

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

NAME OF COMMITTEE (In Full) MI Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼ C C00568931		
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 The Outreach Team			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 22 / 2024		
Mailing Address 407 College Ave Ste 349			Amount 6588.56		
City Ithaca		State NY	Zip Code 14850		Transaction ID : SE.4623
Purpose of Expenditure Direct Voter Canvass Program		Category/ Type 007		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 22 / 2024	
Name of Federal Candidate Slotkin, Elissa, , ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: MI
Calendar Year-To-Date Per Election for Office Sought			96451.76 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
Full Name of Payee The Outreach Team			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 22 / 2024		
Mailing Address 407 College Ave Ste 349			Amount 6588.56		
City Ithaca		State NY	Zip Code 14850		Transaction ID : SE.4624
Purpose of Expenditure Direct Voter Canvass Program		Category/ Type 007		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 22 / 2024	
Name of Federal Candidate Harris, Kamala, , ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought			348451.76 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			13177.12		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶			13177.12		
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 Keserich, John, Thomas, ,			Date M M / D D / Y Y Y Y Y Y 10 / 23 / 2024		