

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CALIFORNIA BLUE PAC			FEC IDENTIFICATION NUMBER ▼ C C00948216		
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 FOUR PONIES CONSULTING LLC			Date of Public Distribution/Dissemination 05 / 05 / 2026		
Mailing Address 4016 SOUTH THIRD ST 1132			Amount 60000.00		
City JACKSONVILLE BEACH	State FL	Zip Code 32250	Transaction ID : SE24.31863		
Purpose of Expenditure MEDIA PLACEMENT		Category/ Type 	Date of Disbursement or Obligation 05 / 05 / 2026		
Name of Federal Candidate VARET, ESTHER, KIM, ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 40 ☐ President ☐ Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought		34552.00	Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶		
Full Name of Payee FOUR PONIES CONSULTING LLC			Date of Public Distribution/Dissemination 05 / 05 / 2026		
Mailing Address 4016 SOUTH THIRD ST 1132			Amount 273552.00		
City JACKSONVILLE BEACH	State FL	Zip Code 32250	Transaction ID : SE24.31864		
Purpose of Expenditure MEDIA PLACEMENT		Category/ Type 	Date of Disbursement or Obligation 05 / 05 / 2026		
Name of Federal Candidate VARET, ESTHER, KIM, ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 40 ☐ President ☐ Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought		34552.00	Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			333552.00		
(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 PRIM, PAUL, , ,			Date 05 / 07 / 2026		

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(Schedule E)PAGE 2 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CALIFORNIA BLUE PAC		FEC IDENTIFICATION NUMBER ▼ C C00948216
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 FOUR PONIES CONSULTING LLC		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 05 / 2026
Mailing Address 4016 SOUTH THIRD ST 1132		Amount 12000.00
City JACKSONVILLE BEACH	State FL	Zip Code 32250
Purpose of Expenditure MEDIA PRODUCTION	Category/ Type	Transaction ID : SE24.31865 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 05 / 2026
Name of Federal Candidate VARET, ESTHER, KIM, ,		Office Sought: ☒ House District: 40 ☐ President ☐ Senate State: CA ☐ Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶
34552.00		

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

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	12000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	34552.00

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.

PRIM, PAUL, , ,

Signature

Date

M M / D D / Y Y Y Y Y Y
05 / 07 / 2026