

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) People's Action Power			FEC IDENTIFICATION NUMBER ▼ C C00738237		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee New Conversation Initiative			Date of Public Distribution/Dissemination 10 / 21 / 2024		
Mailing Address 5132 York Blvd # 50878			Amount 10000.00		
City Los Angeles		State CA	Zip Code 90042-1716		Transaction ID : 500192843
Purpose of Expenditure Estimated Cost for Canvassing Services		Category/ Type 004		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate Harris, Kamala, , ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought			1795120.28 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
Full Name of Payee Scale to Win			Date of Public Distribution/Dissemination 10 / 21 / 2024		
Mailing Address 13742 Harper St			Amount 35000.00		
City Santa Ana		State CA	Zip Code 92703-1419		Transaction ID : 500192844
Purpose of Expenditure Estimated Cost for Digital Communications		Category/ Type 004		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate Harris, Kamala, , ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought			1795120.28 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			45000.00		
(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 Popadiak, Marta, , ,			Date 10 / 22 / 2024		

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NAME OF COMMITTEE (In Full) People's Action Power		FEC IDENTIFICATION NUMBER ▼ C C00738237
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee Vance, Wilson, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 21 / 2024
Mailing Address 1301 Connecticut Ave NW		Amount 15000.00
City Washington	State DC	Zip Code 20036-1815
Purpose of Expenditure Estimated Cost for Voter Outreach Services	Category/ Type 004	Transaction ID : 500192845 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Harris, Kamala, , ,		Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____
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: ☐ 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..... ▶	15000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	60000.00

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 Popadiak, Marta, , ,

Date MM / DD / YYYY
10 / 22 / 2024