

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

NAME OF COMMITTEE (In Full) UNITED BREAST CANCER SUPPORT PAC			FEC IDENTIFICATION NUMBER ▼ C C00824821		
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on			MM / DD / YYYY		
Full Name of Payee CLOUD DATA SERVICES		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 22 / 2024			
Mailing Address 1009 WHITNEY RANCH DR.		Amount 1211.42			
City HENDERSON	State NV	Zip Code 89014	Transaction ID : SE-S1661771		
Purpose of Expenditure LEADS / PHONE LISTS(ESTIMATE)		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate KLOBUCHAR, AMY, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: MN		
Calendar Year-To-Date Per Election for Office Sought		2241.12	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
Full Name of Payee CLOUD DATA SERVICES		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 22 / 2024			
Mailing Address 1009 WHITNEY RANCH DR.		Amount 1211.41			
City HENDERSON	State NV	Zip Code 89014	Transaction ID : SE-S1661773		
Purpose of Expenditure LEADS / PHONE LISTS(ESTIMATE)		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate DUCKWORTH, TAMMY, L, ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: IL		
Calendar Year-To-Date Per Election for Office Sought		14774.95	Disbursement For: ☒ Primary ☐ General 2028 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures.....		2422.83			
(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 COBOS, BEATRIZ, , ,		Date MM / DD / YYYY 08 / 22 / 2024			

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NAME OF COMMITTEE (In Full) UNITED BREAST CANCER SUPPORT PAC		FEC IDENTIFICATION NUMBER ▼ C C00824821	
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY	

Full Name of Payee LAV SERVICES LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 22 / 2024	
Mailing Address 1009 WHITNEY RANCH DR.		Amount 1150.85	
City HENDERSON	State NV	Zip Code 89014	Transaction ID : SE-S1661779
Purpose of Expenditure PHONEBANK PAYROLL SERVICES(ESTIMATE)		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate KLOBUCHAR, AMY, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: MN
Calendar Year-To-Date Per Election for Office Sought		2241.12	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee LAV SERVICES LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 22 / 2024	
Mailing Address 1009 WHITNEY RANCH DR.		Amount 1150.84	
City HENDERSON	State NV	Zip Code 89014	Transaction ID : SE-S1661781
Purpose of Expenditure PHONEBANK PAYROLL SERVICES(ESTIMATE)		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate DUCKWORTH, TAMMY, L, ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: IL
Calendar Year-To-Date Per Election for Office Sought		14774.95	Disbursement For: ☒ Primary ☐ General 2028 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	2301.69
(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.

COBOS, BEATRIZ, , ,

Signature

Date

MM / DD / YYYY
08 / 22 / 2024

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Full Name of Payee STANDARD DATA SERVICES LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 22 / 2024
Mailing Address 513 MILL AVE SE SUITE 206		Amount 847.99
City NEW PHILADELPHIA	State OH	Zip Code 44663
Purpose of Expenditure CAGING AND DATABASE SERVICES(ESTIMATE)	Category/ Type 004	Transaction ID : SE-S1661775 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate KLOBUCHAR, AMY, , ,		Office Sought: ☒ Support ☐ Oppose ☐ President ☒ Senate State: MN
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee STANDARD DATA SERVICES LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 22 / 2024
Mailing Address 513 MILL AVE SE SUITE 206		Amount 847.99
City NEW PHILADELPHIA	State OH	Zip Code 44663
Purpose of Expenditure CAGING AND DATABASE SERVICES(ESTIMATE)	Category/ Type 004	Transaction ID : SE-S1661777 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate DUCKWORTH, TAMMY, L, ,		Office Sought: ☒ Support ☐ Oppose ☐ President ☒ Senate State: IL
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2028 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1695.98
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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COBOS, BEATRIZ, , ,

Signature

Date

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Full Name of Payee WIRED4DATA		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 22 / 2024	
Mailing Address 55 LAKE HAVASU AVE SOUTH F-677		Amount 2241.12	
City LAKE HAVASU CITY	State AZ	Zip Code 86403	Transaction ID : SE-S1661783
Purpose of Expenditure PHONEBANK IT/TECH SUPPORT(ESTIMATE)		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate KLOBUCHAR, AMY, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: MN
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	

Full Name of Payee WIRED4DATA		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 22 / 2024	
Mailing Address 55 LAKE HAVASU AVE SOUTH F-677		Amount 2241.12	
City LAKE HAVASU CITY	State AZ	Zip Code 86403	Transaction ID : SE-S1661785
Purpose of Expenditure PHONEBANK IT/TECH SUPPORT(ESTIMATE)		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate DUCKWORTH, TAMMY, L, ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: IL
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2028 ☐ Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	4482.24
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	10902.74

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.

COBOS, BEATRIZ, , ,

Signature

Date

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08 / 22 / 2024