

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

NAME OF COMMITTEE (In Full) MICHIGAN SUNRISE PAC			FEC IDENTIFICATION NUMBER ▼ C C00956961		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on			MM / DD / YYYY		
Full Name of Payee AMERICA MEDIA PARTNERS			Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 25 / 2026		
Mailing Address 1309 COFFEEN AVE STE 1200			Amount 98886.00		
City State Zip Code SHERIDAN WY 82801		Transaction ID : SE.4193 Date of Disbursement or Obligation MM / DD / YYYY 07 / 25 / 2026			
Purpose of Expenditure MEDIA PLACEMENT / MEDIA PRODUCTION / TEXT MESSAGING		Category/Type			
Name of Federal Candidate LAWRENCE, WILLIAM, , ,		☒ Support ☐ Oppose		Office Sought: ☒ House District: 07 ☐ President ☐ Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought		590281.00		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶	
Full Name of Payee AMERICA MEDIA PARTNERS			Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 25 / 2026		
Mailing Address 1309 COFFEEN AVE STE 1200			Amount 423333.00		
City State Zip Code SHERIDAN WY 82801		Transaction ID : SE.4194 Date of Disbursement or Obligation MM / DD / YYYY 07 / 25 / 2026			
Purpose of Expenditure MEDIA PLACEMENT / MEDIA PRODUCTION / TEXT MESSAGING		Category/Type			
Name of Federal Candidate MAASDAM, MATTHEW, , ,		☐ Support ☒ Oppose		Office Sought: ☒ House District: 07 ☐ President ☐ Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought		491395.00		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			522219.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶			522219.00		
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 MCALISTER, ROBERT, W, ,			Date MM / DD / YYYY 07 / 26 / 2026		