24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48				
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼				
FIX WASHINGTON PAC					
	C C00870592				
	M M M / D D / Y Y Y Y				
Check if 24-hour report X 48-hour report New	report Amends report filed on				
Full Name of Payee INVICTUS ADVERTISING	Date of Public Distribution/Dissemination				
INVICTOS ADVERTISING	05 07 7 2024				
Mailing Address 16192 COASTAL HIGHWAY	Amount				
City State	Zip Code 227361.50				
LEWES DE	19958 Transaction ID: SE24.15960 Date of Disbursement or Obligation				
Purpose of Expenditure	Category/ M M / D D / Y Y Y Y				
DIGITAL MEDIA PLACEMENT	Type 05 07 2024				
Name of Federal Candidate	Support Office Sought: House District:				
HOVDE, ERIC, , ,	Oppose President Senate State: WI				
Calendar Year-To-Date	Disbursement For: Primary General 2024				
Per Election for Office Sought	Other (specify) ▶				
Full Name of Payee	Date of Public Distribution/Dissemination				
INVICTUS ADVERTISING	05 07 2024				
Mailing Address 16192 COASTAL HIGHWAY	00 01 2024				
10102 00/101/12 1110110/1	Amount				
City State	Zip Code 227361.50				
LEWES DE	19958 Transaction ID : SE24.15961				
Purpose of Expenditure	Date of Disbursement or Obligation				
DIGITAL MEDIA PLACEMENT	Category/ Type 05 07 2024				
Name of Federal Candidate	Support Office Sought: House District:				
BALDWIN, TAMMY, , ,	Oppose President Senate State: WI				
Calendar Year-To-Date	Disbursement For: Primary General				
Per Election for Office Sought	1706970.75 2024 Other (specify) ▶				
(a) SUBTOTAL of Itemized Independent Expenditures	454723.00				
	4 1 4				
(b) SUBTOTAL of Unitemized Independent Expenditures					
	49- 49- 49-				
(c) TOTAL Independent Expenditures					
	792 792 792				
Under panalty of pariury Loartify that the independent expendit	tures reported herein were not made in cooncration consultation or consult				
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.					
FISHER, JEDIDIAH, , ,	Date 05 09 7 2024				
Signature					

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	OTIES	PAGE 2 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
FIX WASHINGTON PAC		C C00870592
Check if 24-hour report X 48-hour report New report	t Amends report filed on	M = M / D = D / Y = Y = Y
Full Name of Payee	Dat	e of Public Distribution/Dissemination
SRCP MEDIA, INC.		05 07 2024
Mailing Address 201 N. UNION ST	Am	ount
SUITE 200		
	ip Code	2212.00
		nsaction ID : SE24.15962 e of Disbursement or Obligation
Purpose of Expenditure MEDIA PRODUCTION	Category/ Type	05 07 2024
<u> </u>		
Name of Federal Candidate HOVDE, ERIC, , ,	Support Office Sou	\\
HOVDE, ERIO, , ,	Oppose Pres	sident X Senate State: WI
Calendar Year-To-Date Per Election for Office Sought	706970.75 Disbursem 2024	ent For:
Full Name of Payee	Dai	te of Public Distribution/Dissemination
SRCP MEDIA, INC.		05 07 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 201 N. UNION ST		
SUITE 200	Am	ount
City State Z	Zip Code	2212.00
ALEXANDRIA VA 2		nsaction ID : SE24.15963 te of Disbursement or Obligation
Purpose of Expenditure	Category/	M - M / D - D / Y - Y - Y - Y
MEDIA PRODUCTION	Type	05 07 2024
Name of Federal Candidate	Support Office Sou	
BALDWIN, TAMMY, , ,	Oppose Pres	sident X Senate State: WI
Calendar Year-To-Date Per Election for Office Sought	706970.75 Disbursem 2024	nent For:
(a) SUBTOTAL of Itemized Independent Expenditures	······································	4424.00
(b) SUBTOTAL of Unitemized Independent Expenditures	······	
(c) TOTAL Independent Expenditures		
·	,	
Under penalty of perjury I certify that the independent expenditures rewith, or at the request or suggestion of, any candidate or authorized coparty committee) any political party committee or its agent.		
