

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

NAME OF COMMITTEE (In Full) BOLD AMERICA			FEC IDENTIFICATION NUMBER ▼ C C00854299		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on			MM / DD / YYYY		
Full Name of Payee Round World Consulting			Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 23 / 2024		
Mailing Address 515 7th Ave			Amount 12952.40		
City Belmar	State NJ	Zip Code 07719	Transaction ID : WFT20244241153-1		
Purpose of Expenditure Mail Ad Production, Printing, and Postage (Estimate)		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Menendez, Robert, J., ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 08 ☐ President ☐ Senate State: NJ		
Calendar Year-To-Date Per Election for Office Sought		355904.80	Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶		
Full Name of Payee Sage Media Planning & Placement, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 23 / 2024		
Mailing Address 1322 G St SE			Amount 300000.00		
City Washington	State DC	Zip Code 20003	Transaction ID : WFT20244241238-1		
Purpose of Expenditure TV Ad Buy (Estimate)		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Bhalla, Ravi, , ,		☐ Support ☒ Oppose	Office Sought: ☒ House District: 08 ☐ President ☐ Senate State: NJ		
Calendar Year-To-Date Per Election for Office Sought		355904.80	Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			312952.40		
(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 Koob, Christopher, , ,			Date MM / DD / YYYY 05 / 24 / 2024		

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Full Name of Payee Sena Kozar Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 23 / 2024
Mailing Address 3723 Jenifer St NW		Amount 10000.00
City Washington	State DC	Zip Code 20003
Purpose of Expenditure Ad Production (Estimate)	Category/ Type	Transaction ID : WFT20244241249-1 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Bhalla, Ravi, , ,		Office Sought: ☒ House District: 08 ☐ President ☐ Senate State: NJ
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		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.....▶	10000.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	322952.40

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.

Koob, Christopher, , ,

Signature

Date

MM / DD / YYYY
05 / 24 / 2024