Report

Category/ Type: 006

Date of Public Distribution/Dissemination: 10 / 26 / 2024

Amount: 1111.83

Transaction ID : 500000753

Date of Disbursement or Obligation: M M / D D / Y Y Y Y

Name of Federal Candidate
Harris, Kamala, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House ☒ President ☐ Senate District: ____ State: ____

Calendar Year-To-Date Per Election for Office Sought: 3385428.23

Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ ____

Full Name of Payee
Amazon

Mailing Address 440 Terry Ave N

City: Seattle | State: WA | Zip Code: 98109-5210

Purpose of Expenditure
Actual Cost for Canvassing Supplies As Disclosed on 10/27 24-Hr Report

Category/ Type: 006

Date of Public Distribution/Dissemination: 10 / 26 / 2024

Amount: 1111.83

Transaction ID : 500000754

Date of Disbursement or Obligation: M M / D D / Y Y Y Y

Name of Federal Candidate
Rosen, Jackie, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: ____ State: NV

Calendar Year-To-Date Per Election for Office Sought: 104893.36

Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ ____

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 2223.66

(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.

Mirza, Sobaika, , ,
Signature

Date 12 / 23 / 2024

Image# 202412239739985258

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

NAME OF COMMITTEE (In Full)
Care in Action PAC

FEC IDENTIFICATION NUMBER ▼
C C00747998

Check if ☒ 24-hour report ☐ 48-hour report ☐ New report ☒ Amends report filed on 10 / 27 / 2024

Full Name of Payee
American Airlines

Mailing Address PO Box 619616

City: Dallas | State: TX | Zip Code: 75261-9616

Purpose of Expenditure
Actual Cost for Travel As Disclosed on 10/27 24-Hr Report

Category/ Type: 002

Date of Public Distribution/Dissemination: 10 / 26 / 2024

Amount: 175.91

Transaction ID : 500000751

Date of Disbursement or Obligation:

Name of Federal Candidate
Harris, Kamala, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House ☐ Senate ☒ President District: ____ State: ____

Calendar Year-To-Date Per Election for Office Sought: 3385428.23

Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ ____

Full Name of Payee
American Airlines

Mailing Address PO Box 619616

City: Dallas | State: TX | Zip Code: 75261-9616

Purpose of Expenditure
Actual Cost for Travel As Disclosed on 10/27 24-Hr Report

Category/ Type: 002

Date of Public Distribution/Dissemination: 10 / 26 / 2024

Amount: 175.92

Transaction ID : 500000752

Date of Disbursement or Obligation:

Name of Federal Candidate
Rosen, Jackie, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: ____ State: NV

Calendar Year-To-Date Per Election for Office Sought: 104893.36

Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ ____

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 351.83

(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.

Mirza, Sobaika, , ,
Signature

Date 12 / 23 / 2024

Image# 202412239739985259

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

NAME OF COMMITTEE (In Full)
Care in Action PAC

FEC IDENTIFICATION NUMBER ▼
C C00747998

Check if ☒ 24-hour report ☐ 48-hour report ☐ New report ☒ Amends report filed on 10 / 27 / 2024

Full Name of Payee
Best Buy

Mailing Address 3820 S Maryland Pkwy
Rm 8

City: Las Vegas | State: NV | Zip Code: 89119-7501

Purpose of Expenditure
Actual Cost for Printing and Supplies As Disclosed on 10/27 24-Hr Report

Category/ Type: 004

Date of Public Distribution/Dissemination: 10 / 26 / 2024

Amount: 114.87

Transaction ID : 500000763

Date of Disbursement or Obligation:

Name of Federal Candidate
Harris, Kamala, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House District: ☒ President ☐ Senate State:

Calendar Year-To-Date Per Election for Office Sought: 3385428.23

Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶

Full Name of Payee
Best Buy

Mailing Address 3820 S Maryland Pkwy
Rm 8

City: Las Vegas | State: NV | Zip Code: 89119-7501

Purpose of Expenditure
Actual Cost for Printing and Supplies As Disclosed on 10/27 24-Hr Report

Category/ Type: 004

Date of Public Distribution/Dissemination: 10 / 26 / 2024

Amount: 114.86

Transaction ID : 500000764

Date of Disbursement or Obligation:

Name of Federal Candidate
Rosen, Jackie, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House District: ☐ President ☒ Senate State: NV

Calendar Year-To-Date Per Election for Office Sought: 104893.36

Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 229.73

(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.

