

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) MILLIONS OF MICHIGANIANS		FEC IDENTIFICATION NUMBER ▼ C C00718353
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee NEIGHBOR VOICES PAC		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 19 / 2026
Mailing Address PO BOX 288		Amount 25000.00
City McFarland	State WI	Zip Code 53558
Purpose of Expenditure Digital Content Distribution	Category/ Type 004	Transaction ID : SE.5764 Date of Disbursement or Obligation MM / DD / YYYY 08 / 11 / 2026
Name of Federal Candidate BARRETT, THOMAS MORE, , , ☐ Support ☒ Oppose		Office Sought: ☒ House District: 07 ☐ President ☐ Senate State: MI
Calendar Year-To-Date Per Election for Office Sought 25000.00		Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶

Full Name of Payee NEIGHBOR VOICES PAC		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 19 / 2026
Mailing Address PO BOX 288		Amount 25000.00
City McFarland	State WI	Zip Code 53558
Purpose of Expenditure Digital Content Distribution	Category/ Type 004	Transaction ID : SE.5765 Date of Disbursement or Obligation MM / DD / YYYY 08 / 11 / 2026
Name of Federal Candidate HUIZENG, WILLIAM P, , , ☐ Support ☒ Oppose		Office Sought: ☒ House District: 04 ☐ President ☐ Senate State: MI
Calendar Year-To-Date Per Election for Office Sought 25000.00		Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	50000.00
(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.

Soltis, Joseph, , ,
Signature

Date MM / DD / YYYY
08 / 21 / 2026

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) MILLIONS OF MICHIGANIANS		FEC IDENTIFICATION NUMBER ▼ C C00718353	
Check if ☐ 24-hour report ☒ 48-hour report		☒ New report ☐ Amends report filed on	

Full Name of Payee NEIGHBOR VOICES PAC		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 19 / 2026	
Mailing Address PO BOX 288		Amount 25000.00	
City McFarland	State WI	Zip Code 53558	Transaction ID : SE.5766
Purpose of Expenditure Digital Content Distribution		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 08 / 11 / 2026
Name of Federal Candidate EL-SAYED, ABDUL, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: MI
Calendar Year-To-Date Per Election for Office Sought		125000.00	Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure		Category/ Type	
Name of Federal Candidate		☐ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	25000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	75000.00

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.

Soltis, Joseph, , ,
Signature

Date MM / DD / YYYY
08 / 21 / 2026