

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

NAME OF COMMITTEE (In Full) NORTH STAR DAWN PAC			FEC IDENTIFICATION NUMBER ▼ C C00935973	
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on			MM / DD / YYYY	
Full Name of Payee Break Something		Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 22 / 2026		
Mailing Address 1802 Vernon St NW #562		Amount 320000.00		
City Washington	State DC	Zip Code 20009	Transaction ID : SE.4272	
Purpose of Expenditure Digital Advertising Buy		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 07 / 21 / 2026	
Name of Federal Candidate FLANAGAN, MARGARET, , ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: MN	
Calendar Year-To-Date Per Election for Office Sought		10524734.54	Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶	
Full Name of Payee Break Something		Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 22 / 2026		
Mailing Address 1802 Vernon St NW #562		Amount 100000.00		
City Washington	State DC	Zip Code 20009	Transaction ID : SE.4273	
Purpose of Expenditure Digital Advertising Buy		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 07 / 21 / 2026	
Name of Federal Candidate CRAIG, ANGIE, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: MN	
Calendar Year-To-Date Per Election for Office Sought		10204734.54	Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		420000.00		
(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 Petterson, Jay, , ,		Date MM / DD / YYYY 07 / 23 / 2026		

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Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on	

Full Name of Payee Grassroots Media	Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 22 / 2026
Mailing Address 146 Montgomery Avenue Suite 201	Amount 663375.00
City State Zip Code Bala Cynwyd PA 19004	Transaction ID : SE.4275 Date of Disbursement or Obligation MM / DD / YYYY 07 / 21 / 2026
Purpose of Expenditure Television Advertising Buy	Category/Type
Name of Federal Candidate CRAIG, ANGIE, , ,	☒ Support ☐ Oppose Office Sought: ☐ House ☒ Senate District: 00 ☐ President State: MN
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶

Full Name of Payee MPWR Media Strategies	Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 22 / 2026
Mailing Address 921 H Street NE #286	Amount 4384.67
City State Zip Code Washington DC 20002	Transaction ID : SE.4274 Date of Disbursement or Obligation MM / DD / YYYY 07 / 21 / 2026
Purpose of Expenditure Television Advertising Production	Category/Type
Name of Federal Candidate CRAIG, ANGIE, , ,	☒ Support ☐ Oppose Office Sought: ☐ House ☒ Senate District: 00 ☐ President State: MN
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	667759.67
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	1087759.67

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.

Petterson, Jay, , ,

Signature

Date

MM / DD / YYYY
07 / 23 / 2026