

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

NAME OF COMMITTEE (In Full) TAKE BACK YOUR LIBERTY			FEC IDENTIFICATION NUMBER ▼ C C00867861		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on MM / DD / YYYY					
Full Name of Payee Cascade Printing			Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 11 / 2024		
Mailing Address 6504 28th St SE Ste A			Amount 8829.72		
City Grand Rapids		State MI	Zip Code 49546		Transaction ID : SE.4214
Purpose of Expenditure Direct Mail		Category/ Type		Date of Disbursement or Obligation MM / DD / YYYY 06 / 17 / 2024	
Name of Federal Candidate AMASH, JUSTIN, ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: MI
Calendar Year-To-Date Per Election for Office Sought 432991.71			Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶ _____		
Full Name of Payee United States Postal Service			Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 11 / 2024		
Mailing Address 3665 28th St SE Ste 6F			Amount 13073.34		
City Grand Rapids		State MI	Zip Code 49512		Transaction ID : SE.4215
Purpose of Expenditure Postage		Category/ Type		Date of Disbursement or Obligation MM / DD / YYYY 06 / 17 / 2024	
Name of Federal Candidate AMASH, JUSTIN, ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: MI
Calendar Year-To-Date Per Election for Office Sought 336549.74			Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			21903.06		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶			21903.06		
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 Thornton, Angela, , ,			Date MM / DD / YYYY 07 / 13 / 2024		