

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

NAME OF COMMITTEE (In Full) MICHIGAN SUNRISE PAC			FEC IDENTIFICATION NUMBER ▼ C C00956961		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on / /					
Full Name of Payee TIMBERLINE POINT LLC			Date of Public Distribution/Dissemination / /		
Mailing Address 1621 CENTRAL AVE			Amount 68062.00		
City CHEYENNE		State WY	Zip Code 82001		Transaction ID : SE.4197
Purpose of Expenditure PRINTING / POSTAGE		Category/ Type		Date of Disbursement or Obligation / /	
Name of Federal Candidate LAWRENCE, WILLIAM, , ,			☒ Support ☐ Oppose		Office Sought: ☒ House District: 07 ☐ President ☐ Senate State: MI
Calendar Year-To-Date Per Election for Office Sought			658343.00		
Disbursement For: ☒ Primary ☐ General			2026 ☐ Other (specify) ▶		
Full Name of Payee			Date of Public Distribution/Dissemination		
Mailing Address			Amount		
City		State	Zip Code		Date of Disbursement or Obligation
Purpose of Expenditure		Category/ Type		/ /	
Name of Federal Candidate			☐ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☐ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶ 68062.00 (b) SUBTOTAL of Unitemized Independent Expenditures ▶ (c) TOTAL Independent Expenditures..... ▶ 68062.00					
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 MCALISTER, ROBERT, W, ,			Date / /		