FISHER, JEDIDIAH, , ,	Date 05	09 2024
Signature		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 3 OF 4 FOR SE OF FORM 24/48				
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼				
FIX WASHINGTON PAC	C C00870592				
Check if 24-hour report X 48-hour report A	mends report filed on				
Full Name of Payee	Date of Public Distribution/Dissemination				
SRCP MEDIA, INC.	05 07 2024				
Mailing Address 201 N. UNION ST	Amount				
SUITE 200					
City State Zip Code	34745.00				
ALEXANDRIA VA 22314	Transaction ID : SE24.15958 Date of Disbursement or Obligation				
Purpose of Expenditure Category	// M M / D D / Y Y Y Y				
MEDIA PRODUCTION Type	e 05 07 2024				
Name of Federal Candidate	Support Office Sought: House District:				
BALDWIN, TAMMY, , ,	Oppose President Senate State: WI				
Calendar Year-To-Date Per Election for Office Sought 1706970.7	Disbursement For:				
Full Name of Payee	Date of Public Distribution/Dissemination				
SRCP MEDIA, INC.	05 / 07 / 2024				
Mailing Address 201 N. UNION ST	Amount				
SUITE 200					
City State Zip Code					
ALEXANDRIA VA 22314	Transaction ID : SE24.15959 Date of Disbursement or Obligation				
Purpose of Expenditure MEDIA PRODUCTION Category Type					
Name of Federal Candidate	Support Office Sought: House District:				
HOVDE, ERIC, , ,	Oppose President Senate State: WI				
Calendar Year-To-Date Per Election for Office Sought 1706970.7	Disbursement For: Primary General 2024 Other (specify)				
(a) SUBTOTAL of Itemized Independent Expenditures	69490.00				
(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.					
FISHER, JEDIDIAH, , , Signature	Date 05 09 2024				

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	ZENT EXILIND	TIONEO		PAGE 4 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			F	EC IDENTIFICATION NUMBER ▼
FIX WASHINGTON PAC				C00870592
Check if 24-hour report X 48-hour report	New rep	port Amends repo	ort filed on	M / D = D / Y = Y = Y
Full Name of Payee			Date of	Public Distribution/Dissemination
TOTAL VIDEO PLACEMENTS			M OS	
Mailing Address PO BOX 90			Amount	
City	State	Zip Code		478734.38
MOUNT VERNON	VA	22121		tion ID : SE24.15956 Disbursement or Obligation
Purpose of Expenditure		Category/	Date of	
MEDIA PLACEMENT		Type	0	
Name of Federal Candidate		X Support	Office Sought:	House District:
HOVDE, ERIC, , ,		Oppose	President	Senate State: WI
Calendar Year-To-Date Per Election for Office Sought		1706970.75	Disbursement F 2024 Othe	for:
Full Name of Payee				Public Distribution/Dissemination
TOTAL VIDEO PLACEMENTS			Date of	M / D D / Y Y Y Y
Mailing Address PO BOX 90				5 07 2024
Mailing Address PO BOX 90			Amount	
City	State	Zip Code		478734.37
MOUNT VERNON	VA	22121		ion ID : SE24.15957 Disbursement or Obligation
Purpose of Expenditure MEDIA PLACEMENT		Category/ Type	M Os	06 / 2024
Name of Federal Candidate		Cupport	Office Sought:	House Dietriet:
BALDWIN, TAMMY, , ,		Support Oppose	Office Sought:	House District:
Calendar Year-To-Date			Disbursement F	
Per Election for Office Sought		1706970.75	2024 Oth	er (specify) >
(a) SUBTOTAL of Itemized Independent Exper	ditures		·· •	957468.75
(b) SUBTOTAL of Unitemized Independent Exp	oenditures		·· •	7 1 7 1 7
(a) TOTAL landers and set Force of these				
(c) TOTAL Independent Expenditures			·· •	1486105.75
Under penalty of perjury I certify that the indep with, or at the request or suggestion of, any ca party committee) any political party committee of	indidate or authorized			
FISHER, JEDIDIAH, , ,		Date	0.5	09 2024
Signature			ا لتا ا	