## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
RESULTS FOR NC, Inc.		
	C C00545152	
	M = M / D = D / Y = Y = Y	
Check if X 24-hour report 48-hour report New report Amends report filed on		
Full Name of Payee  Media Ad Ventures	Date of Public Distribution/Dissemination	
Iviedia Ad Veritures	04 21 2022	
Mailing Address 8136 Old Keene Mill Road	Amount	
Suite A-300	Amount	
City State Zip Code	250000.00	
Springfield VA 22152	Transaction ID: SE.4410 Date of Disbursement or Obligation	
Purpose of Expenditure Media Ad Placement: Broadcast  Category/ Type	04 21 2022	
Name of Federal Candidate	ffice Sought: X House District: 11	
Cawthorn, Madison , , ,	The coagnition of the coagniti	
Оррозе	Tresident State.	
Odichdal Ical to Date	isbursement For:   ✓ Primary General  Other (specify)   ———————————————————————————————————	
Full Name of Payee	Date of Public Distribution/Dissemination	
Media Ad Ventures	04 21 2022	
Mailing Address 8136 Old Keene Mill Road	04 21 2022	
Suite A-300	Amount	
City State Zip Code	60000.00	
Springfield VA 22152	Transaction ID : SE.4411	
Purpose of Expenditure	Date of Disbursement or Obligation	
Ad Placement: Cable  Category/ Type	04 21 2022	
Name of Federal Candidate Support O	ffice Sought: 🗶 House District:11	
Cawthorn, Madison , , ,	President Senate State: NC	
	isbursement For: X Primary General	
Per Election for Office Sought 310000.00	022	
(a) SUBTOTAL of Itemized Independent Expenditures	310000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
(c) IVIAL IIIuepenueiii Expenuitules	7 7 7 7	
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.		
Reynolds Katherine N		
Reynolds, Katherine, N, , [Electronically Filed] Date	04 22 2022	
Signature		

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
RESULTS FOR NC, Inc.	C C00545152
Check if 24-hour report 48-hour report Mew report Amends report filed on Amends report filed on Amends report 148-hour report	
Full Name of Payee	Date of Public Distribution/Dissemination
Media Ad Ventures	04 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 8136 Old Keene Mill Road	Amount
Suite A-300	
City State Zip Code	8000.00
Springfield VA 22152	Transaction ID : SE.4413  Date of Disbursement or Obligation
Purpose of Expenditure Ad Production  Category/ Type	04 21 2022
Name of Federal Candidate Support Of	fice Sought: X House District: 11
Cawthorn, Madison , , ,	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought  Dis 202	sbursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	Amount
City State Zip Code	
State Zip Code	
Purpose of Expenditure	Date of Disbursement or Obligation
Category/ Type	M M / D D / Y 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	sbursement For: Primary General
	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	8000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	318000.00
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.	
Reynolds, Katherine, N, ,  [Electronically Filed] Date	M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y