

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

IN UNION USA

ADDRESS (number and street)

▼ Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|---|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input checked="" type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on / / in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on / / in the State of

5. Covering Period / / through / /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Fullmer, Jenna, , ,

Signature of Treasurer Fullmer, Jenna, , , Date / /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

| | | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|--|
| Office Use Only | | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|--|

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

IN UNION USA

Report Covering the Period: From: / / To: / /

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|---|---|
| 6. (a) Cash on Hand January 1, <input type="text" value="2024"/> | <input type="text" value="852996.90"/> | <input type="text" value="852996.90"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="986479.41"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="500000.00"/> | <input type="text" value="4950000.00"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="1486479.41"/> | <input type="text" value="5802996.90"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="458187.19"/> | <input type="text" value="4774704.68"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="1028292.22"/> | <input type="text" value="1028292.22"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

IN UNION USA

Report Covering the Period: From: / / To: / /

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 0.00 | 500000.00 |
| (ii) Unitemized | 0.00 | 0.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 0.00 | 500000.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 500000.00 | 4450000.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 500000.00 | 4950000.00 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received..... | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶ | 500000.00 | 4950000.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 500000.00 | 4950000.00 |

DETAILED SUMMARY PAGE

of Disbursements

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 157636.50 | 939904.40 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 157636.50 | 939904.40 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 0.00 |
| 24. Independent Expenditures (use Schedule E) | 300550.69 | 1124956.64 |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements (Including Non-Federal Donations)..... | 0.00 | 2709843.64 |
| 30. Federal Election Activity (52 U.S.C. § 30101(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 458187.19 | 4774704.68 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 458187.19 | 4774704.68 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| III. Net Contributions/ Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 500000.00 | 4950000.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 500000.00 | 4950000.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 157636.50 | 939904.40 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 157636.50 | 939904.40 |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | | |
|---|------------------------------|---|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 6 OF 12 |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
IN UNION USA

| | | |
|---|--------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. AFL-CIO COPE POLITICAL CONTRIBUTIONS COMMITTEE | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2024 |
| Mailing Address 815 16TH STREET, NW | | Transaction ID : SA11C.5211 |
| City WASHINGTON | State DC | Zip Code 20006 |
| FEC ID number of contributing federal political committee. C C00003806 | | Amount of Each Receipt this Period 50000.00 |
| Name of Employer (for Individual) | Occupation (for Individual) | <input type="checkbox"/> Memo Item Contribution |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 50000.00 | |

| | | |
|---|---------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. NEA ADVOCACY FUND | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 09 / 2024 |
| Mailing Address 1201 16TH STREET NW SUITE 418 | | Transaction ID : SA11C.5213 |
| City WASHINGTON | State DC | Zip Code 20036 |
| FEC ID number of contributing federal political committee. C C00489815 | | Amount of Each Receipt this Period 200000.00 |
| Name of Employer (for Individual) | Occupation (for Individual) | <input type="checkbox"/> Memo Item Contribution |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 450000.00 | |

| | | |
|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SEIU COPE (SERVICE EMPLOYEES INTERNATIONAL UNION COMMITTEE ON POLITICAL EDUCATION) | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2024 |
| Mailing Address 1800 MASSACHUSETTS AVE NW | | Transaction ID : SA11C.5212 |
| City WASHINGTON | State DC | Zip Code 20036 |
| FEC ID number of contributing federal political committee. C C00004036 | | Amount of Each Receipt this Period 250000.00 |
| Name of Employer (for Individual) | Occupation (for Individual) | <input type="checkbox"/> Memo Item Contribution |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ 1750000.00 | |

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 50000.00 |
| TOTAL This Period (last page this line number only)..... | 50000.00 |

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

Form with checkboxes for line numbers 21b, 22, 23, 24, 25, 26, 27, 28a, 28b, 28c, 29, 30b. 21b is checked.

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
IN UNION USA

Form A: 617 Media Group LLC. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form B: 617 Media Group LLC. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form C: Blue Compass Strategies, Inc. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

SUBTOTAL of Disbursements This Page (optional) 98200.00
TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
IN UNION USA

A. Catalist LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1310 L Street NW
Suite 500

City Washington State DC Zip Code 20005

Purpose of Disbursement
Data File 001
Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 07 / 2024

FEC Identification Number: C
Transaction ID : SB21B.5203
Amount of Each Disbursement this Period: 2092.50

Memo Item

B. Catalist LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1310 L Street NW
Suite 500

City Washington State DC Zip Code 20005

Purpose of Disbursement
Data File 001
Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 16 / 2024

FEC Identification Number: C
Transaction ID : SB21B.5204
Amount of Each Disbursement this Period: 1219.00

Memo Item

C. Devorsey, Kassia, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 180 Montague St.

City Brooklyn State NY Zip Code 11201

Purpose of Disbursement
Consulting - Political Services 001
Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 16 / 2024

FEC Identification Number: C
Transaction ID : SB21B.5209
Amount of Each Disbursement this Period: 3500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 6811.50

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
IN UNION USA

A. Lake Research Partners

Full Name (Last, First, Middle Initial)

Mailing Address 1101 17th St NW
Suite 301

City Washington State DC Zip Code 20036

Purpose of Disbursement
Polling / Research

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Date of Disbursement: 10 / 07 / 2024

