

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 4
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Everyday People		FEC IDENTIFICATION NUMBER ▼ C C00720029	
Check if ☒ 24-hour report ☐ 48-hour report		☒ New report ☐ Amends report filed on	

Full Name of Payee Resilient Strategies			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y		
Mailing Address 1212 Broadway Ste 700			Amount 1265.18		
City Oakland	State CA	Zip Code 94612-1941	Transaction ID : 500425722		
Purpose of Expenditure Staff Time		Category/ Type	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 31 / 2024		
Name of Federal Candidate TRUMP, DONALD, J., ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: US		
Calendar Year-To-Date Per Election for Office Sought		130719.69	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		

Full Name of Payee Resilient Strategies			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y		
Mailing Address 1212 Broadway Ste 700			Amount 550.48		
City Oakland	State CA	Zip Code 94612-1941	Transaction ID : 500425723		
Purpose of Expenditure Staff Time		Category/ Type	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 31 / 2024		
Name of Federal Candidate Harris, Kamala, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: US		
Calendar Year-To-Date Per Election for Office Sought		130719.69	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1815.66
(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.

Foy, Michelle, , ,
Signature

Date 02 / 21 / 2025

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 2 OF 4
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Everyday People		FEC IDENTIFICATION NUMBER ▼ C C00720029
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee Resilient Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address 1212 Broadway Ste 700		Amount 58.48	
City Oakland	State CA	Zip Code 94612-1941	Transaction ID : 500425724
Purpose of Expenditure Staff Time		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 31 / 2024
Name of Federal Candidate MARLINGA, CARL, J., ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 10 ☐ President ☐ Senate State: MI
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	

Full Name of Payee Resilient Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address 1212 Broadway Ste 700		Amount 409.57	
City Oakland	State CA	Zip Code 94612-1941	Transaction ID : 500425725
Purpose of Expenditure Staff Time		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 31 / 2024
Name of Federal Candidate TRUMP, DONALD, J., ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: US
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	468.05
(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.

Foy, Michelle, , ,
Signature

Date 02 / 21 / 2025

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 3 OF 4
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Everyday People		FEC IDENTIFICATION NUMBER ▼ C C00720029
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee Rising Voices Action Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 428 W Lenawee St		Amount 33149.22
City Lansing	State MI	Zip Code 48933-2240
Purpose of Expenditure Mailer	Category/ Type	Transaction ID : 500425926 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Harris, Kamala, , ,		☒ Support ☐ Oppose Office Sought: ☐ House ☒ President ☐ Senate District: 00 State: US
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee Rising Voices Action Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024
Mailing Address 428 W Lenawee St		Amount 3784.00
City Lansing	State MI	Zip Code 48933-2240
Purpose of Expenditure Canvass Payroll and literature	Category/ Type	Transaction ID : 500425933 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate MARLINGA, CARL, J., ,		☒ Support ☐ Oppose Office Sought: ☒ House ☐ President ☐ Senate District: 10 State: MI
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	36933.22
(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.

Foy, Michelle, , ,

Signature

Date

MM / DD / YYYY
02 / 21 / 2025

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

NAME OF COMMITTEE (In Full) Everyday People		FEC IDENTIFICATION NUMBER ▼ C C00720029	
Check if ☒ 24-hour report ☐ 48-hour report		☒ New report ☐ Amends report filed on	

Full Name of Payee Rising Voices Action Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2024	
Mailing Address 428 W Lenawee St		Amount 3784.00	
City Lansing	State MI	Zip Code 48933-2240	Transaction ID : 500425934
Purpose of Expenditure Canvass Payroll and literature		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Harris, Kamala, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: US
Calendar Year-To-Date Per Election for Office Sought		130719.69	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	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure		Category/ Type	
Name of Federal Candidate		☐ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	3784.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	43000.93

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.

Foy, Michelle, , ,
Signature

Date MM / DD / YYYY
02 / 21 / 2025