

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

NAME OF COMMITTEE (In Full) HOUSE FREEDOM ACTION			FEC IDENTIFICATION NUMBER ▼ C C00662221	
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on			MM / DD / YYYY	
Full Name of Payee NEIGHBORHOOD RESEARCH AND MEDIA		Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 29 / 2025		
Mailing Address PO BOX 297		Amount 1500.00		
City RODANTHE	State NC	Zip Code 27968-0297	Transaction ID : E11066143AF2342E396F	
Purpose of Expenditure IE-WEIL-DIGITAL ADVERTISING		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate WEIL, JOSHUA, JOSEPH, ,		☐ Support ☒ Oppose	Office Sought: ☒ House District: 06 ☐ President ☐ Senate State: FL	
Calendar Year-To-Date Per Election for Office Sought		15000.00	Disbursement For: ☐ Primary ☐ General 2025 ☒ Other (specify) ► SPECIAL GENERAL	
Full Name of Payee NEIGHBORHOOD RESEARCH AND MEDIA		Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 29 / 2025		
Mailing Address PO BOX 297		Amount 13500.00		
City RODANTHE	State NC	Zip Code 27968-0297	Transaction ID : E8EC13D4386644FD8A96	
Purpose of Expenditure IE-FINE-DIGITAL ADVERTISING		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate FINE, RANDY, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 06 ☐ President ☐ Senate State: FL	
Calendar Year-To-Date Per Election for Office Sought		15000.00	Disbursement For: ☐ Primary ☐ General 2025 ☒ Other (specify) ► SPECIAL GENERAL	
(a) SUBTOTAL of Itemized Independent Expenditures.....		15000.00		
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures.....		15000.00		
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 BROWN, MEGAN, , ,		Date MM / DD / YYYY 03 / 30 / 2025		