

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

NAME OF COMMITTEE (In Full) Our Future United			FEC IDENTIFICATION NUMBER ▼ C C00752378	
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on			MM / DD / YYYY	
Full Name of Payee The Strategy Division		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 31 / 2024		
Mailing Address PO Box 3114, El Dorado, CO 80025		Amount 80000.00		
City El Dorado	State CO	Zip Code 80025	Transaction ID : SE.5612	
Purpose of Expenditure Digital Advertising		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 31 / 2024	
Name of Federal Candidate Osborn, Dan, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: NE	
Calendar Year-To-Date Per Election for Office Sought		180000.00	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	
Full Name of Payee The Strategy Division		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 31 / 2024		
Mailing Address PO Box 3114, El Dorado, CO 80025		Amount 80000.00		
City El Dorado	State CO	Zip Code 80025	Transaction ID : SE.5613	
Purpose of Expenditure Digital Advertising		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 31 / 2024	
Name of Federal Candidate Tester, Jon, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: MT	
Calendar Year-To-Date Per Election for Office Sought		302675.00	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....		160000.00		
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures.....		160000.00		
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 Troy, Megan, , ,		Date MM / DD / YYYY 10 / 31 / 2024		