

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

NAME OF COMMITTEE (In Full) A Stronger Michigan			FEC IDENTIFICATION NUMBER ▼ C C00952259		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on			MM / DD / YYYY		
Full Name of Payee AL Media			Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 21 / 2026		
Mailing Address 222 West Ontario Street Ste 600			Amount 300000.00		
City Chicago		State IL	Zip Code 60654	Transaction ID : SE.4232	
Purpose of Expenditure Digital Advertising		Category/ Type	004	Date of Disbursement or Obligation MM / DD / YYYY 07 / 22 / 2026	
Name of Federal Candidate Stevens, Haley, , ,			☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶		
Full Name of Payee Waterfront Strategies			Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 23 / 2026		
Mailing Address PO Box 771733			Amount 2382047.50		
City St. Louis		State MO	Zip Code 63177	Transaction ID : SE.4233	
Purpose of Expenditure Media Buy - Television Advertising		Category/ Type	004	Date of Disbursement or Obligation MM / DD / YYYY 07 / 22 / 2026	
Name of Federal Candidate Stevens, Haley, , ,			☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			2682047.50		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶			2682047.50		
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 Hudson, Melanie, , ,			Date MM / DD / YYYY 07 / 22 / 2026		