

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

NAME OF COMMITTEE (In Full) American Federation of State County & Municipal Employees PEOPLE			FEC IDENTIFICATION NUMBER ▼ C C00011114	
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on			MM / DD / YYYY	
Full Name of Payee Moxie Media		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 23 / 2024		
Mailing Address P.O. Box 30084		Amount 20486.02		
City Seattle	State WA	Zip Code 98113-2084	Transaction ID : 500031410	
Purpose of Expenditure 2024 IE Mail Piece Production and Shipping Costs for CO House Race. ESTIMATE		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 18 / 2024	
Name of Federal Candidate Caraveo, Yadira, ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 08 ☐ President ☐ Senate State: CO	
Calendar Year-To-Date Per Election for Office Sought		180476.18	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	Date of Disbursement or Obligation MM / DD / YYYY	
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.....		20486.02		
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures.....		20486.02		
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 McBride, Elissa, , ,		Date MM / DD / YYYY 10 / 23 / 2024		