

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 VOTERS PAC			FEC IDENTIFICATION NUMBER ▼ C C00816868		
Check if ☐ 24-hour report ☒ 48-hour report ☐ New report ☒ Amends report filed on M M / D D / Y Y Y Y Y Y 09 / 27 / 2024					
Full Name of Payee Scale To Win			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 25 / 2024		
Mailing Address 13742 Harper St			Amount 190.00		
City State Zip Code Santa Ana CA 92703		Transaction ID : SE.4136 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 25 / 2024			
Purpose of Expenditure Text Message Advertising		Category/ Type 004			
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			132823.25 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
Full Name of Payee Scale To Win			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 25 / 2024		
Mailing Address 13742 Harper St			Amount 29081.20		
City State Zip Code Santa Ana CA 92703		Transaction ID : SE.4137 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 25 / 2024			
Purpose of Expenditure Text Message Advertising		Category/ Type 004			
Name of Federal Candidate CRUZ, RAFAEL EDWARD TED, , ,			☐ Support ☒ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: TX
Calendar Year-To-Date Per Election for Office Sought			29081.20 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			29271.20		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶			29271.20		
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 M M / D D / Y Y Y Y Y Y 10 / 01 / 2024		