

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

NAME OF COMMITTEE (In Full) Women Speak Out PAC			FEC IDENTIFICATION NUMBER ▼ C C00530766		
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y					
Full Name of Payee THE LUKENS COMPANY			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 21 / 2024 M M / D D / Y Y Y Y Y Y		
Mailing Address 2800 SHIRLINGTON RD 9TH FLOOR			Amount 24396.19 M M / D D / Y Y Y Y Y Y		
City ARLINGTON State VA Zip Code 22206		Transaction ID : SE24.29444 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 15 / 2024 M M / D D / Y Y Y Y Y Y			
Purpose of Expenditure MAILER		Category/ Type 004			
Name of Federal Candidate TESTER, R., JON, ,			☐ Support ☒ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: MT
Calendar Year-To-Date Per Election for Office Sought			153677.05 M M / D D / Y Y Y Y Y Y		
Disbursement For: ☐ Primary ☒ General 2024			☐ Other (specify) ▶ _____		
Full Name of Payee THE LUKENS COMPANY			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 21 / 2024 M M / D D / Y Y Y Y Y Y		
Mailing Address 2800 SHIRLINGTON RD 9TH FLOOR			Amount 24396.19 M M / D D / Y Y Y Y Y Y		
City ARLINGTON State VA Zip Code 22206		Transaction ID : SE24.29445 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 15 / 2024 M M / D D / Y Y Y Y Y Y			
Purpose of Expenditure MAILER		Category/ Type 004			
Name of Federal Candidate SHEEHY, TIM, ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: MT
Calendar Year-To-Date Per Election for Office Sought			153677.05 M M / D D / Y Y Y Y Y Y		
Disbursement For: ☐ Primary ☒ General 2024			☐ Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶ 48792.38 (b) SUBTOTAL of Unitemized Independent Expenditures ▶ (c) TOTAL Independent Expenditures..... ▶ 48792.38					
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 Gross, Jennifer, , , Date M M / D D / Y Y Y Y Y Y 10 / 17 / 2024 M M / D D / Y Y Y Y Y Y					