

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

NAME OF COMMITTEE (In Full) NRSC			FEC IDENTIFICATION NUMBER ▼ C C00027466		
Check if ☐ 24-hour report ☒ 48-hour report			☒ New report ☐ Amends report filed on		
Full Name of Payee COLD HARBOR CREATIVE			Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 14 / 2022		
Mailing Address 815 SLATERS LANE			Amount 18562.50		
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24.0614.001		
Purpose of Expenditure MEDIA		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 06 / 14 / 2022		
Name of Federal Candidate KELLY, MARK, , ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: AZ		
Calendar Year-To-Date Per Election for Office Sought		3881890.77	Disbursement For: ☐ Primary ☒ General 2022 ☐ Other (specify) ▶		
Full Name of Payee CASTELLANOS ASSOCIATES, INC			Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 14 / 2022		
Mailing Address 815 SLATERS LANE			Amount 35000.00		
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24.0614.002		
Purpose of Expenditure MEDIA		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 06 / 14 / 2022		
Name of Federal Candidate KELLY, MARK, , ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: AZ		
Calendar Year-To-Date Per Election for Office Sought		3881890.77	Disbursement For: ☐ Primary ☒ General 2022 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			53562.50		
(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.					
Signature DAVIS, KEITH, , ,		[Electronically Filed]		Date MM / DD / YYYY 06 / 15 / 2022	

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Full Name of Payee SRCP MEDIA, INC PRODUCTION		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 14 / 2022
Mailing Address 201 N UNION ST. STE 200		Amount 43848.00
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Expenditure MEDIA	Category/Type	Transaction ID : SE24.0614.003 Date of Disbursement or Obligation MM / DD / YYYY 06 / 14 / 2022
Name of Federal Candidate BEASLEY, CHERI, ,		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2022 ☐ Other (specify) ▶

Full Name of Payee NATIONAL MEDIA		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 14 / 2022
Mailing Address 815 SLATERS LANE		Amount 1695720.22
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Expenditure MEDIA	Category/Type	Transaction ID : SE24.0614.004 Date of Disbursement or Obligation MM / DD / YYYY 06 / 13 / 2022
Name of Federal Candidate BEASLEY, CHERI, ,		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2022 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1739568.22
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	1793130.72

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.

DAVIS, KEITH, , ,

[Electronically Filed]

Date

MM / DD / YYYY
06 / 15 / 2022

Signature