

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 3
FOR SE OF FORM 24/48

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
		M M M / D D D / Y Y Y Y Y Y 11 / 03 / 2024	

Full Name of Payee All Pro Charter Inc		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2024	
Mailing Address 43666 Saint Helena Ter		Amount 2115.00	
City Ashburn	State VA	Zip Code 20147-6962	Transaction ID : 500000778
Purpose of Expenditure Actual Cost for Transportation Services As Disclosed on 11/3 24-Hr Report		Category/ Type 002	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 02 / 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		3508461.36	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____

Full Name of Payee Budget Rent-a-Car		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2024	
Mailing Address 6 Sylvan Way		Amount 2834.95	
City Parsippany	State NJ	Zip Code 07054-3826	Transaction ID : 500000779
Purpose of Expenditure Actual Cost for Travel As Disclosed on 11/3 24-Hr Report		Category/ Type 002	Date of Disbursement or Obligation M M M / D D D / Y Y 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		3508461.36	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	4949.95
(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

M M M / D D D / Y Y Y Y Y Y
12 / 24 / 2024

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 2 OF 3
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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		MM / DD / YYYY 11 / 03 / 2024	

Full Name of Payee Fedex		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 02 / 2024	
Mailing Address 3731 Battleground Ave		Amount 536.55	
City Greensboro	State NC	Zip Code 27410-2345	Transaction ID : 500000780
Purpose of Expenditure Actual Cost for Copies As Disclosed on 11/3 24-Hr Report		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Harris, Kamala, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	
		3508461.36	

Full Name of Payee GiftCards.com		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 02 / 2024	
Mailing Address 6220 Stoneridge Mall Rd		Amount 55.95	
City Pleasanton	State CA	Zip Code 94588-3260	Transaction ID : 500000781
Purpose of Expenditure Actual Cost for Gift Cards As Disclosed on 11/3 24-Hr Report		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 11 / 02 / 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		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	
		3508461.36	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	592.50
(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

MM / DD / YYYY
12 / 24 / 2024

