

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) FRONTIERS OF FREEDOM ACTION, INC.			FEC IDENTIFICATION NUMBER ▼ C C00826776	
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y				
Full Name of Payee Hanco Productions			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 23 / 2024 M M / D D / Y Y Y Y Y Y	
Mailing Address 90 Church Street Ste 44			Amount 1250.00	
City State Zip Code New York NY 10038		Transaction ID : SE.4190 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 23 / 2024 M M / D D / Y Y Y Y Y Y		
Purpose of Expenditure Digital Advertising		Category/Type 004		
Name of Federal Candidate GALLEGO, RUBEN, , ,			Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: AZ ☒ Oppose	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	
26138.00				
Full Name of Payee Hanco Productions			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 23 / 2024 M M / D D / Y Y Y Y Y Y	
Mailing Address 90 Church Street Ste 44			Amount 1250.00	
City State Zip Code New York NY 10038		Transaction ID : SE.4191 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 23 / 2024 M M / D D / Y Y Y Y Y Y		
Purpose of Expenditure Digital Advertising		Category/Type 004		
Name of Federal Candidate HEINRICH, MARTIN, , ,			Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NM ☒ Oppose	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	
10138.00				
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			2500.00	
(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.				
Signature Landrith, George, , ,			Date M M / D D / Y Y Y Y Y Y 10 / 15 / 2024 M M / D D / Y Y Y Y Y Y	

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION**Form/Schedule: F24N****Transaction ID :**

We are filing this report late due to a misunderstanding of our responsibilities. In an effort to preserve funds, we terminated our relationship with a professional services provider in 2023. Our fundraising sources were depleted and perseverance was the only option. In that condition, we overlooked our reporting obligations for political activity. We believe we have remedied these reporting failures by filing this and subsequent reports with the commission and by hiring a professional to assist us with our reporting obligations.

Form/Schedule:**Transaction ID:**

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(Schedule E)PAGE 3 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) FRONTIERS OF FREEDOM ACTION, INC.		FEC IDENTIFICATION NUMBER ▼ C C00826776	
Check if ☐ 24-hour report ☒ 48-hour report		☒ New report ☐ Amends report filed on	

Full Name of Payee Hanco Productions		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 23 / 2024	
Mailing Address 90 Church Street Ste 44		Amount 1250.00	
City New York	State NY	Zip Code 10038	Transaction ID : SE.4193
Purpose of Expenditure Digital Advertising		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 23 / 2024
Name of Federal Candidate ROSEN, JACKY, , ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		26138.00	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	
Name of Federal Candidate		☐ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1250.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	3750.00

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.

Landrith, George, , ,
Signature

Date 10 / 15 / 2024