

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 19
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) BlackPAC			FEC IDENTIFICATION NUMBER ▼ C C00609388		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee AL Media LLC			Date of Public Distribution/Dissemination 10 / 29 / 2024		
Mailing Address 222 W Ontario St Ste 600			Amount 148750.00		
City Chicago		State IL	Zip Code 60654-3655		Transaction ID : 500690511
Purpose of Expenditure Digital Advertising & Production - Estimate			Category/ Type		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Name of Federal Candidate Harris, Kamala, , ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought			20201055.87 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
Full Name of Payee AL Media LLC			Date of Public Distribution/Dissemination 10 / 29 / 2024		
Mailing Address 222 W Ontario St Ste 600			Amount 148750.00		
City Chicago		State IL	Zip Code 60654-3655		Transaction ID : 500690512
Purpose of Expenditure Digital Advertising & Production - Estimate			Category/ Type		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Name of Federal Candidate Alsobrooks, Angela, , ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: MD
Calendar Year-To-Date Per Election for Office Sought			870755.38 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			297500.00		
(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.					
Signature Shropshire, Adrienne, R., ,			Date 10 / 30 / 2024		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 2 OF 19
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) BlackPAC		FEC IDENTIFICATION NUMBER ▼ C C00609388
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee AL Media LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 222 W Ontario St Ste 600		Amount 50000.00
City Chicago	State IL	Zip Code 60654-3655
Purpose of Expenditure Digital Advertising - Estimate	Category/ Type	Transaction ID : 500690551 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Harris, Kamala, , , ☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 20201055.87		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee AL Media LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 222 W Ontario St Ste 600		Amount 50000.00
City Chicago	State IL	Zip Code 60654-3655
Purpose of Expenditure Digital Advertising - Estimate	Category/ Type	Transaction ID : 500690552 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Alsobrooks, Angela, , , ☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: MD
Calendar Year-To-Date Per Election for Office Sought 870755.38		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	100000.00
(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.

Shropshire, Adrienne, R., ,

Signature

Date

MM / DD / YYYY
10 / 30 / 2024

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

PAGE 3 OF 19

FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) BlackPAC		FEC IDENTIFICATION NUMBER ▼ C C00609388
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee C Plus K LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 1640 Rhode Island Ave NW Ste 600		Amount 100000.00
City Washington	State DC	Zip Code 20036-3229
Purpose of Expenditure Digital Advertising - Estimate	Category/ Type	Transaction ID : 500690562 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Brown, Sherrod, , ,		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee Ground Game Innovation, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 1922 S Martin Luther King Jr Dr # 228		Amount 250000.00
City Winston Salem	State NC	Zip Code 27107-1361
Purpose of Expenditure Canvassing - Estimate	Category/ Type	Transaction ID : 500690529 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Harris, Kamala, , ,		Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	350000.00
(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.

Shropshire, Adrianne, R., ,

Signature

Date

MM / DD / YYYY
10 / 30 / 2024

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

PAGE 4 OF 19

FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) BlackPAC		FEC IDENTIFICATION NUMBER ▼ C C00609388	
Check if ☒ 24-hour report ☐ 48-hour report		☒ New report ☐ Amends report filed on	

Full Name of Payee OTG Strategies			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024		
Mailing Address 8651 Highway N, Ste 214			Amount 525000.00		
City Lake St. Louis	State MO	Zip Code 63367	Transaction ID : 500690513		
Purpose of Expenditure Canvassing - Estimate		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Harris, Kamala, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought		20201055.87	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		

Full Name of Payee OTG Strategies			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024		
Mailing Address 8651 Highway N, Ste 214			Amount 525000.00		
City Lake St. Louis	State MO	Zip Code 63367	Transaction ID : 500690514		
Purpose of Expenditure Canvassing - Estimate		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Slotkin, Elissa, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought		2444875.00	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1050000.00
(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.

Shropshire, Adrienne, R., ,

Signature

Date

MM / DD / YYYY
10 / 30 / 2024

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

PAGE 5 OF 19

FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) BlackPAC		FEC IDENTIFICATION NUMBER ▼ C C00609388
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee OTG Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 8651 Highway N, Ste 214		Amount 425000.00
City Lake St. Louis	State MO	Zip Code 63367
Purpose of Expenditure Canvassing - Estimate	Category/ Type	Transaction ID : 500690515 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Harris, Kamala, , , ☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 20201055.87		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee OTG Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 8651 Highway N, Ste 214		Amount 425000.00
City Lake St. Louis	State MO	Zip Code 63367
Purpose of Expenditure Canvassing - Estimate	Category/ Type	Transaction ID : 500690516 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Brown, Sherrod, , , ☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 2224859.79		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	850000.00
(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.

