

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

NAME OF COMMITTEE (In Full) 48Th Accountability Project			FEC IDENTIFICATION NUMBER ▼ C C00942169		
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 M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y					
Full Name of Payee Scale To Win			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 05 / 13 / 2026 M M M / D D D / Y Y Y Y Y Y		
Mailing Address 455 Market St Ste 1940			Amount 700.00		
City State Zip Code San Francisco CA 94105-2448		Transaction ID : 500006698 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 05 / 13 / 2026 M M M / D D D / Y Y Y Y Y Y			
Purpose of Expenditure Text Messaging Program (Estimate)		Category/ Type		Name of Federal Candidate DESMOND, JIM, , , ☐ Support ☒ Oppose	
Office Sought: ☒ House District: 48 ☐ President ☐ Senate State: CA		Calendar Year-To-Date Per Election for Office Sought 232742.20			
Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶		Full Name of Payee 			
Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y M M M / D D D / 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 M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y		Purpose of Expenditure 			
Category/ Type		Name of Federal Candidate 			
Office Sought: ☐ House District: ☐ President ☐ Senate State: ☐ Other (specify) ▶		Calendar Year-To-Date Per Election for Office Sought			
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶		(a) SUBTOTAL of Itemized Independent Expenditures..... ▶ 700.00			
(b) SUBTOTAL of Unitemized Independent Expenditures ▶		(c) TOTAL Independent Expenditures..... ▶ 700.00			
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. Signature <i>Fuhrman, Jon, , ,</i> Date M M M / D D D / Y Y Y Y Y Y 05 / 21 / 2026 M M M / D D D / Y Y Y Y Y Y					