

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

NAME OF COMMITTEE (In Full) DEMOCRATIC ELECTION FUND			FEC IDENTIFICATION NUMBER ▼ C C00824334		
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on / /					
Full Name of Payee Scale To Win			Date of Public Distribution/Dissemination / /		
Mailing Address 13742 Harper St			Amount 190.00		
City State Zip Code Santa Ana CA 92703		Transaction ID : SE.4326 Date of Disbursement or Obligation / /			
Purpose of Expenditure Text Message Advertising		Category/ Type 004			
Name of Federal Candidate HARRIS, KAMALA, , ,			☒ Support Office Sought: ☐ House District: _____ ☐ Oppose ☒ President ☐ Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
Full Name of Payee Scale To Win			Date of Public Distribution/Dissemination / /		
Mailing Address 13742 Harper St			Amount 4847.77		
City State Zip Code Santa Ana CA 92703		Transaction ID : SE.4327 Date of Disbursement or Obligation / /			
Purpose of Expenditure Text Message Advertising		Category/ Type 004			
Name of Federal Candidate TRUMP, DONALD J., , ,			☐ Support Office Sought: ☐ House District: _____ ☒ Oppose ☒ President ☐ Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			5037.77		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶			5037.77		
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 Haggard, Lora, , ,			Date / /		