Shropshire, Adrienne, R., ,

Signature

Date

MM / DD / YYYY
10 / 30 / 2024

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 6 OF 19
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) BlackPAC		FEC IDENTIFICATION NUMBER ▼ C C00609388
Check if ☒ 24-hour report ☐ 48-hour report		☒ New report ☐ Amends report filed on

Full Name of Payee OTG Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 8651 Highway N, Ste 214		Amount 175000.00
City Lake St. Louis	State MO	Zip Code 63367
Purpose of Expenditure Canvassing - Estimate	Category/ Type	Transaction ID : 500690518 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Harris, Kamala, , , ☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 20201055.87		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee OTG Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 8651 Highway N, Ste 214		Amount 175000.00
City Lake St. Louis	State MO	Zip Code 63367
Purpose of Expenditure Canvassing - Estimate	Category/ Type	Transaction ID : 500690519 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Slotkin, Elissa, , , ☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: MI
Calendar Year-To-Date Per Election for Office Sought 2444875.00		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	350000.00
(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.

Shropshire, Adrienne, R., ,

Signature

Date

MM / DD / YYYY
10 / 30 / 2024

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

PAGE 7 OF 19

FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) BlackPAC		FEC IDENTIFICATION NUMBER ▼ C C00609388
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee OTG Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 8651 Highway N, Ste 214		Amount 175000.00
City Lake St. Louis	State MO	Zip Code 63367
Purpose of Expenditure Canvassing - Estimate	Category/ Type	Transaction ID : 500690520 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Harris, Kamala, , ,		Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee OTG Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 8651 Highway N, Ste 214		Amount 175000.00
City Lake St. Louis	State MO	Zip Code 63367
Purpose of Expenditure Canvassing - Estimate	Category/ Type	Transaction ID : 500690521 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Casey, Robert, P., , Jr.		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: PA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	350000.00
(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.

Shropshire, Adrienne, R., ,

Signature

Date

MM / DD / YYYY
10 / 30 / 2024

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 8 OF 19
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) BlackPAC		FEC IDENTIFICATION NUMBER ▼ C C00609388
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee OTG Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 8651 Highway N, Ste 214		Amount 127500.00
City Lake St. Louis	State MO	Zip Code 63367
Purpose of Expenditure Canvassing - Estimate	Category/ Type	Transaction ID : 500690522 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Harris, Kamala, , , ☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 20201055.87		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee OTG Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 8651 Highway N, Ste 214		Amount 127500.00
City Lake St. Louis	State MO	Zip Code 63367
Purpose of Expenditure Canvassing - Estimate	Category/ Type	Transaction ID : 500690523 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Brown, Sherrod, , , ☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 2224859.79		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	255000.00
(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.

Shropshire, Adrienne, R., ,

Signature

Date

MM / DD / YYYY
10 / 30 / 2024

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 9 OF 19
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) BlackPAC		FEC IDENTIFICATION NUMBER ▼ C C00609388
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee OTG Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 8651 Highway N, Ste 214		Amount 138000.00
City Lake St. Louis	State MO	Zip Code 63367
Purpose of Expenditure Canvassing - Estimate	Category/ Type	Transaction ID : 500690524 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Harris, Kamala, , ,		☒ Support Office Sought: ☐ House District: _____ ☐ Oppose ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee OTG Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 8651 Highway N, Ste 214		Amount 138000.00
City Lake St. Louis	State MO	Zip Code 63367
Purpose of Expenditure Canvassing - Estimate	Category/ Type	Transaction ID : 500690525 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Slotkin, Elissa, , ,		☒ Support Office Sought: ☐ House District: _____ ☐ Oppose ☐ President ☒ Senate State: MI
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	276000.00
(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.

