

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

NAME OF COMMITTEE (In Full) School Freedom Fund			FEC IDENTIFICATION NUMBER ▼ C C00794396		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M M / D D D / Y Y Y Y Y Y					
Full Name of Payee WHISTLESOP STRATEGIES			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 09 / 18 / 2025		
Mailing Address 100 COASTAL DRIVE STE 305			Amount 15254.88		
City CHARLESTON		State SC	Zip Code 29492-8970		
Purpose of Expenditure MAIL PRODUCTION/POSTAGE		Category/ Type	Transaction ID : SE24.1488 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 09 / 16 / 2025		
Name of Federal Candidate BARRETT, JOSEPH, MICHAEL, ,			☐ Support ☒ Oppose Office Sought: ☒ House District: 07 ☐ President ☐ Senate State: TN		
Calendar Year-To-Date Per Election for Office Sought 384167.32			Disbursement For: ☒ Primary ☐ General 2025 ☐ Other (specify) ▶		
Full Name of Payee CLUB FOR GROWTH			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 09 / 18 / 2025		
Mailing Address 2001 L ST NW STE 600			Amount 154.31		
City WASHINGTON		State DC	Zip Code 20036		
Purpose of Expenditure MAIL PRODUCTION (FROM ADVANCE LINE 21)		Category/ Type	Transaction ID : SE24.1489 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 09 / 18 / 2025		
Name of Federal Candidate BARRETT, JOSEPH, MICHAEL, ,			☐ Support ☒ Oppose Office Sought: ☒ House District: 07 ☐ President ☐ Senate State: TN		
Calendar Year-To-Date Per Election for Office Sought 384167.32			Disbursement For: ☒ Primary ☐ General 2025 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			15409.19		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶			15409.19		
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.					
ROZANSKY, ADAM, , , Signature			Date M M M / D D D / Y Y Y Y Y Y 09 / 18 / 2025		