

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

NAME OF COMMITTEE (In Full) HUNTER ACTION FUND (HAF)		FEC IDENTIFICATION NUMBER ▼ C C00541433
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee Caliber Contact		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 11 / 2024	
Mailing Address 300 S Washington St., Floor 3		Amount 25351.34	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.5935
Purpose of Expenditure Direct Mail	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 08 / 2024	
Name of Federal Candidate SHEEHY, TIM, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: MT
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ 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	Office Sought: ☐ House District: _____ ☐ President ☐ Senate State: _____	
Name of Federal Candidate		Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought			

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	25351.34
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	25351.34

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.

Cassidy, Benjamin, , ,

Signature

Date

MM / DD / YYYY
10 / 13 / 2024