

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) VoteVets		FEC IDENTIFICATION NUMBER ▼ C C00418897	
Check if ☒ 24-hour report ☐ 48-hour report		☒ New report ☐ Amends report filed on	

Full Name of Payee Backstory Strategies LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 03 / 2024	
Non-Contribution Account		Amount 5149.08	
Mailing Address 1010 8th St NE # 1		Transaction ID : 500011410	
City Washington State DC Zip Code 20002-3621		Date of Disbursement or Obligation MM / DD / YYYY 09 / 03 / 2024	
Purpose of Expenditure TV Advertising Production		Category/Type 004	
Name of Federal Candidate VAN OSTERN, KEVIN, COLIN, ,		☐ Support ☒ Oppose	
Office Sought: ☒ House District: 02 ☐ President ☐ Senate State: NH		Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought		913936.92	

Full Name of Payee Targeted Platform Media, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 03 / 2024	
Mailing Address 1291 Hollywood Ave		Amount 150000.00	
City Annapolis State MD Zip Code 21403-4909		Transaction ID : 500011391	
Purpose of Expenditure TV Advertising Buy		Date of Disbursement or Obligation MM / DD / YYYY 08 / 29 / 2024	
Category/Type 004		Name of Federal Candidate VAN OSTERN, KEVIN, COLIN, ,	
Office Sought: ☒ House District: 02 ☐ President ☐ Senate State: NH		☐ Support ☒ Oppose	
Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶		Calendar Year-To-Date Per Election for Office Sought	
913936.92			

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	155149.08
(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.

Hegdahl, Rick, , ,

Signature

Date

MM / DD / YYYY
09 / 04 / 2024

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(Schedule E)PAGE 2 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) VoteVets		FEC IDENTIFICATION NUMBER ▼ C C00418897
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee Targeted Platform Media, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 03 / 2024	
Non-Contribution Account		Amount 300000.00	
Mailing Address 1291 Hollywood Ave		Transaction ID : 500011406	
City Annapolis	State MD	Zip Code 21403-4909	Date of Disbursement or Obligation MM / DD / YYYY 08 / 29 / 2024
Purpose of Expenditure TV Advertising Buy		Category/ Type 004	
Name of Federal Candidate VAN OSTERN, KEVIN, COLIN, ,		☐ Support ☒ Oppose	Office Sought: ☒ House District: 02 ☐ President ☐ Senate State: NH
Calendar Year-To-Date Per Election for Office Sought		913936.92	Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY
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..... ▶	300000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	455149.08

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.

Hegdahl, Rick, , ,

Signature

Date

MM / DD / YYYY
09 / 04 / 2024