

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) HOUSE FREEDOM ACTION			FEC IDENTIFICATION NUMBER ▼ C C00662221		
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y					
Full Name of Payee NEIGHBORHOOD RESEARCH AND MEDIA			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 09 / 04 / 2024 M M M / D D D / Y Y Y Y Y Y		
Mailing Address PO BOX 297			Amount 33530.00		
City RODANTHE		State NC	Zip Code 27968-0297		Transaction ID : EE943B30DBC7A4DAA8F!
Purpose of Expenditure IE- PERRY- TV MARKETING		Category/ Type		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 09 / 04 / 2024 M M M / D D D / Y Y Y Y Y Y	
Name of Federal Candidate PERRY, SCOTT, , ,			☒ Support ☐ Oppose		Office Sought: ☒ House District: <u>10</u> ☐ President ☐ Senate State: <u>PA</u>
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
Full Name of Payee NEIGHBORHOOD RESEARCH AND MEDIA			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 09 / 04 / 2024 M M M / D D D / Y Y Y Y Y Y		
Mailing Address PO BOX 297			Amount 6386.34		
City RODANTHE		State NC	Zip Code 27968-0297		Transaction ID : EA789AB7DE6E349548DF
Purpose of Expenditure IE- STELSON- RADIO MARKETING		Category/ Type		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 09 / 04 / 2024 M M M / D D D / Y Y Y Y Y Y	
Name of Federal Candidate STELSON, JANELLE, , ,			☐ Support ☒ Oppose		Office Sought: ☒ House District: <u>10</u> ☐ President ☐ Senate State: <u>PA</u>
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			39916.34		
(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 BROWN, MEGAN, , ,			Date M M M / D D D / Y Y Y Y Y Y 09 / 04 / 2024 M M M / D D D / Y Y Y Y Y Y		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
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NAME OF COMMITTEE (In Full) HOUSE FREEDOM ACTION		FEC IDENTIFICATION NUMBER ▼ C C00662221
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee NEIGHBORHOOD RESEARCH AND MEDIA		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 04 / 2024
Mailing Address PO BOX 297		Amount 31180.38
City RODANTHE	State NC	Zip Code 27968-0297
Purpose of Expenditure IE- PERRY- RADIO MARKETING	Category/ Type	Transaction ID : EC683D92905124933961 Date of Disbursement or Obligation MM / DD / YYYY 09 / 04 / 2024
Name of Federal Candidate PERRY, SCOTT, , ,	☒ Support ☐ Oppose	Office Sought: ☒ House District: 10 ☐ President ☐ Senate State: PA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee NEIGHBORHOOD RESEARCH AND MEDIA		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 04 / 2024
Mailing Address PO BOX 297		Amount 29230.00
City RODANTHE	State NC	Zip Code 27968-0297
Purpose of Expenditure IE- PERRY- TV MARKETING	Category/ Type	Transaction ID : E636A226ECF704C82A28 Date of Disbursement or Obligation MM / DD / YYYY 09 / 04 / 2024
Name of Federal Candidate PERRY, SCOTT, , ,	☒ Support ☐ Oppose	Office Sought: ☒ House District: 10 ☐ President ☐ Senate State: PA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	60410.38
(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.

BROWN, MEGAN, , ,

Signature

Date

MM / DD / YYYY
09 / 04 / 2024

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 3 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) HOUSE FREEDOM ACTION		FEC IDENTIFICATION NUMBER ▼ C C00662221
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee NEIGHBORHOOD RESEARCH AND MEDIA		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 04 / 2024
Mailing Address PO BOX 297		Amount 29230.00
City RODANTHE	State NC	Zip Code 27968-0297
Purpose of Expenditure IE- STELSON- TV MARKETING	Category/ Type	Transaction ID : E8902B00A919A4625A75 Date of Disbursement or Obligation MM / DD / YYYY 09 / 04 / 2024
Name of Federal Candidate STELSON, JANELLE, , ,		Office Sought: ☒ House District: 10 ☐ President ☐ Senate State: PA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee NEIGHBORHOOD RESEARCH AND MEDIA		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 04 / 2024
Mailing Address PO BOX 297		Amount 33530.00
City RODANTHE	State NC	Zip Code 27968-0297
Purpose of Expenditure IE- STELSON- TV MARKETING	Category/ Type	Transaction ID : E0F088A73CC334BD0B87 Date of Disbursement or Obligation MM / DD / YYYY 09 / 04 / 2024
Name of Federal Candidate STELSON, JANELLE, , ,		Office Sought: ☒ House District: 10 ☐ President ☐ Senate State: PA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	62760.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	163086.72

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.

BROWN, MEGAN, , ,

Signature

Date

MM / DD / YYYY
09 / 04 / 2024