

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

NAME OF COMMITTEE (In Full) Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼ C C00489799		
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 Planned Parenthood Action Fund, Inc.			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 05 / 2026 M M / D D / Y Y Y Y Y Y		
Mailing Address 123 William St			Amount 103.35 M M / D D / Y Y Y Y Y Y		
City State Zip Code New York NY 10038-3804		Transaction ID : 500761466 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 07 / 05 / 2026 M M / D D / Y Y Y Y Y Y			
Purpose of Expenditure Estimated Cost for Staff Time for Voter Communications		Category/ Type 004			
Name of Federal Candidate O'Donnell, Marty, , ,			☐ Support ☒ Oppose		Office Sought: ☒ House District: 03 ☐ President ☐ Senate State: NV
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶		
Full Name of Payee Planned Parenthood Action Fund, Inc.			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 19 / 2026 M M / D D / Y Y Y Y Y Y		
Mailing Address 123 William St			Amount 174.23 M M / D D / Y Y Y Y Y Y		
City State Zip Code New York NY 10038-3804		Transaction ID : 500761467 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 07 / 19 / 2026 M M / D D / Y Y Y Y Y Y			
Purpose of Expenditure Estimated Cost for Staff Time for Voter Communications		Category/ Type 004			
Name of Federal Candidate O'Donnell, Marty, , ,			☐ Support ☒ Oppose		Office Sought: ☒ House District: 03 ☐ President ☐ Senate State: NV
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			277.58 M M / D D / Y Y Y Y Y Y		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			M M / D D / Y Y Y Y Y Y		
(c) TOTAL Independent Expenditures..... ▶			M M / D D / Y Y Y Y Y Y		
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 Louie, Maggie, , ,			Date M M / D D / Y Y Y Y Y Y 08 / 14 / 2026 M M / D D / Y Y Y Y Y Y		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 2 OF 3
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NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if ☐ 24-hour report ☒ 48-hour report		☒ New report ☐ Amends report filed on	

Full Name of Payee Planned Parenthood Action Fund, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 02 / 2026	
Mailing Address 123 William St		Amount 103.35	
City New York	State NY	Zip Code 10038-3804	Transaction ID : 500761468
Purpose of Expenditure Estimated Cost for Staff Time for Voter Communications		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 08 / 02 / 2026
Name of Federal Candidate O'Donnell, Marty, ,		☐ Support ☒ Oppose	Office Sought: ☒ House District: 03 ☐ President ☐ Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶	

Full Name of Payee The Outreach Team, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 12 / 2026	
Mailing Address 407 College Ave Ste 349		Amount 12500.00	
City Ithaca	State NY	Zip Code 14850-6701	Transaction ID : 500761463
Purpose of Expenditure Estimated Cost of Canvassing Services		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate O'Donnell, Marty, ,		☐ Support ☒ Oppose	Office Sought: ☒ House District: 03 ☐ President ☐ Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	12603.35
(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.

Louie, Maggie, ,
Signature

Date MM / DD / YYYY
08 / 14 / 2026

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 3 OF 3
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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 The Outreach Team, LLC		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 12 / 2026	
Mailing Address 407 College Ave Ste 349		Amount 12500.00	
City Ithaca	State NY	Zip Code 14850-6701	Transaction ID : 500761465
Purpose of Expenditure Estimated Cost of Canvassing Services		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Name of Federal Candidate Lee, Susie, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 03 ☐ President ☐ Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		25380.93	Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶

Full Name of Payee		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation M M / D D / 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.....▶	12500.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	25380.93

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Louie, Maggie, , ,

Signature

Date

M M / D D / Y Y Y Y Y Y
08 / 14 / 2026