

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

NAME OF COMMITTEE (In Full) WORKING FAMILIES PARTY PAC			FEC IDENTIFICATION NUMBER ▼ C C00606962		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on MM / DD / YYYY					
Full Name of Payee Community Labor Administrative Services, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024		
Mailing Address 77 Sands St 6th Floor			Amount 3500.00		
City Brooklyn		State NY	Zip Code 11201		Transaction ID : WFT20249302147-1 Date of Disbursement or Obligation MM / DD / YYYY 10 / 29 / 2024
Purpose of Expenditure Texting (estimate)		Category/ Type			
Name of Federal Candidate Altman, Susan, , ,			☒ Support ☐ Oppose	Office Sought: ☒ House District: 07 ☐ President ☐ Senate State: NJ	
Calendar Year-To-Date Per Election for Office Sought			735245.52 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
Full Name of Payee Community Labor Administrative Services, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 23 / 2024		
Mailing Address 77 Sands St 6th Floor			Amount 500.00		
City Brooklyn		State NY	Zip Code 11201		Transaction ID : WFT20249302146-1 Date of Disbursement or Obligation MM / DD / YYYY 10 / 23 / 2024
Purpose of Expenditure Texting (estimate)		Category/ Type			
Name of Federal Candidate Allred, Colin, , ,			☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: TX	
Calendar Year-To-Date Per Election for Office Sought			1500.00 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			4000.00		
(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 Boland, Mike, , ,			Date MM / DD / YYYY 10 / 30 / 2024		

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NAME OF COMMITTEE (In Full) WORKING FAMILIES PARTY PAC			FEC IDENTIFICATION NUMBER ▼ C C00606962		
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 Base Builder			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 29 / 2024		
Mailing Address 77 Sands St 6th Floor			Amount 51934.60		
City Brooklyn		State NY	Zip Code 11201		Transaction ID : WFT20249302230-1
Purpose of Expenditure Canvass (estimate)		Category/ Type		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 29 / 2024	
Name of Federal Candidate Harris, Kamala, , ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 3940465.56			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
Full Name of Payee Community Labor Administrative Services, Inc.			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 29 / 2024		
Mailing Address 77 Sands St 6th Floor			Amount 2000.00		
City Brooklyn		State NY	Zip Code 11201		Transaction ID : WFT20249302137-1
Purpose of Expenditure Texting (estimate)		Category/ Type		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 29 / 2024	
Name of Federal Candidate Allred, Colin, , ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: TX
Calendar Year-To-Date Per Election for Office Sought 2500.00			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			53934.60		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
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Signature Boland, Mike, , ,			Date M M / D D / Y Y Y Y Y Y 10 / 30 / 2024		

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NAME OF COMMITTEE (In Full) WORKING FAMILIES PARTY PAC		FEC IDENTIFICATION NUMBER ▼ C C00606962
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee The Union Print Shop		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 49 S Sycamore St		Amount 6000.00
City Mesa	State AZ	Zip Code 85202
Purpose of Expenditure Printed literature (estimate)	Category/ Type	Transaction ID : WFT20249302247-1 Date of Disbursement or Obligation MM / DD / YYYY 10 / 29 / 2024
Name of Federal Candidate Harris, Kamala, , ,	☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 3940465.56		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____

Full Name of Payee LC Media LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 1604 Fawn Ln		Amount 12000.00
City Huntingdon Valley	State PA	Zip Code 19006
Purpose of Expenditure Video production for digital ads	Category/ Type	Transaction ID : WFT20249302222-1 Date of Disbursement or Obligation MM / DD / YYYY 10 / 29 / 2024
Name of Federal Candidate Harris, Kamala, , ,	☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 3940465.56		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	18000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Boland, Mike, , ,

Signature

Date

MM / DD / YYYY
10 / 30 / 2024

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Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY / /

Full Name of Payee LC Media LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 1604 Fawn Ln		Amount 150000.00
City Huntingdon Valley	State PA	Zip Code 19006
Purpose of Expenditure Digital ads	Category/ Type	Transaction ID : WFT20249302236-1 Date of Disbursement or Obligation MM / DD / YYYY 10 / 29 / 2024
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 Community Labor Administrative Services, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 77 Sands St 6th Floor		Amount 10929.73
City Brooklyn	State NY	Zip Code 11201
Purpose of Expenditure Texting (estimate)	Category/ Type	Transaction ID : WFT20249302234-1 Date of Disbursement or Obligation MM / DD / YYYY 10 / 29 / 2024
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) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	160929.73
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Boland, Mike, , ,
Signature

Date MM / DD / YYYY
10 / 30 / 2024

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Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee Community Labor Administrative Services, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 77 Sands St 6th Floor		Amount 555.19
City Brooklyn	State NY	Zip Code 11201
Purpose of Expenditure Phone calls	Category/ Type	Transaction ID : WFT20249302216-1 Date of Disbursement or Obligation MM / DD / YYYY 10 / 29 / 2024
Name of Federal Candidate Harris, Kamala, , ,		Office Sought: ☒ Support ☐ Oppose ☒ President ☐ Senate District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee FedEx Office Print & Ship Center		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 5658 Washington Ave		Amount 448.56
City Mount Pleasant	State WI	Zip Code 53406
Purpose of Expenditure Printed literature	Category/ Type	Transaction ID : WFT20249302219-1 Date of Disbursement or Obligation MM / DD / YYYY 10 / 29 / 2024
Name of Federal Candidate Harris, Kamala, , ,		Office Sought: ☒ Support ☐ Oppose ☒ President ☐ Senate District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1003.75
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	237868.08

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Boland, Mike, , ,

Signature

Date

MM / DD / YYYY
10 / 30 / 2024