

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

NAME OF COMMITTEE (In Full) STATE ACTION FUND PAC INC.		FEC IDENTIFICATION NUMBER ▼ C C00847145	
Check if ☐ 24-hour report ☒ 48-hour report		☐ New report	☒ Amends report filed on
		MM / DD / YYYY 09 / 26 / 2024	

Full Name of Payee DDI MEDIA		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 24 / 2024	
Mailing Address 8315 DRURY INDUSTRIAL PARKWAY		Amount 330433.33	
City ST. LOUIS	State MO	Zip Code 63114	Transaction ID : SE24.19064
Purpose of Expenditure DIGITAL MEDIA PLACEMENT		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 09 / 23 / 2024
Name of Federal Candidate ROSEN, JACKY, , ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		503120.00	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee DDI MEDIA		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 24 / 2024	
Mailing Address 8315 DRURY INDUSTRIAL PARKWAY		Amount 165216.67	
City ST. LOUIS	State MO	Zip Code 63114	Transaction ID : SE24.19065
Purpose of Expenditure DIGITAL MEDIA PLACEMENT		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 09 / 23 / 2024
Name of Federal Candidate BROWN, SAM, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		503120.00	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	495650.00
(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.

FUNDERBURK, ZAC, , ,

Signature

Date

MM / DD / YYYY
10 / 03 / 2024

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(Schedule E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) STATE ACTION FUND PAC INC.			FEC IDENTIFICATION NUMBER ▼ C C00847145		
Check if ☐ 24-hour report ☒ 48-hour report ☐ New report ☒ Amends report filed on					
		M M / D D / Y Y Y Y Y Y 09 / 26 / 2024			
Full Name of Payee AUTUMN PRODUCTIONS			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 24 / 2024		
Mailing Address PO BOX 371553			Amount 4000.00		
City LAS VEGAS		State NV	Zip Code 89137		
Purpose of Expenditure DIGITAL MEDIA PRODUCTION		Category/ Type		Transaction ID : SE24.19066 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 25 / 2024	
Name of Federal Candidate ROSEN, JACKY, , ,			☐ Support ☒ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: <u>NV</u>
Calendar Year-To-Date Per Election for Office Sought			503120.00 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
Full Name of Payee AUTUMN PRODUCTIONS			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 24 / 2024		
Mailing Address PO BOX 371553			Amount 2000.00		
City LAS VEGAS		State NV	Zip Code 89137		
Purpose of Expenditure DIGITAL MEDIA PRODUCTION		Category/ Type		Transaction ID : SE24.19067 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 25 / 2024	
Name of Federal Candidate BROWN, SAM, , ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: <u>NV</u>
Calendar Year-To-Date Per Election for Office Sought			503120.00 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			6000.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶			501650.00		
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.					
Signature FUNDERBURK, ZAC, , ,			Date M M / D D / Y Y Y Y Y Y 10 / 03 / 2024		