

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

NAME OF COMMITTEE (In Full) Ruralvote.org		FEC IDENTIFICATION NUMBER ▼ C C00754754	
Check if ☐ 24-hour report ☒ 48-hour report		☐ New report	☒ Amends report filed on
		M M / D D / Y Y Y Y Y Y 10 / 02 / 2024	

Full Name of Payee Financial Innovations Inc.		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 01 / 2024	
Mailing Address 1 Weingeroff Blvd		Amount 35602.50	
City Cranston	State RI	Zip Code 02910	Transaction ID : SE.11004
Purpose of Expenditure Independent Expenditure - Yard Signs and Shipping		Category/ Type	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
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		35602.50	Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶

Full Name of Payee		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
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..... ▶	35602.50
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	35602.50

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.

Albright-Hana, Kate, , ,

Signature

Date

M M / D D / Y Y Y Y Y Y
10 / 07 / 2024