

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

NAME OF COMMITTEE (In Full) INLAND EMPIRE UNITED FEDERAL ACTION FUND			FEC IDENTIFICATION NUMBER ▼ C C00821728		
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 INLAND EMPIRE UNITED			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 23 / 2024		
Mailing Address 515 S. FIGUEROA ST., STE. 1110			Amount 15521.63		
City LOS ANGELES		State CA	Zip Code 90071		Transaction ID : PDT.E.138
Purpose of Expenditure CANVASSING		Category/ Type 24E		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 23 / 2024	
Name of Federal Candidate ROLLINS, WILL, , ,			☒ Support ☐ Oppose		Office Sought: ☒ House District: 41 ☐ President ☐ Senate State: CA
Calendar Year-To-Date Per Election for Office Sought			311135.21 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
Full Name of Payee INLAND EMPIRE UNITED			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 23 / 2024		
Mailing Address 515 S. FIGUEROA ST., STE. 1110			Amount 1544.69		
City LOS ANGELES		State CA	Zip Code 90071		Transaction ID : PDT.E.139
Purpose of Expenditure CANVASSING		Category/ Type 24E		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 23 / 2024	
Name of Federal Candidate ROLLINS, WILL, , ,			☒ Support ☐ Oppose		Office Sought: ☒ House District: 41 ☐ President ☐ Senate State: CA
Calendar Year-To-Date Per Election for Office Sought			311135.21 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			17066.32		
(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 DAVIDSON, CARY, , ,			Date M M / D D / Y Y Y Y Y Y 10 / 24 / 2024		

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NAME OF COMMITTEE (In Full) INLAND EMPIRE UNITED FEDERAL ACTION FUND		FEC IDENTIFICATION NUMBER ▼ C C00821728	
Check if ☒ 24-hour report ☐ 48-hour report		☒ New report ☐ Amends report filed on	

Full Name of Payee INLAND EMPIRE UNITED			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 23 / 2024		
Mailing Address 515 S. FIGUEROA ST., STE. 1110			Amount 512.00		
City LOS ANGELES	State CA	Zip Code 90071	Transaction ID : PDT.E.140		
Purpose of Expenditure PHONE CALLS & CANVASSING (ESTIMATE)		Category/ Type 24E	Date of Disbursement or Obligation MM / DD / YYYY 10 / 23 / 2024		
Name of Federal Candidate ROLLINS, WILL, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 41 ☐ President ☐ Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought		311135.21	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		

Full Name of Payee INLAND EMPIRE UNITED			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 23 / 2024		
Mailing Address 515 S. FIGUEROA ST., STE. 1110			Amount 4454.00		
City LOS ANGELES	State CA	Zip Code 90071	Transaction ID : PDT.E.141		
Purpose of Expenditure PHONE CALLS & CANVASSING (ESTIMATE)		Category/ Type 24E	Date of Disbursement or Obligation MM / DD / YYYY 10 / 23 / 2024		
Name of Federal Candidate ROLLINS, WILL, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 41 ☐ President ☐ Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought		311135.21	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	4966.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	22032.32

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.

DAVIDSON, CARY, , ,

Signature

Date

MM / DD / YYYY
10 / 24 / 2024