Mirza, Sobaika, , ,
Signature

Date 12 / 23 / 2024

Image# 202412239739985260

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

NAME OF COMMITTEE (In Full)
Care in Action PAC

FEC IDENTIFICATION NUMBER ▼
C C00747998

Check if ☒ 24-hour report ☐ 48-hour report ☐ New report ☒ Amends report filed on 10 / 27 / 2024

Full Name of Payee
Budget Rent-a-Car

Mailing Address 6 Sylvan Way

City: Parsippany | State: NJ | Zip Code: 07054-3826

Purpose of Expenditure
Actual Cost for Travel As Disclosed on 10/27 24-Hr Report

Category/ Type: 002

Date of Public Distribution/Dissemination: 10 / 26 / 2024

Amount: 4250.99

Transaction ID : 500000769

Date of Disbursement or Obligation: M M / D D / Y Y Y Y

Name of Federal Candidate
Harris, Kamala, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House ☒ President ☐ Senate District: ____ State: ____

Calendar Year-To-Date Per Election for Office Sought: 3385428.23

Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ ____

Full Name of Payee
Budget Rent-a-Car

Mailing Address 6 Sylvan Way

City: Parsippany | State: NJ | Zip Code: 07054-3826

Purpose of Expenditure
Actual Cost for Travel As Disclosed on 10/27 24-Hr Report

Category/ Type: 002

Date of Public Distribution/Dissemination: 10 / 26 / 2024

Amount: 4250.99

Transaction ID : 500000770

Date of Disbursement or Obligation: M M / D D / Y Y Y Y

Name of Federal Candidate
Rosen, Jackie, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House ☐ President ☒ Senate State: NV

Calendar Year-To-Date Per Election for Office Sought: 104893.36

Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ ____

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 8501.98

(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.

Mirza, Sobaika, , ,
Signature

Date 12 / 23 / 2024

Image# 202412239739985261

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

NAME OF COMMITTEE (In Full)
Care in Action PAC

FEC IDENTIFICATION NUMBER ▼
C C00747998

Check if [X] 24-hour report [ ] 48-hour report [ ] New report [X] Amends report filed on 10 / 27 / 2024

Full Name of Payee
Care in Action, Inc.

Mailing Address 45 Broadway
Ste 2240

City: New York | State: NY | Zip Code: 10006-3007

Purpose of Expenditure
Estimated Cost for Interpreting Services

Category/ Type: 004

Date of Public Distribution/Dissemination: 10 / 26 / 2024

Amount: 5000.00

Transaction ID : 500000765

Date of Disbursement or Obligation: 10 / 26 / 2024

Name of Federal Candidate
Harris, Kamala, , ,

[X] Support [ ] Oppose

Office Sought: [ ] House District: ____ [X] President [ ] Senate State: ____

Calendar Year-To-Date Per Election for Office Sought: 3385428.23

Disbursement For: [ ] Primary [X] General 2024 [ ] Other (specify) ▶ ____

Full Name of Payee
Care in Action, Inc.

Mailing Address 45 Broadway
Ste 2240

City: New York | State: NY | Zip Code: 10006-3007

Purpose of Expenditure
Estimated Cost for Interpreting Services

Category/ Type: 004

Date of Public Distribution/Dissemination: 10 / 26 / 2024

Amount: 5000.00

Transaction ID : 500000766

Date of Disbursement or Obligation: 10 / 26 / 2024

Name of Federal Candidate
Rosen, Jackie, , ,

[X] Support [ ] Oppose

Office Sought: [ ] House District: ____ [ ] President [X] Senate State: NV

Calendar Year-To-Date Per Election for Office Sought: 104893.36

Disbursement For: [ ] Primary [X] 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.

