

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

NAME OF COMMITTEE (In Full) Independents Moving the Needle		FEC IDENTIFICATION NUMBER ▼ C C00858381	
Check if ☐ 24-hour report ☒ 48-hour report		☒ New report ☐ Amends report filed on	

Full Name of Payee Opinion Diagnostics LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 21 / 2023		
Mailing Address 100 Sudbury St #3507			Amount 1682.90		
City Boston	State MA	Zip Code 02114	Transaction ID : SE.4117		
Purpose of Expenditure GOTV Text Messages		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate HALEY, NIKKI, ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: NH		
Calendar Year-To-Date Per Election for Office Sought		160840.20	Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶		

Full Name of Payee Opinion Diagnostics LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 22 / 2023		
Mailing Address 100 Sudbury St #3507			Amount 1682.90		
City Boston	State MA	Zip Code 02114	Transaction ID : SE.4118		
Purpose of Expenditure GOTV Text Messages		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate HALEY, NIKKI, ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: NH		
Calendar Year-To-Date Per Election for Office Sought		162523.10	Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	3365.80
(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.

Bush, Jonathan, , ,

Signature

Date

MM / DD / YYYY
12 / 22 / 2023

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(Schedule E)PAGE 2 OF 2
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Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee Spectrum Marketing Companies		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 23 / 2023
Mailing Address 95 Eddy Rd Suite 101		Amount 2478.28
City Manchester	State NH	Zip Code 03102
Purpose of Expenditure Lawn Signs	Category/ Type	Transaction ID : SE.4113 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate HALEY, NIKKI, , ,		Office Sought: ☒ Support ☐ Oppose ☒ President ☐ Senate State: NH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address		Amount
City	State	Zip Code
Purpose of Expenditure	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate		Office Sought: ☐ Support ☐ Oppose ☐ President ☐ Senate State:
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	2478.28
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	5844.08

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 Bush, Jonathan, , ,

Date

MM / DD / YYYY
12 / 22 / 2023