FEC Identification Number: C

Transaction ID : **SB21B.5202**

Amount of Each Disbursement this Period: 21500.00

Memo Item

B. The Organizing Group, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 2010 Massachusetts Ave NW
2nd Floor

City Washington State DC Zip Code 20036

Purpose of Disbursement
Consulting - Strategy & Planning

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Date of Disbursement: 10 / 04 / 2024

FEC Identification Number: C

Transaction ID : **SB21B.5210**

Amount of Each Disbursement this Period: 30000.00

Memo Item

C. Utrecht Kleinfeld Fiori Clark Partners

Full Name (Last, First, Middle Initial)

Mailing Address 1634 Eye Street NW
Suite 1250

City Washington State DC Zip Code 20006

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Date of Disbursement: 10 / 04 / 2024

FEC Identification Number: C

Transaction ID : **SB21B.5205**

Amount of Each Disbursement this Period: 1125.00

Memo Item

| | |
|--|-----------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 52625.00 |
| TOTAL This Period (last page this line number only).....▶ | 157636.50 |

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
IN UNION USA
FEC IDENTIFICATION NUMBER
C C00745745

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Deliver Strategies, LLC
Mailing Address: PO Box 100970
City: Arlington, VA, Zip Code: 22210
Purpose of Expenditure: Direct Mail Program
Category/Type: 004
Date of Public Distribution/Dissemination: 10/03/2024
Amount: 112822.89
Transaction ID: SE.5175
Date of Disbursement or Obligation: 10/03/2024

Name of Federal Candidate: BROWN, SHERROD, , ,
Support/Oppose: Support
Office Sought: Senate
District: 00, State: OH
Calendar Year-To-Date Per Election for Office Sought: 112822.89
Disbursement For: General 2024

Full Name of Payee: Deliver Strategies, LLC
Mailing Address: PO Box 100970
City: Arlington, VA, Zip Code: 22210
Purpose of Expenditure: Direct Mail Program
Category/Type: 004
Date of Public Distribution/Dissemination: 10/03/2024
Amount: 37607.63
Transaction ID: SE.5176
Date of Disbursement or Obligation: 10/03/2024

Name of Federal Candidate: MORENO, BERNIE, , ,
Support/Oppose: Oppose
Office Sought: Senate
District: 00, State: OH
Calendar Year-To-Date Per Election for Office Sought: 150430.52
Disbursement For: General 2024

(a) SUBTOTAL of Itemized Independent Expenditures: 150430.52
(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: Fullmer, Jenna, , ,

Date: 10/22/2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
IN UNION USA
FEC IDENTIFICATION NUMBER
C C00745745

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Deliver Strategies, LLC
Mailing Address: PO Box 100970
City: Arlington, VA, Zip Code: 22210
Purpose of Expenditure: Direct Mail Program
Category/Type: 004
Date of Public Distribution/Dissemination: 10/10/2024
Amount: 75060.09
Transaction ID: SE.5188
Date of Disbursement or Obligation: 10/10/2024

Name of Federal Candidate: HARRIS, KAMALA, , ,
Support: [X] Oppose: []
Office Sought: [X] President [] House [] Senate
District: 00 State:
Calendar Year-To-Date Per Election for Office Sought: 402060.07
Disbursement For: [] Primary [X] General 2024 [] Other (specify)

Full Name of Payee: Deliver Strategies, LLC
Mailing Address: PO Box 100970
City: Arlington, VA, Zip Code: 22210
Purpose of Expenditure: Direct Mail Program
Category/Type: 004
Date of Public Distribution/Dissemination: 10/10/2024
Amount: 37530.04
Transaction ID: SE.5189
Date of Disbursement or Obligation: 10/10/2024

Name of Federal Candidate: SLOTKIN, ELISSA, , ,
Support: [X] Oppose: []
Office Sought: [X] Senate [] House [] President
District: 00 State: MI
Calendar Year-To-Date Per Election for Office Sought: 112881.70
Disbursement For: [] Primary [X] General 2024 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures: 112590.13
(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: Fullmer, Jenna, , ,

Date: 10/22/2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
IN UNION USA
FEC IDENTIFICATION NUMBER
C C00745745

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Deliver Strategies, LLC
Mailing Address: PO Box 100970
City: Arlington, VA Zip Code: 22210
Purpose of Expenditure: Direct Mail Program
Category/Type: 004
Date of Public Distribution/Dissemination: 10/10/2024
Amount: 37530.00
Transaction ID: SE.5190
Date of Disbursement or Obligation: 10/10/2024

Name of Federal Candidate: ROGERS, MICHAEL J, ,
Support: [] Oppose: [X]
Office Sought: [] House [X] Senate
District: 00 State: MI
Calendar Year-To-Date Per Election for Office Sought: 150411.74
Disbursement For: [] Primary [X] General 2024

Full Name of Payee
Mailing Address
City
State
Zip Code
Purpose of Expenditure
Category/Type
Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation

Name of Federal Candidate:
Support: [] Oppose: []
Office Sought: [] House [] Senate
District: State:
Calendar Year-To-Date Per Election for Office Sought:
Disbursement For: [] Primary [] General

Table with 2 columns: Description and Amount.
(a) SUBTOTAL of Itemized Independent Expenditures: 37530.04
(b) SUBTOTAL of Unitemized Independent Expenditures:
(c) TOTAL Independent Expenditures: 300550.69

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: Fullmer, Jenna, ,

Date: 10/22/2024