24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

NAME OF COMMITTEE (In Full)
Forward Majority Action

FEC IDENTIFICATION NUMBER ▼
C C00631549

Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shawmut Services

Mailing Address 59 State St

City: Newburyport | State: MA | Zip Code: 01950-6643

Purpose of Expenditure: GOTV Canvass

Category/ Type:

Date of Public Distribution/Dissemination: 10 / 23 / 2024

Amount: 153794.00

Transaction ID : 500082779

Date of Disbursement or Obligation: 10 / 17 / 2024

Name of Federal Candidate
Harris, Kamala, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House ☒ President ☐ Senate

District: 00

State: US

Calendar Year-To-Date Per Election for Office Sought: 1739615.00

Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee
Shawmut Services

Mailing Address 59 State St

City: Newburyport | State: MA | Zip Code: 01950-6643

Purpose of Expenditure: GOTV Canvass

Category/ Type:

Date of Public Distribution/Dissemination: 10 / 23 / 2024

Amount: 139078.00

Transaction ID : 500082780

Date of Disbursement or Obligation: 10 / 17 / 2024

Name of Federal Candidate
Harris, Kamala, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House ☒ President ☐ Senate

District: 00

State: US

Calendar Year-To-Date Per Election for Office Sought: 1739615.00

Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 292872.00

(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.

Hausman, Vicky, , ,
Signature

Date 10 / 23 / 2024

Image# 202410239710135880

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

NAME OF COMMITTEE (In Full)
Forward Majority Action

FEC IDENTIFICATION NUMBER ▼
C C00631549

Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Shawmut Services

Mailing Address 59 State St

City: Newburyport | State: MA | Zip Code: 01950-6643

Purpose of Expenditure: GOTV Canvass

Category/ Type:

Date of Public Distribution/Dissemination: 10 / 23 / 2024

Amount: 92812.00

Transaction ID : 500082781

Date of Disbursement or Obligation: 10 / 18 / 2024

Name of Federal Candidate
Harris, Kamala, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House ☒ President ☐ Senate

District: 00

State: US

Calendar Year-To-Date Per Election for Office Sought: 1739615.00

Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee
Shawmut Services

Mailing Address 59 State St

City: Newburyport | State: MA | Zip Code: 01950-6643

Purpose of Expenditure: GOTV Canvass

Category/ Type:

Date of Public Distribution/Dissemination: 10 / 23 / 2024

Amount: 83931.00

Transaction ID : 500082782

Date of Disbursement or Obligation: 10 / 18 / 2024

Name of Federal Candidate
Harris, Kamala, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House ☒ President ☐ Senate

District: 00

State: US

Calendar Year-To-Date Per Election for Office Sought: 1739615.00

Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 176743.00

(b) SUBTOTAL of Unitemized Independent Expenditures ▶

(c) TOTAL Independent Expenditures ▶ 469615.00

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.

Hausman, Vicky, , ,
Signature

Date 10 / 23 / 2024