

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 1 OF 5  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Rebellion PAC</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00727008	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY	

Full Name of Payee <b>Bondy, Jon, Karsten, ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>07 / 24 / 2021</b>	
Mailing Address <b>3763 Painted Pony Rd</b>		Amount <b>750.00</b>	
City <b>El Sobrante</b>	State <b>CA</b>	Zip Code <b>94803-2113</b>	<b>Transaction ID : 500009520</b>
Purpose of Expenditure <b>Video Production - Kitchen Table</b>		Category/ Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>07 / 23 / 2021</b>
Name of Federal Candidate <b>TURNER, NINA, , ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: <b>11</b> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>OH</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special</b>	

Full Name of Payee <b>Bondy, Jon, Karsten, ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>07 / 24 / 2021</b>	
Mailing Address <b>3763 Painted Pony Rd</b>		Amount <b>750.00</b>	
City <b>El Sobrante</b>	State <b>CA</b>	Zip Code <b>94803-2113</b>	<b>Transaction ID : 500009521</b>
Purpose of Expenditure <b>Video Production - Cleveland in Crisis</b>		Category/ Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>07 / 23 / 2021</b>
Name of Federal Candidate <b>TURNER, NINA, , ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: <b>11</b> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>OH</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special</b>	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>1500.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> 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.

Uygur, Cenk, , ,

[Electronically Filed]

Date

MM / DD / YYYY  
**07 / 25 / 2021**

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 2 OF 5  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Rebellion PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00727008
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Russo, August, James, ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>07 / 24 / 2021</b>
Mailing Address <b>196 Hall St</b>		Amount <b>1875.00</b>
City <b>Brooklyn</b>	State <b>NY</b>	Zip Code <b>11205-5001</b>
Purpose of Expenditure <b>Video Production - Kitchen Table</b>	Category/Type <b>004</b>	Transaction ID : <b>500009515</b> Date of Disbursement or Obligation MM / DD / YYYY <b>07 / 16 / 2021</b>
Name of Federal Candidate <b>TURNER, NINA, , ,</b>		Office Sought: <input checked="" type="checkbox"/> House    District: <b>11</b> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>OH</b>
Calendar Year-To-Date Per Election for Office Sought <b>27062.60</b>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special</b>

Full Name of Payee <b>Russo, August, James, ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>07 / 24 / 2021</b>
Mailing Address <b>196 Hall St</b>		Amount <b>1500.00</b>
City <b>Brooklyn</b>	State <b>NY</b>	Zip Code <b>11205-5001</b>
Purpose of Expenditure <b>Video Production - Cleveland in Crisis</b>	Category/Type <b>004</b>	Transaction ID : <b>500009516</b> Date of Disbursement or Obligation MM / DD / YYYY <b>07 / 16 / 2021</b>
Name of Federal Candidate <b>TURNER, NINA, , ,</b>		Office Sought: <input checked="" type="checkbox"/> House    District: <b>11</b> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>OH</b>
Calendar Year-To-Date Per Election for Office Sought <b>27062.60</b>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special</b>

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<b>3375.00</b>
(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.

Uygur, Cenk, , ,

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Date

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**07 / 25 / 2021**

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 3 OF 5  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Rebellion PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00727008
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Wu, Brianna, , ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>07 / 24 / 2021</b>
Mailing Address <b>247 Needham St</b>		Amount <b>1093.80</b>
City <b>Dedham</b>	State <b>MA</b>	Zip Code <b>02026-7018</b>
Purpose of Expenditure <b>Video Producer - Kitchen Table</b>	Category/Type	Transaction ID : <b>500009523</b> Date of Disbursement or Obligation MM / DD / YYYY <b>07 / 14 / 2021</b>
Name of Federal Candidate <b>TURNER, NINA, , ,</b>	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: <b>11</b> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>OH</b>
Calendar Year-To-Date Per Election for Office Sought <b>27062.60</b>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special</b>

Full Name of Payee <b>Wu, Brianna, , ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>07 / 24 / 2021</b>
Mailing Address <b>247 Needham St</b>		Amount <b>1093.80</b>
City <b>Dedham</b>	State <b>MA</b>	Zip Code <b>02026-7018</b>
Purpose of Expenditure <b>Video Producer - Cleveland in Crisis</b>	Category/Type	Transaction ID : <b>500009524</b> Date of Disbursement or Obligation MM / DD / YYYY <b>07 / 14 / 2021</b>
Name of Federal Candidate <b>TURNER, NINA, , ,</b>	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: <b>11</b> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>OH</b>
Calendar Year-To-Date Per Election for Office Sought <b>27062.60</b>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special</b>

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<b>2187.60</b>
(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.

Uygur, Cenk, , ,

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**07 / 25 / 2021**

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 4 OF 5  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Rebellion PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00727008
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Zeta Global Corp.</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>07 / 24 / 2021</b>
Mailing Address <b>3 Park Ave</b> <b>FI 33</b>		Amount <b>6666.67</b>
City <b>New York</b>	State <b>NY</b>	Zip Code <b>10016-5931</b>
Purpose of Expenditure <b>Facebook internet advertising - Kitchen Table</b>	Category/Type <b>004</b>	Transaction ID : <b>500009525</b> Date of Disbursement or Obligation MM / DD / YYYY <b>07 / 12 / 2021</b>
Name of Federal Candidate <b>TURNER, NINA, , ,</b>		Office Sought: <input checked="" type="checkbox"/> House    District: <b>11</b> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>OH</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special</b>

Full Name of Payee <b>Zeta Global Corp.</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>07 / 24 / 2021</b>
Mailing Address <b>3 Park Ave</b> <b>FI 33</b>		Amount <b>3333.33</b>
City <b>New York</b>	State <b>NY</b>	Zip Code <b>10016-5931</b>
Purpose of Expenditure <b>Facebook internet advertising - Cleveland in Crisis</b>	Category/Type <b>004</b>	Transaction ID : <b>500009526</b> Date of Disbursement or Obligation MM / DD / YYYY <b>07 / 12 / 2021</b>
Name of Federal Candidate <b>TURNER, NINA, , ,</b>		Office Sought: <input checked="" type="checkbox"/> House    District: <b>11</b> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>OH</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special</b>

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>10000.00</b>
(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.

Uygur, Cenk, , ,

[Electronically Filed]

Date

MM / DD / YYYY  
**07 / 25 / 2021**

Signature

NAME OF COMMITTEE (In Full) <b>Rebellion PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 10px;">C</span> <span>C00727008</span> </div>
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Check if ☒ 24-hour report    ☐ 48-hour report    ➤
☒ New report    ☐ Amends report filed on MM / MM / YYYY

Full Name of Payee <b>Zeta Global Corp.</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 24 / 2021	
Mailing Address 3 Park Ave FI 33		Amount 10000.00	
City New York	State NY	Zip Code 10016-5931	Transaction ID : 500009527
Purpose of Expenditure Facebook internet advertising - Cleveland in Crisis		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 07 / 21 / 2021
Name of Federal Candidate TURNER, NINA, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 11 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 27062.60		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ Special	

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount \$ _____	
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure	Category/ Type		
Name of Federal Candidate	<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> President <input type="checkbox"/> Senate	District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought	_____	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ► _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	10000.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures.....	27062.60

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.

*[Electronically Filed]*

Signature

Date \_\_\_\_\_

MM / DD / YYYY