Shropshire, Adrienne, R., ,
Signature

Date MM / DD / YYYY
10 / 30 / 2024

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 10 OF 19
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) BlackPAC		FEC IDENTIFICATION NUMBER ▼ C C00609388
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee OTG Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 8651 Highway N, Ste 214		Amount 460000.00
City Lake St. Louis	State MO	Zip Code 63367
Purpose of Expenditure Canvassing - Estimate	Category/ Type	Transaction ID : 500690526 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Harris, Kamala, , , ☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 20201055.87		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee OTG Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 8651 Highway N, Ste 214		Amount 460000.00
City Lake St. Louis	State MO	Zip Code 63367
Purpose of Expenditure Canvassing - Estimate	Category/ Type	Transaction ID : 500690527 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Casey, Robert, P., , Jr. ☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 2262719.56		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	920000.00
(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.

Shropshire, Adrienne, R., ,

Signature

Date

MM / DD / YYYY
10 / 30 / 2024

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 11 OF 19
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) BlackPAC		FEC IDENTIFICATION NUMBER ▼ C C00609388
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee OTG Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 8651 Highway N, Ste 214		Amount 1500000.00
City Lake St. Louis	State MO	Zip Code 63367
Purpose of Expenditure Canvassing - Estimate	Category/ Type	Transaction ID : 500690528 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Harris, Kamala, , ,		Office Sought: ☒ Support ☐ Oppose ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee Technicolor Political		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 1805 W Monterey Ave Unit 43043		Amount 64172.00
City Chicago	State IL	Zip Code 60643-4232
Purpose of Expenditure Media Buy - Estimate	Category/ Type	Transaction ID : 500690385 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Brown, Sherrod, , ,		Office Sought: ☒ Support ☐ Oppose ☐ President ☒ Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1564172.00
(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.

Shropshire, Adrienne, R., ,

Signature

Date

MM / DD / YYYY
10 / 30 / 2024

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 12 OF 19
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) BlackPAC		FEC IDENTIFICATION NUMBER ▼ C C00609388	
Check if ☒ 24-hour report ☐ 48-hour report		☒ New report ☐ Amends report filed on	

Full Name of Payee Technicolor Political			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024		
Mailing Address 1805 W Monterey Ave Unit 43043			Amount 84510.50		
City Chicago	State IL	Zip Code 60643-4232	Transaction ID : 500690386		
Purpose of Expenditure Media Buy - Estimate		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Harris, Kamala, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought		20201055.87	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		

Full Name of Payee Technicolor Political			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024		
Mailing Address 1805 W Monterey Ave Unit 43043			Amount 84510.50		
City Chicago	State IL	Zip Code 60643-4232	Transaction ID : 500690387		
Purpose of Expenditure Media Buy - Estimate		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Alsobrooks, Angela, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: MD		
Calendar Year-To-Date Per Election for Office Sought		870755.38	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	169021.00
(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.

Shropshire, Adrienne, R., ,

Signature

Date

MM / DD / YYYY
10 / 30 / 2024

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 13 OF 19
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) BlackPAC		FEC IDENTIFICATION NUMBER ▼ C C00609388
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee Technicolor Political		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 1805 W Monterey Ave Unit 43043		Amount 6441.00
City Chicago	State IL	Zip Code 60643-4232
Purpose of Expenditure Media Production - Estimate	Category/ Type	Transaction ID : 500690413 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Brown, Sherrod, , ,		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee Technicolor Political		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 1805 W Monterey Ave Unit 43043		Amount 3700.00
City Chicago	State IL	Zip Code 60643-4232
Purpose of Expenditure Media Production - Estimate	Category/ Type	Transaction ID : 500690414 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Harris, Kamala, , ,		Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	10141.00
(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.

Shropshire, Adrianne, R., ,

Signature

Date

MM / DD / YYYY
10 / 30 / 2024

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 14 OF 19
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) BlackPAC		FEC IDENTIFICATION NUMBER ▼ C C00609388
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee Technicolor Political		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 1805 W Monterey Ave Unit 43043		Amount 3700.00
City Chicago	State IL	Zip Code 60643-4232
Purpose of Expenditure Media Production - Estimate	Category/ Type	Transaction ID : 500690415 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Alsobrooks, Angela, ,		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: MD
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee Technicolor Political		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 1805 W Monterey Ave Unit 43043		Amount 110836.00
City Chicago	State IL	Zip Code 60643-4232
Purpose of Expenditure Media Buy - Estimate	Category/ Type	Transaction ID : 500690473 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Brown, Sherrod, ,		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	114536.00
(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.

