

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

NAME OF COMMITTEE (In Full) Californians for Choice			FEC IDENTIFICATION NUMBER ▼ C C00875815		
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 Polaris Strategies, Inc.			Date of Public Distribution/Dissemination 06 / 25 / 2024		
Mailing Address 1802 Vernon Street NW, PMB #581			Amount 195625.00		
City Washington	State DC	Zip Code 20009	Transaction ID : EDT.E.9		
Purpose of Expenditure Cable/Satellite Ads		Category/ Type 24A	Date of Disbursement or Obligation 06 / 18 / 2024		
Name of Federal Candidate Trump, Donald, , ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought		1299984.75	Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶ _____		
Full Name of Payee			Date of Public Distribution/Dissemination / / 		
Mailing Address			Amount 		
City	State	Zip Code	Date of Disbursement or Obligation / / 		
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..... ▶			195625.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			 		
(c) TOTAL Independent Expenditures..... ▶			195625.00		
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 Deane, Shawnda, , ,			Date 06 / 27 / 2024		