

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 1 OF 5  
FOR SE OF FORM 24/48

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                            |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>National Association of Realtors Congressional Fund</b>                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                                                                                                                                                                                            | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00488742</div>                                                                                                                                                                                                  |  |
| Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div> |  |                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                            |  |
| Full Name of Payee<br>Fenn Communications Group                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                            | Date of Public Distribution/Dissemination<br><div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div><br>09 / 25 / 2024 |  |
| Mailing Address 2715 M St NW<br>Ste 150                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                                                                                                            | Amount<br><div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div><br>674550.00                                                                                                                                                                                                                            |  |
| City Washington      State DC      Zip Code 20007-3733                                                                                                                                                                                                                                                                                                                                                                                                                         |  | Transaction ID : EBC9805BC0DD34DB995E<br>Date of Disbursement or Obligation<br><div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div> |                                                                                                                                                                                                                                                                                                                                            |  |
| Purpose of Expenditure<br>Satellite TV ad buy                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | Category/Type <div style="display: inline-block; border-bottom: 1px solid black; width: 60px;"></div>                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                            |  |
| Name of Federal Candidate<br>Brown, Sherrod, , Sen.,                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                                                                                                                                                                                                                                                                                                                                                            | Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: OH                                                                                                                                                   |  |
| Calendar Year-To-Date<br>Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 2396881.58                                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                                                                                            | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2024 <input type="checkbox"/> Other (specify) ▶                                                                                                                                                                                          |  |
| Full Name of Payee<br>Clean Sweep Campaigns                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                                                                                            | Date of Public Distribution/Dissemination<br><div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div><br>09 / 25 / 2024 |  |
| Mailing Address 50 Osgood Pl<br>Fl 4                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                                                                                                                                                                                                                                                                                                                                                            | Amount<br><div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div><br>651801.58                                                                                                                                                                                                                            |  |
| City San Francisco      State CA      Zip Code 94133-4622                                                                                                                                                                                                                                                                                                                                                                                                                      |  | Transaction ID : ECF95545A55364E39BB9<br>Date of Disbursement or Obligation<br><div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div> |                                                                                                                                                                                                                                                                                                                                            |  |
| Purpose of Expenditure<br>Direct mail costs                                                                                                                                                                                                                                                                                                                                                                                                                                    |  | Category/Type <div style="display: inline-block; border-bottom: 1px solid black; width: 60px;"></div>                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                            |  |
| Name of Federal Candidate<br>Brown, Sherrod, , Sen.,                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                                                                                                                                                                                                                                                                                                                                                            | Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: OH                                                                                                                                                   |  |
| Calendar Year-To-Date<br>Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 2396881.58                                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                                                                                            | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2024 <input type="checkbox"/> Other (specify) ▶                                                                                                                                                                                          |  |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                            | <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 1326351.58                                                                                                                                                                                                                                        |  |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                                                                                            | <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>                                                                                                                                                                                                                                                   |  |
| (c) TOTAL Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                                                                                                                                                                                            | <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>                                                                                                                                                                                                                                                   |  |
| 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 <u>Hrabcak, Gregory, J, Mr.,</u>                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                                                                                                                                                                                                                                                                                                                                            | Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div><br>09 / 27 / 2024                                         |  |

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**(Schedule E)**PAGE 2 OF 5  
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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>National Association of Realtors Congressional Fund</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                            | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00488742</div>                                                                                                                                                                                                         |  |                                                                                                                                                                |
| Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                |
| Full Name of Payee<br>Fenn Communications Group                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                                                                                                                                                                                                                                                                                            | Date of Public Distribution/Dissemination<br><div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div><br>09 / 25 / 2024 |  |                                                                                                                                                                |
| Mailing Address 2715 M St NW<br>Ste 150                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                                                                                                                                                                                                                                                                                            | Amount<br><div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div><br>1064850.00                                                                                                                                                                                                                           |  |                                                                                                                                                                |
| City Washington      State DC      Zip Code 20007-3733                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | Transaction ID : EA3EECAF1FA27498FAE5<br>Date of Disbursement or Obligation<br><div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div> |                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                |
| Purpose of Expenditure<br>Digital ad buys                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  | Category/<br>Type <div style="display: inline-block; border-bottom: 1px solid black; width: 60px;"></div>                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                |
| Name of Federal Candidate<br>Brown, Sherrod, , Sen.,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                                                                                                                                                                                                                                                                                                                                            | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                                                                                                                                                                                                             |  | Office Sought: <input type="checkbox"/> House    District: _____<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: OH |
| Calendar Year-To-Date<br>Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 2396881.58                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                                                                                            | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2024 <input type="checkbox"/> Other (specify) ▶ _____                                                                                                                                                                                    |  |                                                                                                                                                                |
| Full Name of Payee<br>Yang Strategic Research LLC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                                                                                                            | Date of Public Distribution/Dissemination<br><div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div><br>09 / 25 / 2024 |  |                                                                                                                                                                |
| Mailing Address 1724 Connecticut Ave NW                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                                                                                                                                                                                                                                                                                            | Amount<br><div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div><br>2800.00                                                                                                                                                                                                                              |  |                                                                                                                                                                |
| City Washington      State DC      Zip Code 20009-1103                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | Transaction ID : E42B5EDA5FE804015BBE<br>Date of Disbursement or Obligation<br><div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div> |                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                |
| Purpose of Expenditure<br>Public opinion poll                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | Category/<br>Type <div style="display: inline-block; border-bottom: 1px solid black; width: 60px;"></div>                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                |
| Name of Federal Candidate<br>Brown, Sherrod, , Sen.,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                                                                                                                                                                                                                                                                                                                                            | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                                                                                                                                                                                                             |  | Office Sought: <input type="checkbox"/> House    District: _____<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: OH |
| Calendar Year-To-Date<br>Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 2396881.58                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                                                                                            | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2024 <input type="checkbox"/> Other (specify) ▶ _____                                                                                                                                                                                    |  |                                                                                                                                                                |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                                                                                                                                                                                                                                                                                            | <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div><br>1067650.00                                                                                                                                                                                                                                     |  |                                                                                                                                                                |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                                                                                            | <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>                                                                                                                                                                                                                                                   |  |                                                                                                                                                                |
| (c) TOTAL Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                            | <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>                                                                                                                                                                                                                                                   |  |                                                                                                                                                                |
| 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.<br><br><div style="display: flex; justify-content: space-between;"><div style="width: 40%;">Signature<br/><br/>Hrabcak, Gregory, J, Mr.,</div><div style="width: 20%; text-align: center;">Date</div><div style="width: 40%; text-align: center;"><div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div><br/>09 / 27 / 2024</div></div> |  |                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                |

