24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)		PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		
OHIO FREEDOM FUND		C C00628842
Check if 24-hour report 48-hour report New report Amends report filed on		
Full Name of Payee Medium Buying LLC		Date of Public Distribution/Dissemination
Mailing Address 815 Grandview Avenue		09
Suite 600		Amount
City State	Zip Code	53000.00
Columbus OH	43215	Transaction ID : SE.4380 Date of Disbursement or Obligation
Purpose of Expenditure Media Placement	Category/ Type 004	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Off	fice Sought: House District: 13
RYAN, TIMOTHY, , ,	X Oppose	President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	150000.00 Dis 202	sbursement For: Primary ☐ Other (specify) ☐ Other
Full Name of Payee		Date of Public Distribution/Dissemination
		M = M / D = D / Y = Y = Y
Mailing Address		Amount
City State	Zip Code	
Purpose of Expenditure	I	Date of Disbursement or Obligation
ruipose oi Experialiture	Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate	Support Of	fice Sought: House District:
	Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	Dis	sbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	·····	53000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	7 7 7
(c) TOTAL Independent Expenditures	······	53000.00
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.		
Datwyler, Thomas, , , [Electronic Signature]	ically Filed] Date	09 18 2020