

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

NAME OF COMMITTEE (In Full) America's Credit Unions PAC of Credit Union National Association, Inc.		FEC IDENTIFICATION NUMBER ▼ C C00007880	
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY	

Full Name of Payee The Lukens Company		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 27 / 2024	
Mailing Address 2800 Shirlington Rd # 900		Amount 253943.98	
City Arlington	State VA	Zip Code 22206	Transaction ID : 6915025
Purpose of Expenditure Direct mail printing & postage		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 27 / 2024
Name of Federal Candidate Lawler, Michael, , Rep.,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 17 ☐ President ☐ Senate State: NY
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	

Full Name of Payee The Lukens Company		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 27 / 2024	
Mailing Address 2800 Shirlington Rd # 900		Amount 136056.02	
City Arlington	State VA	Zip Code 22206	Transaction ID : 6915036
Purpose of Expenditure Digital ad production & buy		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 27 / 2024
Name of Federal Candidate Lawler, Michael, , Rep.,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 17 ☐ President ☐ Senate State: NY
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	390000.00
(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.

Mesack, Greg, , ,

Signature

Date

MM / DD / YYYY
09 / 27 / 2024

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Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on / /					
Full Name of Payee The Lukens Company			Date of Public Distribution/Dissemination / /		
Mailing Address 2800 Shirlington Rd # 900			Amount 10000.00		
City Arlington		State VA	Zip Code 22206		Transaction ID : 6915039
Purpose of Expenditure Text messages		Category/ Type 004		Date of Disbursement or Obligation / /	
Name of Federal Candidate Lawler, Michael, , Rep.,			☒ Support ☐ Oppose		Office Sought: ☒ House District: <u>17</u> ☐ President ☐ Senate State: <u>NY</u>
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		
Mailing Address			Amount		
City		State	Zip Code		Date of Disbursement or Obligation
Purpose of Expenditure		Category/ Type		/ /	
Name of Federal Candidate			☐ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☐ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶ 10000.00 (b) SUBTOTAL of Unitemized Independent Expenditures ▶ (c) TOTAL Independent Expenditures..... ▶ 400000.00					
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 Mesack, Greg, , ,			Date / /		