

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

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                         |                                                                                                                                                       |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>SCHOOL FREEDOM FUND</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                                                                                                                                                                                                                                              | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00794396</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: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                         |                                                                                                                                                       |  |
| Full Name of Payee<br>Club for Growth                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                                                                                                                                                                                                                                              | Date of Public Distribution/Dissemination<br><div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">09 / 30 / 2024</div> |                                                                                                                                                       |  |
| Mailing Address 2001 L St., NW, Ste. 600                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                                              | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">284.67</div>                                                                                                                                                                                       |                                                                                                                                                       |  |
| City State Zip Code<br>Washington DC 20036                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | Transaction ID : SE.5576<br>Date of Disbursement or Obligation<br><div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">09 / 30 / 2024</div> |                                                                                                                                                                                                                                                                                         |                                                                                                                                                       |  |
| Purpose of Expenditure<br>TV ad production (from advance line 21)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | Category/<br>Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                         |                                                                                                                                                       |  |
| Name of Federal Candidate<br>TESTER, R. JON, , ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                         | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MT |  |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | <div style="border: 1px solid black; padding: 2px; display: inline-block;">761486.86</div>                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                         | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2024 <input type="checkbox"/> Other (specify) ▶     |  |
| Full Name of Payee<br>Medium Buying, LLC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                                              | Date of Public Distribution/Dissemination<br><div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">09 / 30 / 2024</div> |                                                                                                                                                       |  |
| Mailing Address 815 grandview Ave., Ste. 600                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                                                                                                                                                                                                                                              | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">751932.19</div>                                                                                                                                                                                    |                                                                                                                                                       |  |
| City State Zip Code<br>Columbus OH 43215                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  | Transaction ID : SE.5573<br>Date of Disbursement or Obligation<br><div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">09 / 25 / 2024</div> |                                                                                                                                                                                                                                                                                         |                                                                                                                                                       |  |
| Purpose of Expenditure<br>TV ad placement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | Category/<br>Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                         |                                                                                                                                                       |  |
| Name of Federal Candidate<br>TESTER, R. JON, , ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                         | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MT |  |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | <div style="border: 1px solid black; padding: 2px; display: inline-block;">751932.19</div>                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                         | 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="border: 1px solid black; padding: 2px; display: inline-block;">752216.86</div>                                                                                                                                                                                              |                                                                                                                                                       |  |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                                                                                                                                                                                                                                                                                                              | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>                                                                                                                                                                                                      |                                                                                                                                                       |  |
| (c) TOTAL 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.<br><br><div style="display: flex; justify-content: space-between; align-items: flex-end;"><div style="width: 40%;">Signature<br/><div style="border-bottom: 1px solid black; margin-top: 5px;">Rozansky, Adam, , ,</div></div><div style="width: 20%; text-align: center;">Date<br/><div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div><div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10 / 02 / 2024</div></div></div> |  |                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                         |                                                                                                                                                       |  |

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 2 OF 2  
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|                                                                                                     |  |                                                                                                |  |
|-----------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>SCHOOL FREEDOM FUND</b>                                           |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00794396                                              |  |
| 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>Prime Media Partners, LLC         |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>09 / 30 / 2024                                                                     |                                                                                                                                                       |
| Mailing Address 4201 Wilson Blvd.<br>#110-126           |             | Amount<br>9270.00                                                                                                                                 |                                                                                                                                                       |
| City<br>Arlington                                       | State<br>VA | Zip Code<br>22203                                                                                                                                 | Transaction ID : SE.5575                                                                                                                              |
| Purpose of Expenditure<br>TV ad production              |             | Category/<br>Type                                                                                                                                 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>09 / 25 / 2024                                                                                |
| Name of Federal Candidate<br>TESTER, R. JON, ,          |             | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose                                                                    | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MT |
| 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                                      |       | Date of Public Distribution/Dissemination<br>MM / DD / YYYY                                                                       |                                                                                                                                                  |
| Mailing Address                                         |       | Amount                                                                                                                            |                                                                                                                                                  |
| City                                                    | State | Zip Code                                                                                                                          | Date of Disbursement or Obligation<br>MM / DD / YYYY                                                                                             |
| Purpose of Expenditure                                  |       | Category/<br>Type                                                                                                                 |                                                                                                                                                  |
| Name of Federal Candidate                               |       | <input type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                               | Office Sought: <input type="checkbox"/> House District: _____<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: _____ |
| Calendar Year-To-Date<br>Per Election for Office Sought |       | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                  |

|                                                            |           |
|------------------------------------------------------------|-----------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶    | 9270.00   |
| (b) SUBTOTAL of Unitemized Independent Expenditures .....▶ |           |
| (c) TOTAL Independent Expenditures.....▶                   | 761486.86 |

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.

Rozansky, Adam, , ,

Signature

Date

MM / DD / YYYY  
10 / 02 / 2024