

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

NAME OF COMMITTEE (In Full) ARAB AMERICANS FOR A BETTER AMERICA		FEC IDENTIFICATION NUMBER ▼ C C00880070	
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on		M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee Ditat Deus Productions, LLC		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 09 / 30 / 2024	
Mailing Address 201 Las Vegas Blvd Unit 100		Amount 2500.00	
City Las Vegas	State NV	Zip Code 89125	Transaction ID : SE.4114
Purpose of Expenditure Advertising	Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 01 / 2024	
Name of Federal Candidate HARRIS, KAMALA, , ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	

Full Name of Payee		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation M M M / D 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		Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	2500.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	2500.00

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 Shahbandar, Oubai, , ,

Date M M M / D D D / Y Y Y Y Y Y
10 / 02 / 2024