

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 8
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) RED SENATE			FEC IDENTIFICATION NUMBER ▼ C C00747121		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee GOOGLE			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 24 / 2024		
Mailing Address 1600 AMPHITHEATRE PKWY			Amount 568.73		
City State Zip Code MOUNTAIN VIEW CA 94043-1351		Transaction ID : ECB7BB0F886D1449FB0C Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y			
Purpose of Expenditure DIGITAL ADS		Category/ Type			
Name of Federal Candidate ROGERS, MIKE, , ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: MI
Calendar Year-To-Date Per Election for Office Sought 95559.56			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
Full Name of Payee NBCUNIVERSAL, LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 24 / 2024		
Mailing Address 30 ROCKEFELLER PLZ			Amount 15000.00		
City State Zip Code NEW YORK NY 10112-0015		Transaction ID : E33B7EF052E6F438695A Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 23 / 2024			
Purpose of Expenditure MEDIA PLACEMENT/VIDEO ADS		Category/ Type			
Name of Federal Candidate ALLRED, COLIN, , ,			☐ Support ☒ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: TX
Calendar Year-To-Date Per Election for Office Sought 1348428.82			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			15568.73		
(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 HANNA, MICHAEL, , ,			Date M M / D D / Y Y Y Y Y Y 10 / 25 / 2024		

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NAME OF COMMITTEE (In Full) RED SENATE	FEC IDENTIFICATION NUMBER ▼ C C00747121
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on	

Full Name of Payee GOOGLE			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 24 / 2024	
Mailing Address 1600 AMPHITHEATRE PKWY			Amount 211.02	
City MOUNTAIN VIEW	State CA	Zip Code 94043-1351	Transaction ID : E231F9954046B434182B	
Purpose of Expenditure DIGITAL ADS		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate MORENO, BERNIE, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: OH	
Calendar Year-To-Date Per Election for Office Sought		120594.28	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	

Full Name of Payee NBCUNIVERSAL, LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 24 / 2024	
Mailing Address 30 ROCKEFELLER PLZ			Amount 8400.00	
City NEW YORK	State NY	Zip Code 10112-0015	Transaction ID : EFC2919766A43423D855	
Purpose of Expenditure MEDIA PLACEMENT/VIDEO ADS		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 23 / 2024	
Name of Federal Candidate OSBORN, DAN, , ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: NE	
Calendar Year-To-Date Per Election for Office Sought		39100.00	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	8611.02
(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.

HANNA, MICHAEL, , ,

Signature

Date

MM / DD / YYYY
10 / 25 / 2024

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NAME OF COMMITTEE (In Full) RED SENATE			FEC IDENTIFICATION NUMBER ▼ C C00747121		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee GOOGLE			Date of Public Distribution/Dissemination 10 / 24 / 2024		
Mailing Address 1600 AMPHITHEATRE PKWY			Amount 2936.31		
City MOUNTAIN VIEW		State CA	Zip Code 94043-1351		Transaction ID : E697452D3A8E44B97B08
Purpose of Expenditure DIGITAL ADS		Category/ Type		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate CRUZ, TED, , ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: TX
Calendar Year-To-Date Per Election for Office Sought			1348428.82 Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶ _____		
Full Name of Payee NBCUNIVERSAL, LLC			Date of Public Distribution/Dissemination 10 / 24 / 2024		
Mailing Address 30 ROCKEFELLER PLZ			Amount 8400.00		
City NEW YORK		State NY	Zip Code 10112-0015		Transaction ID : E2279D1C7DBDF40B5AA!
Purpose of Expenditure MEDIA PLACEMENT/VIDEO ADS		Category/ Type		Date of Disbursement or Obligation 10 / 23 / 2024	
Name of Federal Candidate SLOTKIN, ELISSA, , ,			☐ Support ☒ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: MI
Calendar Year-To-Date Per Election for Office Sought			95559.56 Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			11336.31		
(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 HANNA, MICHAEL, , ,			Date 10 / 25 / 2024		

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NAME OF COMMITTEE (In Full) RED SENATE			FEC IDENTIFICATION NUMBER ▼ C C00747121		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee NBCUNIVERSAL, LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 24 / 2024		
Mailing Address 30 ROCKEFELLER PLZ			Amount 8400.00		
City NEW YORK		State NY	Zip Code 10112-0015		Transaction ID : EF3D6F6C383624F19B73 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 23 / 2024
Purpose of Expenditure MEDIA PLACEMENT/VIDEO ADS		Category/ Type			
Name of Federal Candidate CASEY, ROBERT P., JR., ,			☐ Support ☒ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 127879.79			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
Full Name of Payee GOOGLE			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 24 / 2024		
Mailing Address 1600 AMPHITHEATRE PKWY			Amount 211.02		
City MOUNTAIN VIEW		State CA	Zip Code 94043-1351		Transaction ID : E1ED14930B2FD4C16818 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Purpose of Expenditure DIGITAL ADS		Category/ Type			
Name of Federal Candidate BROWN, SHERROD, , ,			☐ Support ☒ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 120594.28			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			8611.02		
(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 HANNA, MICHAEL, , ,			Date M M / D D / Y Y Y Y Y Y 10 / 25 / 2024		