Shropshire, Adrienne, R., ,

Signature

Date

MM / DD / YYYY
10 / 30 / 2024

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 15 OF 19
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) BlackPAC		FEC IDENTIFICATION NUMBER ▼ C C00609388
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee Technicolor Political		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 1805 W Monterey Ave Unit 43043		Amount 206105.00
City Chicago	State IL	Zip Code 60643-4232
Purpose of Expenditure Digital Advertising - Estimate	Category/ Type	Transaction ID : 500690664 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Harris, Kamala, , ,		☒ Support ☐ Oppose Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee Technicolor Political		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 1805 W Monterey Ave Unit 43043		Amount 45793.96
City Chicago	State IL	Zip Code 60643-4232
Purpose of Expenditure Media Buy - Estimate	Category/ Type	Transaction ID : 500690667 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Trump, Donald, J., ,		☐ Support ☒ Oppose Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	251898.96
(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.

Shropshire, Adrienne, R., ,

Signature

Date

MM / DD / YYYY
10 / 30 / 2024

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

PAGE 16 OF 19

FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) BlackPAC		FEC IDENTIFICATION NUMBER ▼ C C00609388
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee Technicolor Political		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 1805 W Monterey Ave Unit 43043		Amount 79180.04
City Chicago	State IL	Zip Code 60643-4232
Purpose of Expenditure Media Buy - Estimate	Category/ Type	Transaction ID : 500690668 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Harris, Kamala, , , ☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 20201055.87		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee The Pivot Group Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 712 H St NE Unit 606		Amount 457095.98
City Washington	State DC	Zip Code 20002-3627
Purpose of Expenditure Direct Mail - Estimate	Category/ Type	Transaction ID : 500690530 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Harris, Kamala, , , ☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 20201055.87		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	536276.02
(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.

Shropshire, Adrienne, R., ,

Signature

Date

MM / DD / YYYY
10 / 30 / 2024

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

PAGE 17 OF 19

FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) BlackPAC		FEC IDENTIFICATION NUMBER ▼ C C00609388
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee The Pivot Group Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 712 H St NE Unit 606		Amount 50214.52
City Washington	State DC	Zip Code 20002-3627
Purpose of Expenditure Direct Mail - Estimate	Category/ Type	Transaction ID : 500690554 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Harris, Kamala, , , ☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 20201055.87		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee The Pivot Group Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 712 H St NE Unit 606		Amount 150643.55
City Washington	State DC	Zip Code 20002-3627
Purpose of Expenditure Direct Mail - Estimate	Category/ Type	Transaction ID : 500690555 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Brown, Sherrod, , , ☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 2224859.79		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	200858.07
(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.

Shropshire, Adrienne, R., ,

Signature

Date

MM / DD / YYYY
10 / 30 / 2024

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 18 OF 19
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) BlackPAC		FEC IDENTIFICATION NUMBER ▼ C C00609388	
Check if ☒ 24-hour report ☐ 48-hour report		☒ New report ☐ Amends report filed on	

Full Name of Payee The Pivot Group Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024	
Mailing Address 712 H St NE Unit 606		Amount 89469.57	
City Washington	State DC	Zip Code 20002-3627	Transaction ID : 500690557
Purpose of Expenditure Direct Mail - Estimate		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Harris, Kamala, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		20201055.87	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee The Pivot Group Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024	
Mailing Address 712 H St NE Unit 606		Amount 89469.56	
City Washington	State DC	Zip Code 20002-3627	Transaction ID : 500690559
Purpose of Expenditure Direct Mail - Estimate		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Casey, Robert, P., , Jr.		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: PA
Calendar Year-To-Date Per Election for Office Sought		2262719.56	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	178939.13
(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.

Shropshire, Adrienne, R., ,

Signature

Date

MM / DD / YYYY
10 / 30 / 2024

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 19 OF 19
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) BlackPAC		FEC IDENTIFICATION NUMBER ▼ C C00609388
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee The Pivot Group Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 712 H St NE Unit 606		Amount 67945.61
City Washington	State DC	Zip Code 20002-3627
Purpose of Expenditure Direct Mail - Estimate	Category/ Type	Transaction ID : 500690560 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Harris, Kamala, , ,		Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee The Pivot Group Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 712 H St NE Unit 606		Amount 203836.83
City Washington	State DC	Zip Code 20002-3627
Purpose of Expenditure Direct Mail - Estimate	Category/ Type	Transaction ID : 500690561 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Alsobrooks, Angela, , ,		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: MD
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	271782.44
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	8096124.62

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.

Shropshire, Adrienne, R., ,

Signature

Date

MM / DD / YYYY
10 / 30 / 2024