

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

NAME OF COMMITTEE (In Full) Movement Voter PAC		FEC IDENTIFICATION NUMBER ▼ C C00728360
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee Task Force LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 14 / 2024
Mailing Address 4313 Mentone Ave		Amount 50000.00
City Culver City	State CA	Zip Code 90232-3444
Purpose of Expenditure Posters	Category/ Type 004	Transaction ID : 500083962 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate HARRIS, KAMALA, , ,		Office Sought: ☒ Support ☐ Oppose ☒ President ☐ Senate State: US
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: ☐ Support ☐ Oppose ☐ President ☐ Senate State:
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	50000.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	50000.00

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.

Signature Flajnik, John, , ,

Date MM / DD / YYYY
08 / 16 / 2024