Mirza, Sobaika, , ,
Signature

Date 12 / 23 / 2024

Image# 202412239739985262

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

NAME OF COMMITTEE (In Full)
Care in Action PAC

FEC IDENTIFICATION NUMBER ▼
C C00747998

Check if ☒ 24-hour report ☐ 48-hour report ☐ New report ☒ Amends report filed on 10 / 27 / 2024

Full Name of Payee
Delta Airlines

Mailing Address 1030 Delta Blvd

City Atlanta | State GA | Zip Code 30354-1989

Purpose of Expenditure
Actual Cost for Travel As Disclosed on 10/27 24-Hr Report

Category/ Type 002

Date of Public Distribution/Dissemination 10 / 26 / 2024

Amount 319.73

Transaction ID : 500000793

Date of Disbursement or Obligation

Name of Federal Candidate
Harris, Kamala, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House ☒ President ☐ Senate District: ____ State: ____

Calendar Year-To-Date Per Election for Office Sought 3385428.23

Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ ____

Full Name of Payee
Delta Airlines

Mailing Address 1030 Delta Blvd

City Atlanta | State GA | Zip Code 30354-1989

Purpose of Expenditure
Actual Cost for Travel As Disclosed on 10/27 24-Hr Report

Category/ Type 002

Date of Public Distribution/Dissemination 10 / 26 / 2024

Amount 319.73

Transaction ID : 500000794

Date of Disbursement or Obligation

Name of Federal Candidate
Rosen, Jackie, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House ☐ President ☒ Senate State: NV

Calendar Year-To-Date Per Election for Office Sought 104893.36

Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ ____

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 639.46

(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.

Mirza, Sobaika, , ,
Signature

Date 12 / 23 / 2024

Image# 202412239739985263

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

NAME OF COMMITTEE (In Full)
Care in Action PAC

FEC IDENTIFICATION NUMBER ▼
C C00747998

Check if [X] 24-hour report [ ] 48-hour report [ ] New report [X] Amends report filed on 10 / 27 / 2024

Full Name of Payee
Fedex

Mailing Address 3731 Battleground Ave

City: Greensboro State: NC Zip Code: 27410-2345

Purpose of Expenditure
Actual Cost for Canvassing Supplies As Disclosed on 10/27 24-Hr Report

Category/ Type: 006

Date of Public Distribution/Dissemination: 10 / 26 / 2024

Amount: 536.54

Transaction ID : 500000771

Date of Disbursement or Obligation: M M / D D / Y Y Y Y

Name of Federal Candidate
Harris, Kamala, , ,

[X] Support [ ] Oppose

Office Sought: [ ] House [ ] Senate [X] President District: ____ State: ____

Calendar Year-To-Date Per Election for Office Sought: 3385428.23

Disbursement For: [ ] Primary [X] General 2024 [ ] Other (specify) ▶ ____

Full Name of Payee
Fedex

Mailing Address 3731 Battleground Ave

City: Greensboro State: NC Zip Code: 27410-2345

Purpose of Expenditure
Actual Cost for Canvassing Supplies As Disclosed on 10/27 24-Hr Report

Category/ Type: 006

Date of Public Distribution/Dissemination: 10 / 26 / 2024

Amount: 536.54

Transaction ID : 500000772

Date of Disbursement or Obligation: M M / D D / Y Y Y Y

Name of Federal Candidate
Rosen, Jackie, , ,

[X] Support [ ] Oppose

Office Sought: [ ] House [ ] President [X] Senate District: ____ State: NV

Calendar Year-To-Date Per Election for Office Sought: 104893.36

Disbursement For: [ ] Primary [X] General 2024 [ ] Other (specify) ▶ ____

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 1073.08

(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.

Mirza, Sobaika, , ,
Signature

Date 12 / 23 / 2024

Image# 202412239739985264

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

NAME OF COMMITTEE (In Full)
Care in Action PAC

FEC IDENTIFICATION NUMBER ▼
C C00747998

Check if ☒ 24-hour report ☐ 48-hour report ☐ New report ☒ Amends report filed on 10 / 27 / 2024

Full Name of Payee
Griffin, Donald, , ,

Mailing Address

City State Zip Code

Purpose of Expenditure
Canvassing and Phone Banking Services

Category/ Type 004

Date of Public Distribution/Dissemination 10 / 26 / 2024

Amount 132.37

Transaction ID : 500000829

Date of Disbursement or Obligation

Name of Federal Candidate
Harris, Kamala, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House ☒ President ☐ Senate District: State:

Calendar Year-To-Date Per Election for Office Sought 3385428.23

Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee
Jackson, Ricquel, , ,

Mailing Address 45 Broadway
Ste 320

City State Zip Code
New York NY 10006-4019

Purpose of Expenditure
Actual Cost for Travel Expenses As Disclosed on 10/27 24-Hr Report

Category/ Type 002

Date of Public Distribution/Dissemination 10 / 26 / 2024

Amount 50.00

Transaction ID : 500000761

Date of Disbursement or Obligation

Name of Federal Candidate
Harris, Kamala, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House ☒ President ☐ Senate District: State:

Calendar Year-To-Date Per Election for Office Sought 3385428.23

Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 182.37

(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.

