

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

NAME OF COMMITTEE (In Full) ARTISTS UNITED FOR CHANGE			FEC IDENTIFICATION NUMBER ▼ C C00703082	
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 Catalyst Campaigns		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 07 / 2024		
Mailing Address 4701 N Figueroa St		Amount 15000.00		
City Los Angeles	State CA	Zip Code 90042	Transaction ID : SE.7694	
Purpose of Expenditure Online Advertising		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate TRUMP, DONALD J., ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		15000.00	Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶	
Full Name of Payee		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y		
Mailing Address		Amount		
City	State	Zip Code	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Purpose of Expenditure		Category/ Type		
Name of Federal Candidate		☐ Support ☐ Oppose	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.....		15000.00		
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 Kopp, Michael, , ,		Date M M / D D / Y Y Y Y Y Y 10 / 08 / 2024		