

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

NAME OF COMMITTEE (In Full) CALIFORNIA BLUE PAC		FEC IDENTIFICATION NUMBER ▼ C C00948216
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee FOUR PONIES CONSULTING LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 29 / 2026
Mailing Address 4016 SOUTH THIRD ST 1132		Amount 6325.00
City JACKSONVILLE BEACH	State FL	Zip Code 32250
Purpose of Expenditure P2P MMS MESSAGING	Category/ Type	Transaction ID : SE24.32201 Date of Disbursement or Obligation MM / DD / YYYY 05 / 29 / 2026
Name of Federal Candidate VARET, ESTHER, KIM, ,	☒ Support ☐ Oppose	Office Sought: ☒ House District: 40 ☐ President ☐ Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 701515.31		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address		Amount
City	State	Zip Code
Purpose of Expenditure	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY
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..... ▶	6325.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	6325.00

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.

PRIM, PAUL, , ,

Signature

Date

MM / DD / YYYY
06 / 01 / 2026