

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

NAME OF COMMITTEE (In Full) Forward Blue PAC			FEC IDENTIFICATION NUMBER ▼ C C00835041		
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y					
Full Name of Payee Switchboard			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 10 / 2024 M M / D D / Y Y Y Y Y Y		
Mailing Address PO Box 33485			Amount 22273.17 M M / D D / Y Y Y Y Y Y		
City Washington State DC Zip Code 20033-0485		Transaction ID : 500113318 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y			
Purpose of Expenditure Voter contact texting (Estimate of final cost)		Category/Type 004			
Name of Federal Candidate Harris, Kamala, , ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought			3054235.88 M M / D D / Y Y Y Y Y Y Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ► _____		
Full Name of Payee			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y		
Mailing Address			Amount M M / D D / Y Y Y Y Y Y		
City State Zip Code		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y 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			M M / D D / Y Y Y Y Y Y Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ► _____		
(a) SUBTOTAL of Itemized Independent Expenditures.....			22273.17 M M / D D / Y Y Y Y Y Y		
(b) SUBTOTAL of Unitemized Independent Expenditures			M M / D D / Y Y Y Y Y Y		
(c) TOTAL Independent Expenditures.....			22273.17 M M / D D / Y Y Y Y Y Y		
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 Austin, David, , ,			Date M M / D D / Y Y Y Y Y Y 10 / 12 / 2024 M M / D D / Y Y Y Y Y Y		