## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48								
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼								
DODO COMMITTEE									
	C C00853135								
Check if 24-hour report 48-hour report Mew report Amends report filed on									
Full Name of Payee	Date of Public Distribution/Dissemination								
Dodo committee	M - M / D - D / Y - Y - Y								
[MEMO ITEM] Usual campaign expenses independent expenditures  Mailing Address 138 East Goodwin Chase LN	10 01 2025								
138 East Goodwin Chase Liv	Amount								
	40000000000								
City State Zip Code Wendell NC 27591	10000000.00								
Wendell NC 27591	Transaction ID: WFT20259301728-1  Date of Disbursement or Obligation								
Purpose of Expenditure Category/	10 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y								
Regular old expenses administrative Type	10 30 2025								
Name of Federal Candidate Support	Office Sought: House District:00								
Keener, Logan, Benjamin, DR,	☐ Senate State: NC								
Calendar Year-To-Date	Disbursement For: Primary General								
Per Election for Office Sought	2028								
Full Name of Payee	Date of Public Distribution/Dissemination								
Dodo Government  [MEMO ITEM] Inaugural commission donation for setup	M = M / D = D / Y = Y = Y								
Mailing Address 138 East Goodwin Chase LN	_								
Dodo Mail Room	Amount								
City State Zip Code	1000000.00								
Wendell NC 27591	Transaction ID : WFT20259301724-1								
	Date of Disbursement or Obligation								
Purpose of Expenditure  Candidate donation for for an inauguration committee of an  Type	08 / 28 / Y Y Y Y								
independent board between allies of Trump									
Name of Federal Candidate  Support	Office Sought: House District:00								
Keener, Logan, Benjamin, , Oppose	President Senate State: NC								
Calendar Year-To-Date	Disbursement For: Primary General								
Per Election for Office Sought 2028.00	Other (specify)  Other								
(a) SUBTOTAL of Itemized Independent Expenditures	• 0								
(b) SUBTOTAL of Unitemized Independent Expenditures	<b>&gt;</b>								
(c) TOTAL Independent Expenditures	<b>&gt;</b>								
Under penalty of perjury I certify that the independent expenditures reported herein were r									
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.									
party commission and party commission in again.									
Keener, Logan, Benjamin, DR,	M M / D D / Y Y Y Y Y								
Signature Date	10 30 2025								
- 0									

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

	udic L)					FOR SE OF	FORM	24/48	
					FEC II	C IDENTIFICATION NUMBER ▼			
DOI	DO COMMITTEE				С	C00853135			
Check if 24-hour report 48-hour report Mew report Amends report filed on Amends report file									
Full Name of Payee				Date	Date of Public Distribution/Dissemination				
Dodo Government  X  Ads and administrative expenses and campaign expenses			Г	10 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
	Ads and administrative expenses and campaign expenses  Mailing Address 138 East Goodwin Chase LN								
Dodo Mail Room				Amou	Amount				
Cit	City State Zip Code				1000000.00				
	endell NC	27591			Transaction ID : WFT20259301731-1 Date of Disbursement or Obligation				
	rpose of Expenditure dministrative expenses	Category/ Type			и и	/ D D /	Y	YYY	
Na	me of Federal Candidate	Xs	Support	Office Sough	nt:	House	District:	00	
Ke	eener, Logan, Benjamin, DR,	c	Oppose	X Presid	ent	Senate	State:	NC_	
	Calendar Year-To-Date Per Election for Office Sought	2028.00		Disbursemer 2028	nt For:	X Primary	/	General	
	Per Election for Office Sought 2028.00 202				Other (sp	pecify) ►			
Full Name of Payee Date of Public Distr						ic Distribution		ination	
Ма	ailing Address			Amou	unt				
Cit	State Zip Code				, ,	7			
Pu	rpose of Expenditure	Category/ Type		Date	Date of Disbursement or Obligation				
Na	me of Federal Candidate	<u> </u>	Support	Office Sough	Pought: House District:				
			_	ee Sought: House District:					
$\vdash$	0.1.1.7.7.0.		Oppose			Senate	State:	Gonoral	
	Calendar Year-To-Date Per Election for Office Sought			Disburseme		Primary pecify) ▶	у 🔝	General	
(a)	SUBTOTAL of Itemized Independent Expenditures			<b>.</b>	- T	1 1 7	(	0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures									
(c)	TOTAL Independent Expenditures			· • [	-	1	1000000	0.00	
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.									
_	Keener, Logan, Benjamin, DR,	_	Date	10	30	/ 202	25 Y		
	Signature								

PAGE 2

OF