

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

NAME OF COMMITTEE (In Full) HOUSE FREEDOM ACTION		FEC IDENTIFICATION NUMBER ▼ C C00662221	
Check if ☐ 24-hour report ☒ 48-hour report		☒ New report ☐ Amends report filed on	

Full Name of Payee NEIGHBORHOOD RESEARCH AND MEDIA		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 21 / 2024	
Mailing Address PO BOX 297		Amount 94533.75	
City RODANTHE	State NC	Zip Code 27968-0297	Transaction ID : E8F4F426383CC465885D
Purpose of Expenditure IE-STELSON-MEDIA BUY		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 09 / 20 / 2024
Name of Federal Candidate STELSON, JANELLE, , ,		☐ Support ☒ Oppose	Office Sought: ☒ House District: 10 ☐ President ☐ Senate State: PA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	

Full Name of Payee NEIGHBORHOOD RESEARCH AND MEDIA		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 21 / 2024	
Mailing Address PO BOX 297		Amount 31511.25	
City RODANTHE	State NC	Zip Code 27968-0297	Transaction ID : EED8EB8DE86044A849DC
Purpose of Expenditure IE-PERRY-MEDIA BUY		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 09 / 20 / 2024
Name of Federal Candidate PERRY, SCOTT, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 10 ☐ President ☐ Senate State: PA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	126045.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	126045.00

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.

BROWN, MEGAN, , ,

Signature

Date

MM / DD / YYYY
09 / 20 / 2024