

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 6
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) New Leaders 2024			FEC IDENTIFICATION NUMBER ▼ C C00865352	
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on			MM / DD / YYYY	
Full Name of Payee In Field Pro		Date of Public Distribution/Dissemination MM / DD / YYYY		
Mailing Address 333 H Street Suite 5000		Amount 4027.40		
City Chula Vista	State CA	Zip Code 91910	Transaction ID : SE.4509	
Purpose of Expenditure Text Messaging		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Bresnahan, Rob, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 08 ☐ President ☐ Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought		4027.40	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	
Full Name of Payee In Field Pro		Date of Public Distribution/Dissemination MM / DD / YYYY		
Mailing Address 333 H Street Suite 5000		Amount 4403.70		
City Chula Vista	State CA	Zip Code 91910	Transaction ID : SE.4510	
Purpose of Expenditure Text Messaging		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Miller-Meeks, Mariannette Jane, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 01 ☐ President ☐ Senate State: IA	
Calendar Year-To-Date Per Election for Office Sought		4403.70	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		8431.10		
(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 Fishman, Andrew, , ,		Date MM / DD / YYYY		

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Full Name of Payee In Field Pro			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 24 / 2024	
Mailing Address 333 H Street Suite 5000			Amount 3224.00	
City Chula Vista	State CA	Zip Code 91910	Transaction ID : SE.4511	
Purpose of Expenditure Text Messaging		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 24 / 2024	
Name of Federal Candidate Bacon, Donald, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 02 ☐ President ☐ Senate State: NE	
Calendar Year-To-Date Per Election for Office Sought		3224.00	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	

Full Name of Payee In Field Pro			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 24 / 2024	
Mailing Address 333 H Street Suite 5000			Amount 3023.65	
City Chula Vista	State CA	Zip Code 91910	Transaction ID : SE.4512	
Purpose of Expenditure Text Messaging		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 24 / 2024	
Name of Federal Candidate Valadao, David, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 22 ☐ President ☐ Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought		3023.65	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	6247.65
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Fishman, Andrew, , ,

Signature

Date

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Full Name of Payee In Field Pro		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 24 / 2024
Mailing Address 333 H Street Suite 5000		Amount 4151.75
City Chula Vista	State CA	Zip Code 91910
Purpose of Expenditure Text Messaging	Category/ Type 004	Transaction ID : SE.4513 Date of Disbursement or Obligation MM / DD / YYYY 10 / 24 / 2024
Name of Federal Candidate Chavez-DeRemer, Lori, ,		☒ Support Office Sought: ☒ House District: 05 ☐ Oppose ☐ President ☐ Senate State: OR
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee Pelican Research		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 24 / 2024
Mailing Address 433 Metairie Road Suite 218		Amount 2375.00
City Metairie	State LA	Zip Code 70005
Purpose of Expenditure Text Messaging	Category/ Type 004	Transaction ID : SE.4514 Date of Disbursement or Obligation MM / DD / YYYY 10 / 24 / 2024
Name of Federal Candidate Gonzalez, Vicente, ,		☒ Support Office Sought: ☒ House District: 34 ☐ Oppose ☐ President ☐ Senate State: TX
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	6526.75
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Full Name of Payee Pelican Research		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 24 / 2024
Mailing Address 433 Metairie Road Suite 218		Amount 6189.00
City Metairie	State LA	Zip Code 70005
Purpose of Expenditure Text Messaging	Category/ Type 004	Transaction ID : SE.4515 Date of Disbursement or Obligation MM / DD / YYYY 10 / 24 / 2024
Name of Federal Candidate Lee, Susie, , ,		☒ Support ☐ Oppose Office Sought: ☒ House ☐ President ☐ Senate District: 03 State: NV
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee Pelican Research		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 24 / 2024
Mailing Address 433 Metairie Road Suite 218		Amount 2414.00
City Metairie	State LA	Zip Code 70005
Purpose of Expenditure Text Messaging	Category/ Type 004	Transaction ID : SE.4516 Date of Disbursement or Obligation MM / DD / YYYY 10 / 24 / 2024
Name of Federal Candidate Gluesenkamp Perez, Marie, , ,		☒ Support ☐ Oppose Office Sought: ☒ House ☐ President ☐ Senate District: 03 State: WA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	8603.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Full Name of Payee Pelican Research		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 24 / 2024
Mailing Address 433 Metairie Road Suite 218		Amount 2012.00
City Metairie	State LA	Zip Code 70005
Purpose of Expenditure Text Messaging	Category/ Type 004	Transaction ID : SE.4517 Date of Disbursement or Obligation MM / DD / YYYY 10 / 24 / 2024
Name of Federal Candidate Golden, Jared, , ,		☒ Support Office Sought: ☒ House District: 02 ☐ Oppose ☐ President ☐ Senate State: ME
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee Pelican Research		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 24 / 2024
Mailing Address 433 Metairie Road Suite 218		Amount 5784.00
City Metairie	State LA	Zip Code 70005
Purpose of Expenditure Text Messaging	Category/ Type 004	Transaction ID : SE.4518 Date of Disbursement or Obligation MM / DD / YYYY 10 / 24 / 2024
Name of Federal Candidate Davis, Don, , ,		☒ Support Office Sought: ☒ House District: 01 ☐ Oppose ☐ President ☐ Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	7796.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Full Name of Payee Pelican Research			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 24 / 2024	
Mailing Address 433 Metairie Road Suite 218			Amount 4427.00	
City Metairie	State LA	Zip Code 70005	Transaction ID : SE.4519	
Purpose of Expenditure Advertising		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 24 / 2024	
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		4427.00	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: ☐ 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..... ▶	4427.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	42031.50

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