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

NAME OF COMMITTEE (In Full)
SFA Fund, Inc

FEC IDENTIFICATION NUMBER ▼
C C00828061

Check if [X] 24-hour report [ ] 48-hour report [X] New report [ ] Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
SHIRE STRATEGIES LLC

Mailing Address 4885 MCKNIGHT ROAD

City: PITTSBURGH State: PA Zip Code: 15237

Purpose of Expenditure: DIGITAL ADVERTISING

Category/Type: 004

Date of Public Distribution/Dissemination: 02 / 07 / 2024

Amount: 50000.00

Transaction ID : SE24.9091

Date of Disbursement or Obligation: 02 / 06 / 2024

Name of Federal Candidate: HALEY, NIKKI, , ,

[X] Support [ ] Oppose

Office Sought: [ ] House [X] President [ ] Senate District: ____ State: SC

Calendar Year-To-Date Per Election for Office Sought 2024: 3173639.42

Disbursement For: [X] Primary [ ] General [ ] Other (specify) ▶ ____

Full Name of Payee

Mailing Address

City State Zip Code

Purpose of Expenditure

Category/Type

Date of Public Distribution/Dissemination: M M / D D / Y Y Y Y

Amount

Date of Disbursement or Obligation: M M / D D / Y Y Y Y

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 ▶ 50000.00

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

(c) **TOTAL** Independent Expenditures ▶ 50000.00

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.

Reid, Katie, , ,
Signature

Date 02 / 08 / 2024