Mirza, Sobaika, , ,
Signature

Date 12 / 23 / 2024

Image# 202412239739985265

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

NAME OF COMMITTEE (In Full)
Care in Action PAC

FEC IDENTIFICATION NUMBER ▼
C C00747998

Check if ☒ 24-hour report ☐ 48-hour report ☐ New report ☒ Amends report filed on 10 / 27 / 2024

Full Name of Payee
Jackson, Ricquel, , ,

Mailing Address 45 Broadway
Ste 320

City: New York | State: NY | Zip Code: 10006-4019

Purpose of Expenditure
Actual Cost for Travel Expenses As Disclosed on 10/27 24-Hr Report

Category/ Type: 002

Date of Public Distribution/Dissemination: 10 / 26 / 2024

Amount: 50.00

Transaction ID : 500000762

Date of Disbursement or Obligation: / /

Name of Federal Candidate
Rosen, Jackie, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: ____ State: NV

Calendar Year-To-Date Per Election for Office Sought: 104893.36

Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ ____

Full Name of Payee
Lyft

Mailing Address 185 Berry St
Ste 400

City: San Francisco | State: CA | Zip Code: 94107-1725

Purpose of Expenditure
Actual Cost for Travel As Disclosed on 10/27 24-Hr Report

Category/ Type: 002

Date of Public Distribution/Dissemination: 10 / 26 / 2024

Amount: 202.87

Transaction ID : 500000757

Date of Disbursement or Obligation: / /

Name of Federal Candidate
Harris, Kamala, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House ☒ President ☐ Senate District: ____ State: ____

Calendar Year-To-Date Per Election for Office Sought: 3385428.23

Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ ____

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 252.87

(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.

Mirza, Sobaika, , ,
Signature

Date 12 / 23 / 2024

Image# 202412239739985266

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

NAME OF COMMITTEE (In Full)
Care in Action PAC

FEC IDENTIFICATION NUMBER ▼
C C00747998

Check if ☒ 24-hour report ☐ 48-hour report ☐ New report ☒ Amends report filed on 10 / 27 / 2024

Full Name of Payee
Lyft

Mailing Address 185 Berry St
Ste 400

City: San Francisco State: CA Zip Code: 94107-1725

Purpose of Expenditure
Actual Cost for Travel As Disclosed on 10/27 24-Hr Report

Category/ Type: 002

Date of Public Distribution/Dissemination: 10 / 26 / 2024

Amount: 202.87

Transaction ID : 500000758

Date of Disbursement or Obligation:

Name of Federal Candidate
Rosen, Jackie, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House District: ☐ President ☒ Senate State: NV

Calendar Year-To-Date Per Election for Office Sought: 104893.36

Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee
Moton, Shanquita, , ,

Mailing Address

City State Zip Code

Purpose of Expenditure
Canvassing and Phone Banking Services

Category/ Type: 004

Date of Public Distribution/Dissemination: 10 / 26 / 2024

Amount: 242.00

Transaction ID : 500000813

Date of Disbursement or Obligation:

Name of Federal Candidate
Harris, Kamala, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House District: ☒ President ☐ Senate State:

Calendar Year-To-Date Per Election for Office Sought: 3385428.23

Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 444.87

(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.

Mirza, Sobaika, , ,
Signature

Date 12 / 23 / 2024

Image# 202412239739985267

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

NAME OF COMMITTEE (In Full)
Care in Action PAC

FEC IDENTIFICATION NUMBER ▼
C C00747998

Check if ☒ 24-hour report ☐ 48-hour report ☐ New report ☒ Amends report filed on 10 / 27 / 2024

Full Name of Payee
Neza, Sarande, , ,

Mailing Address 6530 Annie Oakley Dr

City: Henderson | State: NV | Zip Code: 89014-2167

Purpose of Expenditure
Actual Cost for Mileage Reimbursement as Disclosed on 10/27 24-Hr Report