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NAME OF COMMITTEE (In Full) RED SENATE		FEC IDENTIFICATION NUMBER ▼ C C00747121
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee NBCUNIVERSAL, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 24 / 2024
Mailing Address 30 ROCKEFELLER PLZ		Amount 8400.00
City NEW YORK	State NY	Zip Code 10112-0015
Purpose of Expenditure MEDIA PLACEMENT/VIDEO ADS		Category/Type
Name of Federal Candidate BROWN, SHERROD, , ,		☐ Support ☒ Oppose
Office Sought: ☐ President ☒ Senate State: OH		District: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee GOOGLE		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 24 / 2024
Mailing Address 1600 AMPHITHEATRE PKWY		Amount 891.05
City MOUNTAIN VIEW	State CA	Zip Code 94043-1351
Purpose of Expenditure DIGITAL ADS		Category/Type
Name of Federal Candidate BALDWIN, TAMMY, , ,		☐ Support ☒ Oppose
Office Sought: ☐ President ☒ Senate State: WI		District: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	9291.05
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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HANNA, MICHAEL, , ,

Signature

Date

MM / DD / YYYY
10 / 25 / 2024

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NAME OF COMMITTEE (In Full) RED SENATE			FEC IDENTIFICATION NUMBER ▼ C C00747121		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee GOOGLE			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 24 / 2024		
Mailing Address 1600 AMPHITHEATRE PKWY			Amount 871.23		
City State Zip Code MOUNTAIN VIEW CA 94043-1351		Transaction ID : EF09A489915A344CAB41 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y			
Purpose of Expenditure DIGITAL ADS		Category/ Type			
Name of Federal Candidate CASEY, ROBERT P., JR., ,			☐ Support ☒ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 127879.79			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
Full Name of Payee NBCUNIVERSAL, LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 24 / 2024		
Mailing Address 30 ROCKEFELLER PLZ			Amount 8400.00		
City State Zip Code NEW YORK NY 10112-0015		Transaction ID : ECF49448C25184CF2989 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 23 / 2024			
Purpose of Expenditure MEDIA PLACEMENT/VIDEO ADS		Category/ Type			
Name of Federal Candidate BALDWIN, TAMMY, , ,			☐ Support ☒ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 121428.39			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			9271.23		
(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.					
HANNA, MICHAEL, , , Signature			Date M M / D D / Y Y Y Y Y Y 10 / 25 / 2024		

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NAME OF COMMITTEE (In Full) RED SENATE			FEC IDENTIFICATION NUMBER ▼ C C00747121		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee GOOGLE			Date of Public Distribution/Dissemination 10 / 24 / 2024		
Mailing Address 1600 AMPHITHEATRE PKWY			Amount 891.05		
City MOUNTAIN VIEW		State CA	Zip Code 94043-1351		Transaction ID : E3EDA9D111AA34D79B38
Purpose of Expenditure DIGITAL ADS		Category/ Type		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate HOVDE, ERIC, , ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: <u>WI</u>
Calendar Year-To-Date Per Election for Office Sought			121428.39 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
Full Name of Payee GOOGLE			Date of Public Distribution/Dissemination 10 / 24 / 2024		
Mailing Address 1600 AMPHITHEATRE PKWY			Amount 568.72		
City MOUNTAIN VIEW		State CA	Zip Code 94043-1351		Transaction ID : E2106CD24BF984573A65
Purpose of Expenditure DIGITAL ADS		Category/ Type		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate SLOTKIN, ELISSA, , ,			☐ Support ☒ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: <u>MI</u>
Calendar Year-To-Date Per Election for Office Sought			95559.56 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			1459.77		
(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 HANNA, MICHAEL, , ,			Date 10 / 25 / 2024		

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NAME OF COMMITTEE (In Full) RED SENATE			FEC IDENTIFICATION NUMBER ▼ C C00747121		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on / /					
Full Name of Payee GOOGLE			Date of Public Distribution/Dissemination / / 10 / 24 / 2024		
Mailing Address 1600 AMPHITHEATRE PKWY			Amount 871.23		
City MOUNTAIN VIEW		State CA	Zip Code 94043-1351		Transaction ID : EB1A622192C484270B88
Purpose of Expenditure DIGITAL ADS		Category/ Type		Date of Disbursement or Obligation / /	
Name of Federal Candidate MCCORMICK, DAVE, , ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 127879.79			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
Full Name of Payee GOOGLE			Date of Public Distribution/Dissemination / / 10 / 24 / 2024		
Mailing Address 1600 AMPHITHEATRE PKWY			Amount 2936.30		
City MOUNTAIN VIEW		State CA	Zip Code 94043-1351		Transaction ID : E2C34EC39F09342DA962
Purpose of Expenditure DIGITAL ADS		Category/ Type		Date of Disbursement or Obligation / /	
Name of Federal Candidate ALLRED, COLIN, , ,			☐ Support ☒ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: TX
Calendar Year-To-Date Per Election for Office Sought 1348428.82			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			3807.53		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶			67956.66		
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 HANNA, MICHAEL, , ,			Date / / 10 / 25 / 2024		