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 3 OF 5  
FOR SE OF FORM 24/48

|                                                                                                     |  |                                                                                                |  |
|-----------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>National Association of Realtors Congressional Fund</b>           |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00488742                                              |  |
| Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report |  | <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  |

|                                                         |             |                                                                                |                                                                                                                                                          |
|---------------------------------------------------------|-------------|--------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br>National Association of REALTORS  |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>09 / 25 / 2024  |                                                                                                                                                          |
| Mailing Address 430 N Michigan Ave                      |             | Amount<br>2880.00                                                              |                                                                                                                                                          |
| City<br>Chicago                                         | State<br>IL | Zip Code<br>60611-4011                                                         | Transaction ID : E5E076F07F5F94723A59                                                                                                                    |
| Purpose of Expenditure<br>Administrative Consulting     |             | Category/<br>Type                                                              | Date of Disbursement or Obligation<br>MM / DD / YYYY                                                                                                     |
| Name of Federal Candidate<br>Brown, Sherrod, , Sen.,    |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: OH |
| Calendar Year-To-Date<br>Per Election for Office Sought |             | 2396881.58                                                                     | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2024 <input type="checkbox"/> Other (specify) ▶        |

|                                                         |             |                                                                                |                                                                                                                                                       |
|---------------------------------------------------------|-------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br>Fenn Communications Group         |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>09 / 25 / 2024  |                                                                                                                                                       |
| Mailing Address 2715 M St NW<br>Ste 150                 |             | Amount<br>282491.00                                                            |                                                                                                                                                       |
| City<br>Washington                                      | State<br>DC | Zip Code<br>20007-3733                                                         | Transaction ID : EFF1691C82B8B44AEBD8                                                                                                                 |
| Purpose of Expenditure<br>Digital ad buys               |             | Category/<br>Type                                                              | Date of Disbursement or Obligation<br>MM / DD / YYYY                                                                                                  |
| Name of Federal Candidate<br>Davis, Don, , Rep.,        |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 01<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: NC |
| Calendar Year-To-Date<br>Per Election for Office Sought |             | 1141173.73                                                                     | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2024 <input type="checkbox"/> Other (specify) ▶     |

|                                                            |           |
|------------------------------------------------------------|-----------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶    | 285371.00 |
| (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.

Hrabcak, Gregory, J, Mr.,

Signature

Date

MM / DD / YYYY  
09 / 27 / 2024

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**(Schedule E)**PAGE 4 OF 5  
FOR SE OF FORM 24/48