Category/ Type: 002

Date of Public Distribution/Dissemination: 10 / 26 / 2024

Amount: 20.00

Transaction ID : 500000759

Date of Disbursement or Obligation: M M / D D / Y Y Y Y

Name of Federal Candidate
Harris, Kamala, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House District: ☒ President ☐ Senate State:

Calendar Year-To-Date Per Election for Office Sought: 3385428.23

Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee
Neza, Sarande, , ,

Mailing Address 6530 Annie Oakley Dr

City: Henderson | State: NV | Zip Code: 89014-2167

Purpose of Expenditure
Actual Cost for Mileage Reimbursement as Disclosed on 10/27 24-Hr Report

Category/ Type: 002

Date of Public Distribution/Dissemination: 10 / 26 / 2024

Amount: 20.00

Transaction ID : 500000760

Date of Disbursement or Obligation: M M / D D / Y Y Y Y

Name of Federal Candidate
Rosen, Jackie, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House District: ☐ President ☒ Senate State: NV

Calendar Year-To-Date Per Election for Office Sought: 104893.36

Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 40.00

(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.

Mirza, Sobaika, , ,
Signature

Date 12 / 23 / 2024

Image# 202412239739985268

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

NAME OF COMMITTEE (In Full)
Care in Action PAC

FEC IDENTIFICATION NUMBER ▼
C C00747998

Check if [X] 24-hour report [ ] 48-hour report [ ] New report [X] Amends report filed on 10 / 27 / 2024

Full Name of Payee
Palms Casino Resort

Mailing Address 4321 W Flamingo Rd

City: Las Vegas | State: NV | Zip Code: 89103-3903

Purpose of Expenditure
Actual Cost for Lodging As Disclosed on 10/27 24-Hr Report

Category/ Type: 002

Date of Public Distribution/Dissemination: 10 / 26 / 2024

Amount: 11379.27

Transaction ID : 500000741

Date of Disbursement or Obligation:

Name of Federal Candidate
Harris, Kamala, , ,

[X] Support [ ] Oppose

Office Sought: [ ] House [X] President [ ] Senate District: ____ State: ____

Calendar Year-To-Date Per Election for Office Sought: 3385428.23

Disbursement For: [ ] Primary [X] General 2026 [ ] Other (specify) ▶ ____

Full Name of Payee
Palms Casino Resort

Mailing Address 4321 W Flamingo Rd

City: Las Vegas | State: NV | Zip Code: 89103-3903

Purpose of Expenditure
Actual Cost for Lodging As Disclosed on 10/27 24-Hr Report

Category/ Type: 002

Date of Public Distribution/Dissemination: 10 / 26 / 2024

Amount: 11379.27

Transaction ID : 500000742

Date of Disbursement or Obligation:

Name of Federal Candidate
Rosen, Jackie, , ,

[X] Support [ ] Oppose

Office Sought: [ ] House [ ] President [X] Senate State: NV

Calendar Year-To-Date Per Election for Office Sought: 104893.36

Disbursement For: [ ] Primary [X] General 2026 [ ] Other (specify) ▶ ____

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 22758.54

(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.

Mirza, Sobaika, , ,
Signature

Date 12 / 23 / 2024

Image# 202412239739985269

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

NAME OF COMMITTEE (In Full)
Care in Action PAC

FEC IDENTIFICATION NUMBER ▼
C C00747998

Check if ☒ 24-hour report ☐ 48-hour report ☐ New report ☒ Amends report filed on 10 / 27 / 2024

Full Name of Payee
Parlin-Watson, Falasha, Lyla, ,

Mailing Address 101 Ayesha Ln

City: Henderson | State: NV | Zip Code: 89074-2420

Purpose of Expenditure
Actual Cost for Voter Outreach As Disclosed on 10/27 24-Hr Report

Category/ Type: 004

Date of Public Distribution/Dissemination: 10 / 26 / 2024

Amount: 500.00

Transaction ID : 500000755

Date of Disbursement or Obligation: M M / D D / Y Y Y Y

Name of Federal Candidate
Harris, Kamala, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House ☐ Senate ☒ President District: ____ State: ____

Calendar Year-To-Date Per Election for Office Sought: 3385428.23

Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶ ____

Full Name of Payee
Parlin-Watson, Falasha, Lyla, ,

Mailing Address 101 Ayesha Ln

City: Henderson | State: NV | Zip Code: 89074-2420

Purpose of Expenditure
Actual Cost for Voter Outreach As Disclosed on 10/27 24-Hr Report

Category/ Type: 004

Date of Public Distribution/Dissemination: 10 / 26 / 2024

Amount: 500.00

Transaction ID : 500000756

Date of Disbursement or Obligation: M M / D D / Y Y Y Y

Name of Federal Candidate
Rosen, Jackie, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: ____ State: NV

Calendar Year-To-Date Per Election for Office Sought: 104893.36

Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶ ____

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 1000.00

(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.

