

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 4
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NEIGHBORS FOR RESULTS		FEC IDENTIFICATION NUMBER ▼ C C00865725
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee BASK DIGITAL MEDIA		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 16 / 2024
Mailing Address 225 BROADWAY, SUITE 420		Amount 50000.00
City SAN DIEGO	State CA	Zip Code 92101
Purpose of Expenditure DIGITAL ADVERTISING	Category/ Type	Transaction ID : WFT20241201758-1 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate LICCARDO, SAM, , ,		☒ Support ☐ Oppose Office Sought: ☒ House ☐ President ☐ Senate District: 16 State: CA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶

Full Name of Payee RG STRATEGIES, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 17 / 2024
Mailing Address 2020 CREEKSIDE ROAD		Amount 7627.00
City SANTA BARBARA	State CA	Zip Code 93108
Purpose of Expenditure TEXT MESSAGING	Category/ Type	Transaction ID : WFT20241201759-1 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate LICCARDO, SAM, , ,		☒ Support ☐ Oppose Office Sought: ☒ House ☐ President ☐ Senate District: 16 State: CA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	57627.00
(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.

ALVAREZ, MATTHEW C., , ,

Signature

Date

MM / DD / YYYY
02 / 20 / 2024

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 2 OF 4
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NEIGHBORS FOR RESULTS		FEC IDENTIFICATION NUMBER ▼ C C00865725
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee RG STRATEGIES, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 16 / 2024
Mailing Address 2020 CREEKSIDE ROAD		Amount 36000.00
City SANTA BARBARA	State CA	Zip Code 93108
Purpose of Expenditure POLLING	Category/ Type	Transaction ID : WFT2024120182-1 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate LICCARDO, SAM, , ,		☒ Support ☐ Oppose Office Sought: ☒ House ☐ President ☐ Senate District: 16 State: CA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶

Full Name of Payee RMEM, INC.		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 16 / 2024
Mailing Address 717 RAND AVENUE		Amount 17000.00
City OAKLAND	State CA	Zip Code 94610
Purpose of Expenditure POLLING	Category/ Type	Transaction ID : WFT2024120180-1 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate LICCARDO, SAM, , ,		☒ Support ☐ Oppose Office Sought: ☒ House ☐ President ☐ Senate District: 16 State: CA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	53000.00
(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.

ALVAREZ, MATTHEW C., , ,

Signature

Date

MM / DD / YYYY
02 / 20 / 2024

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 3 OF 4
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NEIGHBORS FOR RESULTS		FEC IDENTIFICATION NUMBER ▼ C C00865725
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee PDI		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 16 / 2024
Mailing Address 12501 IMPERIAL HIGHWAY, #200		Amount 1365.00
City NORWALK	State CA	Zip Code 90650
Purpose of Expenditure TEXT MESSAGING	Category/ Type	Transaction ID : WFT2024120184-1 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate LICCARDO, SAM, , ,		☒ Support ☐ Oppose Office Sought: ☒ House ☐ President ☐ Senate District: 16 State: CA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶

Full Name of Payee OUTREACH CIRCLE		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 20 / 2024
Mailing Address 444 WEST OCEAN SUITE 800, PMB #1057		Amount 900.00
City LONG BEACH	State CA	Zip Code 90802
Purpose of Expenditure TEXT MESSAGING	Category/ Type	Transaction ID : WFT2024120186-1 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate LICCARDO, SAM, , ,		☒ Support ☐ Oppose Office Sought: ☒ House ☐ President ☐ Senate District: 16 State: CA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	2265.00
(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.

ALVAREZ, MATTHEW C., , ,

Signature

Date

MM / DD / YYYY
02 / 20 / 2024

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 4 OF 4
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NEIGHBORS FOR RESULTS			FEC IDENTIFICATION NUMBER ▼ C C00865725	
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 AMPLIFIED STRATEGIES			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 21 / 2024	
Mailing Address 5170 GOLDEN FOOTHILL PARKWAY			Amount 95747.00	
City State Zip Code EL DORADO HILLS CA 95762		Transaction ID : WFT2024120189-1 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y		
Purpose of Expenditure DIRECT MAIL		Category/Type		
Name of Federal Candidate LICCARDO, SAM, , ,		☒ Support ☐ Oppose Office Sought: ☒ House ☐ President ☐ Senate District: 16 State: CA		
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 / D D / Y Y Y Y Y Y	
Mailing Address			Amount 	
City State Zip Code		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y		
Purpose of Expenditure		Category/Type		
Name of Federal Candidate		☐ Support ☐ Oppose Office Sought: ☐ House ☐ President ☐ Senate District: _____ State: _____		
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			95747.00	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶				
(c) TOTAL Independent Expenditures..... ▶			208639.00	
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 ALVAREZ, MATTHEW C., , ,			Date M M / D D / Y Y Y Y Y Y 02 / 20 / 2024	