

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) HOMETOWN FREEDOM ACTION NETWORK			FEC IDENTIFICATION NUMBER ▼ C C00528901	
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on MM / DD / YYYY				
Full Name of Payee KLM Marketing LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 24 / 2024	
Mailing Address 201 Mariner Way #1033			Amount 318.82	
City Biddeford		State ME	Zip Code 04005	
Purpose of Expenditure Text Messaging		Category/Type 004	Transaction ID : SE.4540 Date of Disbursement or Obligation MM / DD / YYYY 04 / 24 / 2024	
Name of Federal Candidate PHIPPEN, CAROLYN MARIE, , ,			☒ Support ☐ Oppose Office Sought: ☐ House ☒ Senate District: 00 ☐ President State: UT	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☐ General 2024 ☒ Other (specify) ▶ Convention 40375.93	
Full Name of Payee KLM Marketing LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 24 / 2024	
Mailing Address 201 Mariner Way #1033			Amount 318.82	
City Biddeford		State ME	Zip Code 04005	
Purpose of Expenditure Text Messaging		Category/Type 004	Transaction ID : SE.4541 Date of Disbursement or Obligation MM / DD / YYYY 04 / 24 / 2024	
Name of Federal Candidate CURTIS, JOHN, , ,			☐ Support ☒ Oppose Office Sought: ☐ House ☒ Senate District: 00 ☐ President State: UT	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☐ General 2024 ☒ Other (specify) ▶ Convention 40694.75	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			637.64	
(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 <u>MCINTYRE, DUSTIN, , ,</u> Date MM / DD / YYYY 04 / 24 / 2024				

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NAME OF COMMITTEE (In Full) HOMETOWN FREEDOM ACTION NETWORK		FEC IDENTIFICATION NUMBER ▼ C C00528901
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee KLM Marketing LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 24 / 2024	
Mailing Address 201 Mariner Way #1033		Amount 318.82	
City Biddeford	State ME	Zip Code 04005	Transaction ID : SE.4542
Purpose of Expenditure Text Messaging		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 24 / 2024
Name of Federal Candidate STAGGS, TRENT, , ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: UT
Calendar Year-To-Date Per Election for Office Sought		41013.57	Disbursement For: ☐ Primary ☐ General 2024 ☒ Other (specify) ► Convention

Full Name of Payee KLM Marketing LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 23 / 2024	
Mailing Address 201 Mariner Way #1033		Amount 2474.03	
City Biddeford	State ME	Zip Code 04005	Transaction ID : SE.4545
Purpose of Expenditure Direct Mail		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 24 / 2024
Name of Federal Candidate PHIPPEN, CAROLYN MARIE, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: UT
Calendar Year-To-Date Per Election for Office Sought		43487.60	Disbursement For: ☐ Primary ☐ General 2024 ☒ Other (specify) ► Convention

(a) SUBTOTAL of Itemized Independent Expenditures..... ►	2792.85
(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.

MCINTYRE, DUSTIN, , ,

Signature

Date

MM / DD / YYYY
04 / 24 / 2024

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Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on				
Full Name of Payee KLM Marketing LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 23 / 2024	
Mailing Address 201 Mariner Way #1033			Amount 2474.04	
City Biddeford		State ME	Zip Code 04005	
Purpose of Expenditure Direct Mail		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 04 / 24 / 2024	
Name of Federal Candidate STAGGS, TRENT, , ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: UT	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☐ General 2024 ☒ Other (specify) ▶ Convention	
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		☐ 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..... ▶			2474.04	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶				
(c) TOTAL Independent Expenditures..... ▶			5904.53	
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 MCINTYRE, DUSTIN, , ,			Date MM / DD / YYYY 04 / 24 / 2024	