

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

NAME OF COMMITTEE (In Full) ARIZONA'S BOLD ERA PAC (ABE PAC)		FEC IDENTIFICATION NUMBER ▼ C C00832980	
Check if ☒ 24-hour report ☐ 48-hour report		☒ New report ☐ Amends report filed on	

Full Name of Payee Strategic Media Placement Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 26 / 2024	
Mailing Address 7669 Stagers Loop		Amount 10000.00	
City Delaware	State OH	Zip Code 43015	Transaction ID : SE.4372
Purpose of Expenditure Digital placement		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 07 / 26 / 2024
Name of Federal Candidate HAMADEH, ABRAHAM, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 08 ☐ President ☐ Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought		846358.48	Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶

Full Name of Payee Strategic Media Placement Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 26 / 2024	
Mailing Address 7669 Stagers Loop		Amount 10000.00	
City Delaware	State OH	Zip Code 43015	Transaction ID : SE.4373
Purpose of Expenditure Digital placement		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 07 / 26 / 2024
Name of Federal Candidate MASTERS, BLAKE, , ,		☐ Support ☒ Oppose	Office Sought: ☒ House District: 08 ☐ President ☐ Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought		856358.48	Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	20000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	20000.00

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.

Wojciechowski, Maria, , ,
Signature

Date MM / DD / YYYY
07 / 27 / 2024