|                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                                                                                                                                                                            |                                                                                                                                                                |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>National Association of Realtors Congressional Fund</b>                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                            | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00488742</div>                      |  |
| Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div>                                                          |  |                                                                                                                                                                                                                                            |                                                                                                                                                                |  |
| Full Name of Payee<br>Fenn Communications Group                                                                                                                                                                                                                                                                                                             |  |                                                                                                                                                                                                                                            | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div><br>09 / 25 / 2024 |  |
| Mailing Address 2715 M St NW<br>Ste 150                                                                                                                                                                                                                                                                                                                     |  |                                                                                                                                                                                                                                            | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">449819.00</div>                                                           |  |
| City Washington      State DC      Zip Code 20007-3733                                                                                                                                                                                                                                                                                                      |  | Transaction ID : EE03FB4E59EAB4CA0A33<br>Date of Disbursement or Obligation<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div>                                                             |                                                                                                                                                                |  |
| Purpose of Expenditure<br>Cable/Satellite TV ad buy                                                                                                                                                                                                                                                                                                         |  | Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>                                                                                                                                            |                                                                                                                                                                |  |
| Name of Federal Candidate<br>Davis, Don, , Rep.,                                                                                                                                                                                                                                                                                                            |  | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input checked="" type="checkbox"/> House    District: 01<br><input type="checkbox"/> President <input type="checkbox"/> Senate    State: NC |                                                                                                                                                                |  |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |  | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2024 <input type="checkbox"/> Other (specify) ▶                                                                                          |                                                                                                                                                                |  |
| Full Name of Payee<br>National Association of REALTORS                                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                                                                            | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div><br>09 / 25 / 2024 |  |
| Mailing Address 430 N Michigan Ave                                                                                                                                                                                                                                                                                                                          |  |                                                                                                                                                                                                                                            | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">1440.00</div>                                                             |  |
| City Chicago      State IL      Zip Code 60611-4011                                                                                                                                                                                                                                                                                                         |  | Transaction ID : E27181FE74E8E4AD7BA2<br>Date of Disbursement or Obligation<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div>                                                             |                                                                                                                                                                |  |
| Purpose of Expenditure<br>Administrative Consulting                                                                                                                                                                                                                                                                                                         |  | Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>                                                                                                                                            |                                                                                                                                                                |  |
| Name of Federal Candidate<br>Davis, Don, , Rep.,                                                                                                                                                                                                                                                                                                            |  | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input checked="" type="checkbox"/> House    District: 01<br><input type="checkbox"/> President <input type="checkbox"/> Senate    State: NC |                                                                                                                                                                |  |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |  | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2024 <input type="checkbox"/> Other (specify) ▶                                                                                          |                                                                                                                                                                |  |
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                             |  |                                                                                                                                                                                                                                            | <div style="border: 1px solid black; padding: 2px; display: inline-block;">451259.00</div>                                                                     |  |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                          |  |                                                                                                                                                                                                                                            | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>                                                                              |  |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                                                                            | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>                                                                              |  |
| 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<br><br>Hrabcak, Gregory, J, Mr.,                                                                                                                                                                                                                                                                                                                  |  |                                                                                                                                                                                                                                            | Date<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div><br>09 / 27 / 2024                                      |  |

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 5 OF 5  
FOR SE OF FORM 24/48

|                                                                                                                                                                                                    |  |                                                   |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>National Association of Realtors Congressional Fund</b>                                                                                                          |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00488742 |
| Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  | MM / DD / YYYY                                    |

|                                                         |                   |                                                                                                                                                       |
|---------------------------------------------------------|-------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br>National Association of REALTORS  |                   | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>09 / 28 / 2024                                                                         |
| Mailing Address 430 N Michigan Ave                      |                   | Amount<br>480.00                                                                                                                                      |
| City<br>Chicago                                         | State<br>IL       | Zip Code<br>60611-4011                                                                                                                                |
| Purpose of Expenditure<br>Administrative Consulting     | Category/<br>Type | Transaction ID : E12873BE6F1E747319D2<br>Date of Disbursement or Obligation<br>MM / DD / YYYY                                                         |
| Name of Federal Candidate<br>Valadao, David, , Rep.,    |                   | Office Sought: <input checked="" type="checkbox"/> House District: 22<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: CA |
| Calendar Year-To-Date<br>Per Election for Office Sought |                   | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2024 <input type="checkbox"/> Other (specify) ▶     |

|                                                         |                   |                                                                                                                                                       |
|---------------------------------------------------------|-------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br>M2 PLACEMENT LLC                  |                   | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>09 / 28 / 2024                                                                         |
| Mailing Address 10065 E HARVARD AVE<br>SUITE400         |                   | Amount<br>44600.00                                                                                                                                    |
| City<br>Denver                                          | State<br>CO       | Zip Code<br>80231-5968                                                                                                                                |
| Purpose of Expenditure<br>Radio Ad buys                 | Category/<br>Type | Transaction ID : E351F3807B3ED4F17ACD<br>Date of Disbursement or Obligation<br>MM / DD / YYYY                                                         |
| Name of Federal Candidate<br>Valadao, David, , Rep.,    |                   | Office Sought: <input checked="" type="checkbox"/> House District: 22<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: CA |
| Calendar Year-To-Date<br>Per Election for Office Sought |                   | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2024 <input type="checkbox"/> Other (specify) ▶     |

|                                                             |            |
|-------------------------------------------------------------|------------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶    | 45080.00   |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶ |            |
| (c) TOTAL Independent Expenditures..... ▶                   | 3175711.58 |

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.

Hrabcak, Gregory, J, Mr.,

Signature

Date

MM / DD / YYYY  
09 / 27 / 2024