

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

NAME OF COMMITTEE (In Full) Duty and Country		FEC IDENTIFICATION NUMBER ▼ C C00666388
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee Left Hook		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 12 / 2023
Mailing Address 2601 Ocean Park Blvd Ste 324		Amount 24851.43
City Santa Monica	State CA	Zip Code 90405-5297
Purpose of Expenditure Media Production Costs - Estimate	Category/ Type	Transaction ID : 500161847 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Brown, Sherrod, ,		Office Sought: ☒ Support ☐ Oppose ☐ President ☒ Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶

Full Name of Payee Waterfront Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 12 / 2023
Mailing Address 3050 K St NW Ste 100		Amount 463219.00
City Washington	State DC	Zip Code 20007-5161
Purpose of Expenditure Media Buy - Estimate	Category/ Type	Transaction ID : 500161846 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Brown, Sherrod, ,		Office Sought: ☒ Support ☐ Oppose ☐ President ☒ Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	488070.43
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	488070.43

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.

Goodwin, Booth, , ,

Signature

Date

MM / DD / YYYY
09 / 14 / 2023