

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

NAME OF COMMITTEE (In Full) The Equity Alliance Fund Action PAC		FEC IDENTIFICATION NUMBER ▼ C C00827618
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee Direct Fx		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 12 / 2025
Mailing Address 8811 Hwy 51 N		Amount 17875.00
City Southhaven	State MS	Zip Code 38671
Purpose of Expenditure Direct Mail	Category/ Type	Transaction ID : SE.4206 Date of Disbursement or Obligation MM / DD / YYYY 10 / 12 / 2025
Name of Federal Candidate Behn, Aftyn, , ,		Office Sought: ☒ House District: 07 ☐ President ☐ Senate State: TN
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☐ General 2025 ☒ Other (specify) ▶ Special-General

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		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..... ▶	17875.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	17875.00

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.

Jones, Dustin, Benjamin, Mr.,

Signature

Date

MM / DD / YYYY
11 / 14 / 2025