Mirza, Sobaika, , ,
Signature

Date 12 / 23 / 2024

Image# 202412239739985270

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

NAME OF COMMITTEE (In Full)
Care in Action PAC

FEC IDENTIFICATION NUMBER ▼
C C00747998

Check if ☒ 24-hour report ☐ 48-hour report ☐ New report ☒ Amends report filed on 10 / 27 / 2024

Full Name of Payee
Smith's

Mailing Address

City State Zip Code

Purpose of Expenditure
Actual Cost for Canvassing Supplies As Disclosed on 10/27 24-Hr Report

Category/ Type 006

Date of Public Distribution/Dissemination 10 / 26 / 2024

Amount 638.98

Transaction ID : 500000767

Date of Disbursement or Obligation

Name of Federal Candidate
Harris, Kamala, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House ☐ Senate ☒ President District: State:

Calendar Year-To-Date Per Election for Office Sought 3385428.23

Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee
Smith's

Mailing Address

City State Zip Code

Purpose of Expenditure
Actual Cost for Canvassing Supplies As Disclosed on 10/27 24-Hr Report

Category/ Type 006

Date of Public Distribution/Dissemination 10 / 26 / 2024

Amount 638.97

Transaction ID : 500000768

Date of Disbursement or Obligation

Name of Federal Candidate
Rosen, Jackie, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: State: NV

Calendar Year-To-Date Per Election for Office Sought 104893.36

Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 1277.95

(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.

Mirza, Sobaika, , ,
Signature

Date 12 / 23 / 2024

Image# 202412239739985271

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

NAME OF COMMITTEE (In Full)
Care in Action PAC

FEC IDENTIFICATION NUMBER ▼
C C00747998

Check if ☒ 24-hour report ☐ 48-hour report ☐ New report ☒ Amends report filed on 10 / 27 / 2024

Full Name of Payee
Southwest Airlines

Mailing Address PO Box 36647-1CR

City: Dallas | State: TX | Zip Code: 75235

Purpose of Expenditure
Actual Cost for Travel As Disclosed on 10/27 24-Hr Report

Category/ Type: 002

Date of Public Distribution/Dissemination: 10 / 26 / 2024

Amount: 328.99

Transaction ID : 500000745

Date of Disbursement or Obligation:

Name of Federal Candidate
Harris, Kamala, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House ☐ Senate ☒ President District: State:

Calendar Year-To-Date Per Election for Office Sought: 3385428.23

Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee
Southwest Airlines

Mailing Address PO Box 36647-1CR

City: Dallas | State: TX | Zip Code: 75235

Purpose of Expenditure
Actual Cost for Travel As Disclosed on 10/27 24-Hr Report

Category/ Type: 002

Date of Public Distribution/Dissemination: 10 / 26 / 2024

Amount: 328.98

Transaction ID : 500000746

Date of Disbursement or Obligation:

Name of Federal Candidate
Rosen, Jackie, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: State: NV

Calendar Year-To-Date Per Election for Office Sought: 104893.36

Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 657.97

(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.

Mirza, Sobaika, , ,
Signature

Date 12 / 23 / 2024

Image# 202412239739985272

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

NAME OF COMMITTEE (In Full)
Care in Action PAC

FEC IDENTIFICATION NUMBER ▼
C C00747998

Check if [X] 24-hour report [ ] 48-hour report [ ] New report [X] Amends report filed on 10 / 27 / 2024

