24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
A BETTER WISCONSIN TOGETHER ACTION	C C00880765
Check if 24-hour report X 48-hour report New report Amends report filed	d on M = M / D = D / Y = Y = Y
Full Name of Payee Meta	Date of Public Distribution/Dissemination
Mailing Address 1 Hacker Way	07 26 2024 Amount
City State Zip Code Menlo Park CA 94025	25000.00 Transaction ID : SE.4183 Date of Disbursement or Obligation
Purpose of Expenditure Digital advertising Category/ Type 004	07
Name of Federal Candidate Support Office	ee Sought: House District:
Harris, Kamala, , ,	President Senate State:
Calendar Year-To-Date Per Election for Office Sought Disb 2024	oursement For: Primary
Full Name of Payee	Date of Public Distribution/Dissemination
Mailing Address	Amount
City State Zip Code	
Purpose of Expenditure Category/ Type	Date of Disbursement or Obligation
Name of Federal Candidate Support Oppose	ce Sought: House District:
	oursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	25000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	25000.00
Under penalty of perjury I certify that the independent expenditures reported herein were not me with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Cone, Amanda, , , Signature	07