

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

NAME OF COMMITTEE (In Full) New American Jobs Fund			FEC IDENTIFICATION NUMBER ▼ C C00625533		
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 Movement Labs, LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2024 M M / D D / Y Y Y Y Y Y		
Mailing Address 2323 Broadway			Amount 13165.00		
City Oakland		State CA	Zip Code 94612-2414		Transaction ID : 500458718
Purpose of Expenditure Texting Services		Category/ Type		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 08 / 2024 M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate BROWN, SHERROD, , ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: OH
Calendar Year-To-Date Per Election for Office Sought			1364495.40 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
Full Name of Payee Movement Labs, LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2024 M M / D D / Y Y Y Y Y Y		
Mailing Address 2323 Broadway			Amount 13165.00		
City Oakland		State CA	Zip Code 94612-2414		Transaction ID : 500459239
Purpose of Expenditure Texting Services		Category/ Type		Date of Disbursement or Obligation 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	
Name of Federal Candidate BROWN, SHERROD, , ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: OH
Calendar Year-To-Date Per Election for Office Sought			1364495.40 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			26330.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶			26330.00		
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.					
Signature Sonekan, Titi, , ,			Date M M / D D / Y Y Y Y Y Y 10 / 10 / 2024 M M / D D / Y Y Y Y Y Y		