

# FEC FORM 5

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

## To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation <b>The Act Now Project (dba The Center for U.S. Voters Abroad)</b>		
(b) Address (number and street) 1015 15th St NW, Suite 1000		<input type="checkbox"/> check if different than previously reported
(c) City, State and ZIP Code Washington DC 20005		3. FEC Identification Number <div> <div>C</div> <div>C90022112</div> </div>
2. Occupation and Name of Employer (for Individual Filers Only)		

4. TYPE OF REPORT (check appropriate boxes):

(a) ☐ April 15 Quarterly Report

☐ July 15 Quarterly Report☐ 24-Hour Report☐ October 15 Quarterly Report☐ 48-Hour Report☒ January 31 Year-End Report

b) Is this Report an amendment? ☒ No ☐ Yes, it amends the report filed on

5. COVERING PERIOD:

FROM

THROUGH

6. TOTAL CONTRIBUTIONS.....

A horizontal number line with tick marks. The rightmost tick mark is labeled ".00".

7. TOTAL INDEPENDENT EXPENDITURES .....

39597.03

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 any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

**SIGNATURE**

DATE \_\_\_\_\_

Lai, Deborah, , ,

Lai, Deborah, , ,

02/09/2024

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 52 U.S.C. § 30109.

For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov).

: 97 `A -G7 9 @ @ 5 B9 C I G`H9 L H`F9 @ 5 H9 8 `H C`5 `F9 D C F H Z G7 < 9 8 I @ `C F `+ 9 A -N 5 H -C B  
.

Form/Schedule: F5N  
Transaction ID :

These IEs were distributed in zero U.S. states or jurisdictions; all were distributed outside of the United States - seeking to reach American citizens living abroad; the FEC's 48-hour IE reporting guidance indicates the rule only applies when there has been distribution to at least one U.S. state or jurisdiction.

Form/Schedule:  
Transaction ID:

**SCHEDULE 5-E**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 3 OF 3  
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

The Act Now Project (dba The Center for U.S. Voters Abroad)

Full Name (Last, First, Middle Initial) of Payee  
Chong + Koster

Date of Public Distribution/Dissemination

MM / DD / YYYY  
10 / 05 / 2023

Mailing Address 1640 Rhode Island Ave NW #600

Amount

City State Zip Code  
Washington DC 20036

17818.66

Transaction ID : F57.000001

Purpose of Expenditure  
Digital ads encouraging U.S. citizens living abroad to register to voteCategory/  
TypeOffice Sought: ☐ House State: \_\_\_\_\_  
☐ Senate District: \_\_\_\_\_  
☒ PresidentName of Federal Candidate Supported or Opposed by Expenditure:  
BIDEN, JOSEPH, R, , JRCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election  
for Office Sought 17818.66Disbursement For: ☒ Primary ☐ General  
2024 ☐ Other (specify) ▶Full Name (Last, First, Middle Initial) of Payee  
Chong + Koster

Date of Public Distribution/Dissemination

MM / DD / YYYY  
10 / 05 / 2023

Mailing Address 1640 Rhode Island Ave NW #600

Amount

City State Zip Code  
Washington DC 20036

21778.37

Transaction ID : F57.000002

Purpose of Expenditure  
Digital ads encouraging U.S. citizens living abroad to register to voteCategory/  
Type 004Office Sought: ☐ House State: \_\_\_\_\_  
☐ Senate District: \_\_\_\_\_  
☒ PresidentName of Federal Candidate Supported or Opposed by Expenditure:  
TRUMP, DONALD, J, ,Check One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election  
for Office Sought 39597.03Disbursement For: ☒ Primary ☐ General  
2024 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Date of Public Distribution/Dissemination

MM / DD / YYYY

Mailing Address

Amount

City State Zip Code

Purpose of Expenditure

Category/  
TypeOffice Sought: ☐ House State: \_\_\_\_\_  
☐ Senate District: \_\_\_\_\_  
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: ☐ Support ☐ OpposeCalendar Year-To-Date Per Election  
for Office SoughtDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 39597.03

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶ 39597.03  
(carry total from last page forward to Line 7)