

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) New Democrat Majority			FEC IDENTIFICATION NUMBER ▼ C C00859660		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on MM / DD / YYYY					
Full Name of Payee Thematic Campaigns			Date of Public Distribution/Dissemination MM / DD / YYYY		
Mailing Address 111 W Illinois St FI 5			Amount 25000.00		
City Chicago		State IL	Zip Code 60654-4505		Transaction ID : 500127539
Purpose of Expenditure Digital Advertising (Estimate)		Category/ Type		Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate SYKES, EMILIA, ,			☒ Support ☐ Oppose		Office Sought: ☒ House District: 13 ☐ President ☐ Senate State: OH
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
Full Name of Payee Thematic Campaigns			Date of Public Distribution/Dissemination MM / DD / YYYY		
Mailing Address 111 W Illinois St FI 5			Amount 25000.00		
City Chicago		State IL	Zip Code 60654-4505		Transaction ID : 500127540
Purpose of Expenditure Digital Advertising (Estimate)		Category/ Type		Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate EVANS, TIMOTHY, JOSEPH, ,			☐ Support ☒ Oppose		Office Sought: ☒ House District: 08 ☐ President ☐ Senate State: CO
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			50000.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
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 Petterson, Jay, , ,			Date MM / DD / YYYY		

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(Schedule E)PAGE 2 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) New Democrat Majority	FEC IDENTIFICATION NUMBER ▼ C C00859660
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on	

Full Name of Payee Thematic Campaigns			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 27 / 2024	
Mailing Address 111 W Illinois St FI 5			Amount 25000.00	
City Chicago	State IL	Zip Code 60654-4505	Transaction ID : 500127541	
Purpose of Expenditure Digital Advertising (Estimate)		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 23 / 2024	
Name of Federal Candidate HERRELL, STELLA, YVETTE, ,		☐ Support ☒ Oppose	Office Sought: ☐ President ☒ House	District: 02 State: NM
Calendar Year-To-Date Per Election for Office Sought		25000.00	Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶	

Full Name of Payee			Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address			Amount	
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY	
Purpose of Expenditure		Category/ Type		
Name of Federal Candidate		☐ Support ☐ Oppose	Office Sought: ☐ President ☐ House	District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	25000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	75000.00

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.

Pettersen, Jay, , ,

Signature

Date

MM / DD / YYYY
10 / 28 / 2024