

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

NAME OF COMMITTEE (In Full) National Association of Realtors Political Action Committee			FEC IDENTIFICATION NUMBER ▼ C C00030718		
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on MM / DD / YYYYYY					
Full Name of Payee Bridge Impact LLC			Date of Public Distribution/Dissemination MM / DD / YYYYYY 02 / 19 / 2026		
Mailing Address 5623 Southwick St.			Amount 4287.00		
City Bethesda	State MD	Zip Code 20817-3509	Transaction ID : E8BD440731FAF46F2A20		
Purpose of Expenditure Digital advertising & design costs		Category/ Type 	Date of Disbursement or Obligation MM / DD / YYYYYY		
Name of Federal Candidate Casten, Sean, , Rep.,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 06 ☐ President ☐ Senate State: IL		
Calendar Year-To-Date Per Election for Office Sought		12087.00	Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶		
Full Name of Payee AMBROSINO MUIR HANSEN CROUNSE			Date of Public Distribution/Dissemination MM / DD / YYYYYY 02 / 19 / 2026		
Mailing Address 6309 Wiscasset Rd			Amount 7200.00		
City Bethesda	State MD	Zip Code 20816-2111	Transaction ID : E5A657F47A77E47E988F		
Purpose of Expenditure Online digital ads and GIFs		Category/ Type 	Date of Disbursement or Obligation MM / DD / YYYYYY		
Name of Federal Candidate Casten, Sean, , Rep.,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 06 ☐ President ☐ Senate State: IL		
Calendar Year-To-Date Per Election for Office Sought		12087.00	Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			11487.00		
(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 Sanford, Craig, W, Mr.,			Date MM / DD / YYYYYY 02 / 19 / 2026		

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NAME OF COMMITTEE (In Full) National Association of Realtors Political Action Committee		FEC IDENTIFICATION NUMBER ▼ C C00030718
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Full Name of Payee National Association of REALTORS		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 19 / 2026
Mailing Address 430 N Michigan Ave		Amount 600.00
City Chicago	State IL	Zip Code 60611-4011
Purpose of Expenditure Administrative Consulting	Category/ Type	Transaction ID : E23B0574FEADC4472B7F Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Casten, Sean, , Rep.,		Office Sought: ☒ House District: 06 ☐ President ☐ Senate State: IL
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶

Full Name of Payee AMBROSINO MUIR HANSEN CROUNSE		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 19 / 2026
Mailing Address 6309 Wiscasset Rd		Amount 7200.00
City Bethesda	State MD	Zip Code 20816-2111
Purpose of Expenditure Online digital ads and GIFs	Category/ Type	Transaction ID : E4350A7A54A1748E28E2 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Schneider, Brad, , Rep.,		Office Sought: ☒ House District: 10 ☐ President ☐ Senate State: IL
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	7800.00
(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.

Sanford, Craig, W, Mr.,

Signature

Date

MM / DD / YYYY
02 / 19 / 2026

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NAME OF COMMITTEE (In Full) National Association of Realtors Political Action Committee		FEC IDENTIFICATION NUMBER ▼ C C00030718
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee National Association of REALTORS		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 19 / 2026
Mailing Address 430 N Michigan Ave		Amount 600.00
City Chicago	State IL	Zip Code 60611-4011
Purpose of Expenditure Administrative Consulting	Category/ Type	Transaction ID : E21BABA83E25A4BC488E Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Schneider, Brad, , Rep.,		☒ Support ☐ Oppose
		Office Sought: ☒ House District: 10 ☐ President ☐ Senate State: IL
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶

Full Name of Payee Bridge Impact LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 19 / 2026
Mailing Address 5623 Southwick St.		Amount 3542.00
City Bethesda	State MD	Zip Code 20817-3509
Purpose of Expenditure Digital advertising & design costs	Category/ Type	Transaction ID : E4FCE47793C35442A81B Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Schneider, Brad, , Rep.,		☒ Support ☐ Oppose
		Office Sought: ☒ House District: 10 ☐ President ☐ Senate State: IL
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	4142.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	23429.00

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.

Sanford, Craig, W, Mr.,

Signature

Date

MM / DD / YYYY
02 / 19 / 2026