

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 5
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Somos PAC		FEC IDENTIFICATION NUMBER ▼ C C00724203
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 / 31 / 2024
Mailing Address 1640 Rhode Island Ave NW Ste 600		Amount 64820.00
City Washington	State DC	Zip Code 20036-3229
Purpose of Expenditure Digital Advertising - Estimate	Category/ Type	Transaction ID : 500195568 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 / 31 / 2024
Mailing Address 8651 Highway N Ste 214		Amount 250000.00
City Lake St Louis	State MO	Zip Code 63367
Purpose of Expenditure Canvassing - Estimate	Category/ Type	Transaction ID : 500195646 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..... ▶	314820.00
(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.

Morales, Melissa, , ,
Signature

Date 11 / 01 / 2024

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 2 OF 5
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Somos PAC		FEC IDENTIFICATION NUMBER ▼ C C00724203
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 / 31 / 2024
Mailing Address 8651 Highway N Ste 214		Amount 250000.00
City Lake St Louis	State MO	Zip Code 63367
Purpose of Expenditure Canvassing - Estimate	Category/ Type	Transaction ID : 500195647 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Casey, Robert, P., , Jr.		☒ Support Office Sought: ☐ House District: _____ ☐ Oppose ☐ President ☒ Senate State: PA
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 / 31 / 2024
Mailing Address 8651 Highway N Ste 214		Amount 250000.00
City Lake St Louis	State MO	Zip Code 63367
Purpose of Expenditure Canvassing - Estimate	Category/ Type	Transaction ID : 500195649 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) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	500000.00
(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.

Morales, Melissa, , ,
Signature

Date 11 / 01 / 2024

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 3 OF 5
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Somos PAC		FEC IDENTIFICATION NUMBER ▼ C C00724203
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 / 31 / 2024
Mailing Address 8651 Highway N Ste 214		Amount 250000.00
City Lake St Louis	State MO	Zip Code 63367
Purpose of Expenditure Canvassing - Estimate	Category/ Type	Transaction ID : 500195650 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Slotkin, Elissa, , ,		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: MI
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 / 31 / 2024
Mailing Address 8651 Highway N Ste 214		Amount 250000.00
City Lake St Louis	State MO	Zip Code 63367
Purpose of Expenditure Canvassing - Estimate	Category/ Type	Transaction ID : 500195651 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..... ▶	500000.00
(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.

Morales, Melissa, , ,

Signature

Date

MM / DD / YYYY
11 / 01 / 2024

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 4 OF 5
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Somos PAC		FEC IDENTIFICATION NUMBER ▼ C C00724203
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 / 31 / 2024
Mailing Address 8651 Highway N Ste 214		Amount 250000.00
City Lake St Louis	State MO	Zip Code 63367
Purpose of Expenditure Canvassing - Estimate	Category/ Type	Transaction ID : 500195652 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Rosen, Jacky, , ,		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: NV
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 / 31 / 2024
Mailing Address 8651 Highway N Ste 214		Amount 100000.00
City Lake St Louis	State MO	Zip Code 63367
Purpose of Expenditure Canvassing - Estimate	Category/ Type	Transaction ID : 500195653 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Gray, Adam, C., ,		Office Sought: ☒ House District: 13 ☐ President ☐ Senate State: CA
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.

Morales, Melissa, , ,
Signature

Date 11 / 01 / 2024

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 5 OF 5
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Somos PAC		FEC IDENTIFICATION NUMBER ▼ C C00724203
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 / 31 / 2024
Mailing Address 8651 Highway N Ste 214		Amount 100000.00
City Lake St Louis	State MO	Zip Code 63367
Purpose of Expenditure Canvassing - Estimate	Category/ Type	Transaction ID : 500195654 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Salas, Rudy, ,		☒ Support ☐ Oppose Office Sought: ☒ House ☐ Senate District: 22 ☐ President State: CA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address		Amount
City	State	Zip Code
Purpose of Expenditure	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate		☐ Support ☐ Oppose Office Sought: ☐ House ☐ Senate District: _____ ☐ President State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	100000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	1764820.00

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.

Morales, Melissa, , ,

Signature

Date

MM / DD / YYYY
11 / 01 / 2024