Full Name of Payee
Spivey, Destinie, , ,

Mailing Address

City State Zip Code

Purpose of Expenditure
Canvassing and Phone Banking Services

Category/ Type 004

Date of Public Distribution/Dissemination
10 / 26 / 2024

Amount
87.58

Transaction ID : 500000819

Date of Disbursement or Obligation

Name of Federal Candidate
Harris, Kamala, , ,

[X] Support [ ] Oppose

Office Sought: [ ] House District: _____
[X] President [ ] Senate State: _____

Calendar Year-To-Date Per Election for Office Sought 3385428.23

Disbursement For: [ ] Primary [X] General 2024
[ ] Other (specify) ▶ _____

Full Name of Payee
Spooner, Maurie, , ,

Mailing Address 45 Broadway
Ste 320

City State Zip Code
New York NY 10006-4019

Purpose of Expenditure
Actual Cost for Voter Outreach As Disclosed on 10/27 24-Hr Report

Category/ Type 001

Date of Public Distribution/Dissemination
10 / 26 / 2024

Amount
250.00

Transaction ID : 500000743

Date of Disbursement or Obligation

Name of Federal Candidate
Harris, Kamala, , ,

[X] Support [ ] Oppose

Office Sought: [ ] House District: _____
[X] President [ ] Senate State: _____

Calendar Year-To-Date Per Election for Office Sought 3385428.23

Disbursement For: [ ] Primary [X] General 2024
[ ] Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 337.58

(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.

Mirza, Sobaika, , ,
Signature

Date 12 / 23 / 2024

Image# 202412239739985273

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

NAME OF COMMITTEE (In Full)
Care in Action PAC

FEC IDENTIFICATION NUMBER ▼
C C00747998

Check if ☒ 24-hour report ☐ 48-hour report ☐ New report ☒ Amends report filed on 10 / 27 / 2024

Full Name of Payee
Spooner, Maurie, , ,

Mailing Address 45 Broadway
Ste 320

City: New York | State: NY | Zip Code: 10006-4019

Purpose of Expenditure
Actual Cost for Voter Outreach As Disclosed on 10/27 24-Hr Report

Category/ Type: 001

Date of Public Distribution/Dissemination: 10 / 26 / 2024

Amount: 250.00

Transaction ID : 500000744

Date of Disbursement or Obligation: M M / D D / Y Y Y Y

Name of Federal Candidate
Rosen, Jackie, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: ____ State: NV

Calendar Year-To-Date Per Election for Office Sought: 104893.36

Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ ____

Full Name of Payee
Viturro, Mariana, , ,

Mailing Address 30 Cohasset Dr

City: Rochester | State: NY | Zip Code: 14618-2802

Purpose of Expenditure
Actual Cost for Travel Stipend As Disclosed on 10/27 Report

Category/ Type: 002

Date of Public Distribution/Dissemination: 10 / 26 / 2024

Amount: 292.20

Transaction ID : 500000747

Date of Disbursement or Obligation: M M / D D / Y Y Y Y

Name of Federal Candidate
Harris, Kamala, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House ☒ President ☐ Senate District: ____ State: ____

Calendar Year-To-Date Per Election for Office Sought: 3385428.23

Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ ____

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 542.20

(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.

Mirza, Sobaika, , ,
Signature

Date 12 / 23 / 2024

Image# 202412239739985274

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

NAME OF COMMITTEE (In Full)
Care in Action PAC

FEC IDENTIFICATION NUMBER ▼
C C00747998

Check if ☒ 24-hour report ☐ 48-hour report ☐ New report ☒ Amends report filed on 10 / 27 / 2024

Full Name of Payee
Viturro, Mariana, , ,

Mailing Address 30 Cohasset Dr

City: Rochester | State: NY | Zip Code: 14618-2802

Purpose of Expenditure
Actual Cost for Travel Stipend As Disclosed on 10/27 Report

Category/ Type: 002

Date of Public Distribution/Dissemination: 10 / 26 / 2024

Amount: 292.20

Transaction ID : 500000748

Date of Disbursement or Obligation:

Name of Federal Candidate
Rosen, Jackie, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: State: NV

Calendar Year-To-Date Per Election for Office Sought: 104893.36

Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee

Mailing Address

City | State | Zip Code

Purpose of Expenditure

Category/ Type

Date of Public Distribution/Dissemination:

Amount

Date of Disbursement or Obligation:

Name of Federal Candidate

☐ Support ☐ Oppose

Office Sought: ☐ House ☐ 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 ▶ 292.20

(b) SUBTOTAL of Unitemized Independent Expenditures ▶

(c) TOTAL Independent Expenditures ▶ 60260.58

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.

Mirza, Sobaika, , ,
Signature

Date 12 / 23 / 2024