

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 1
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 LC Media LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 24 / 2025
Mailing Address 1604 Fawn Ln		Amount 70000.00
City Huntingdon Valley	State PA	Zip Code 19006
Purpose of Expenditure Digital ads	Category/ Type	Transaction ID : WFT202510241533-1 Date of Disbursement or Obligation MM / DD / YYYY 11 / 24 / 2025
Name of Federal Candidate Behn, Aftyn, , ,		Office Sought: ☒ House District: 07 ☐ President ☐ Senate State: TN
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☐ General 2025 ☒ Other (specify) ▶ Special General

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..... ▶	70000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	70000.00

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.

Boland, Mike, , ,
Signature

Date MM / DD / YYYY
11 / 24 / 2025