

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 6
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) National Nurses United for Patient Protection		FEC IDENTIFICATION NUMBER ▼ C C00490375	
Check if ☒ 24-hour report ☐ 48-hour report		☒ New report ☐ Amends report filed on	

Full Name of Payee Middle Seat Consulting LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 21 / 2024	
Mailing Address PO Box 21600		Amount 89454.24	
City Washington	State DC	Zip Code 20009	Transaction ID : B890005
Purpose of Expenditure Ad consulting		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 21 / 2024
Name of Federal Candidate Alsobrooks, Angela, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: MD
Calendar Year-To-Date Per Election for Office Sought		962528.76	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee Middle Seat Consulting LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 21 / 2024	
Mailing Address PO Box 21600		Amount 36134.34	
City Washington	State DC	Zip Code 20009	Transaction ID : B890011
Purpose of Expenditure Ad consulting		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 21 / 2024
Name of Federal Candidate Baldwin, Tammy, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: WI
Calendar Year-To-Date Per Election for Office Sought		447509.78	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	125588.58
(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.

Kuhl, Martha, , ,

Signature

Date

MM / DD / YYYY
10 / 22 / 2024

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NAME OF COMMITTEE (In Full) National Nurses United for Patient Protection			FEC IDENTIFICATION NUMBER ▼ C C00490375		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee Middle Seat Consulting LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 21 / 2024		
Mailing Address PO Box 21600			Amount 93127.18		
City Washington		State DC	Zip Code 20009		Transaction ID : B890013
Purpose of Expenditure Ad consulting		Category/ Type 004		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 21 / 2024	
Name of Federal Candidate Brown, Sherrod, , ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: OH
Calendar Year-To-Date Per Election for Office Sought			1016242.32 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
Full Name of Payee Middle Seat Consulting LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 21 / 2024		
Mailing Address PO Box 21600			Amount 52912.98		
City Washington		State DC	Zip Code 20009		Transaction ID : B890007
Purpose of Expenditure Ad consulting		Category/ Type 004		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 21 / 2024	
Name of Federal Candidate Casey, Bob, , ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: PA
Calendar Year-To-Date Per Election for Office Sought			669219.70 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			146040.16		
(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 Kuhl, Martha, , ,			Date M M / D D / Y Y Y Y Y Y 10 / 22 / 2024		

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Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee DSPolitical		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 21 / 2024
Mailing Address 1133 15th St NW Suite 800		Amount 125000.00
City Washington	State DC	Zip Code 20005
Purpose of Expenditure TV ads	Category/ Type 004	Transaction ID : B890016 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Casey, Bob, , ,		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: PA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee Middle Seat Consulting LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 21 / 2024
Mailing Address PO Box 21600		Amount 41597.68
City Washington	State DC	Zip Code 20009
Purpose of Expenditure Ad consulting	Category/ Type 004	Transaction ID : B890009 Date of Disbursement or Obligation MM / DD / YYYY 10 / 21 / 2024
Name of Federal Candidate Gallego, Ruban, , ,		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	166597.68
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Kuhl, Martha, , ,
Signature

Date 10 / 22 / 2024

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Full Name of Payee Middle Seat Consulting LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 21 / 2024	
Mailing Address PO Box 21600			Amount 282479.73	
City Washington		State DC	Zip Code 20009	
Purpose of Expenditure Ad consulting		Category/ Type 004		Transaction ID : B890000 Date of Disbursement or Obligation MM / DD / YYYY 10 / 21 / 2024
Name of Federal Candidate Harris, Kamala, , ,			☒ Support ☐ Oppose Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: US	
Calendar Year-To-Date Per Election for Office Sought 4600403.06			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____	
Full Name of Payee DSPolitical			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 21 / 2024	
Mailing Address 1133 15th St NW Suite 800			Amount 625000.33	
City Washington		State DC	Zip Code 20005	
Purpose of Expenditure TV ads		Category/ Type 004		Transaction ID : B890015 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Harris, Kamala, , ,			☒ Support ☐ Oppose Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: US	
Calendar Year-To-Date Per Election for Office Sought 4600403.06			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			907480.06	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶				
(c) TOTAL Independent Expenditures..... ▶				
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Signature Kuhl, Martha, , ,			Date MM / DD / YYYY 10 / 22 / 2024	

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Full Name of Payee Middle Seat Consulting LLC			Date of Public Distribution/Dissemination 10 / 21 / 2024		
Mailing Address PO Box 21600			Amount 28610.84		
City Washington		State DC	Zip Code 20009		Transaction ID : B890008
Purpose of Expenditure Ad consulting		Category/ Type 004		Date of Disbursement or Obligation 10 / 21 / 2024	
Name of Federal Candidate Low, Evan, , ,			☒ Support ☐ Oppose		Office Sought: ☒ House District: <u>16</u> ☐ President ☐ Senate State: <u>CA</u>
Calendar Year-To-Date Per Election for Office Sought			252020.95 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
Full Name of Payee GetThru			Date of Public Distribution/Dissemination 10 / 21 / 2024		
Mailing Address 9450 SW Gemini Dr., PMB 79340			Amount 12181.00		
City Bearverton		State OR	Zip Code 97008		Transaction ID : B882798
Purpose of Expenditure Phone and text campaign beginning 10/21/24. Pre-payments reported on 2024 April/June reports		Category/ Type 007		Date of Disbursement or Obligation 10 / 21 / 2024	
Name of Federal Candidate Slotkin, Elissa, , ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: <u>MI</u>
Calendar Year-To-Date Per Election for Office Sought			641959.08 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			40791.84		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
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Full Name of Payee Middle Seat Consulting LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 21 / 2024	
Mailing Address PO Box 21600		Amount 55480.63	
City Washington	State DC	Zip Code 20009	Transaction ID : B890006
Purpose of Expenditure Ad consulting		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 21 / 2024
Name of Federal Candidate Slotkin, Elissa, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: MI
Calendar Year-To-Date Per Election for Office Sought		641959.08	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____

Full Name of Payee DSPolitical		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 21 / 2024	
Mailing Address 1133 15th St NW Suite 800		Amount 125000.00	
City Washington	State DC	Zip Code 20005	Transaction ID : B890017
Purpose of Expenditure TV ads		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Slotkin, Elissa, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: MI
Calendar Year-To-Date Per Election for Office Sought		641959.08	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	180480.63
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	1566978.95

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Kuhl, Martha, , ,

Signature

Date

MM / DD / YYYY
10 / 22 / 2024