

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

NAME OF COMMITTEE (In Full) A Stronger Michigan			FEC IDENTIFICATION NUMBER ▼ C C00952259	
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on			MM / DD / YYYY	
Full Name of Payee AL Media		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 18 / 2026		
Mailing Address 222 West Ontario Street Ste 600		Amount 250000.00		
City Chicago	State IL	Zip Code 60654	Transaction ID : SE.4137	
Purpose of Expenditure Digital Advertising		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 06 / 18 / 2026	
Name of Federal Candidate Stevens, Haley, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought		4887279.38	Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶	
Full Name of Payee AL Media		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 19 / 2026		
Mailing Address 222 West Ontario Street Ste 600		Amount 31300.00		
City Chicago	State IL	Zip Code 60654	Transaction ID : SE.4139	
Purpose of Expenditure Digital Advertising Production		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 06 / 19 / 2026	
Name of Federal Candidate Stevens, Haley, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought		4918579.38	Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....		281300.00		
(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 Hudson, Melanie, , ,		Date MM / DD / YYYY 06 / 20 / 2026		

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

Full Name of Payee Waterfront Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 18 / 2026	
Mailing Address PO Box 771733		Amount 433938.75	
City St. Louis	State MO	Zip Code 63177	Transaction ID : SE.4138
Purpose of Expenditure Media Buy - Television Advertising		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 06 / 18 / 2026
Name of Federal Candidate Stevens, Haley, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: MI
Calendar Year-To-Date Per Election for Office Sought		4637279.38	Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶ _____

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY
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..... ▶	433938.75
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	715238.75

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.

Hudson, Melanie, , ,
Signature

Date MM / DD / YYYY
06 / 20 / 2026