

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

NAME OF COMMITTEE (In Full) Leadership for Ohio Fund		FEC IDENTIFICATION NUMBER ▼ C C00845685
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee FlexPoint Media Inc		Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 24 / 2024
Mailing Address PO Box 1051		Amount 1184174.00
City New Albany	State OH	Zip Code 43054
Purpose of Expenditure TV placement and production	Category/ Type	Transaction ID : SE.4149 Date of Disbursement or Obligation MM / DD / YYYY 01 / 22 / 2024
Name of Federal Candidate LAROSE, FRANK, , ,		Office Sought: ☒ Support ☐ Oppose ☐ President ☒ Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶

Full Name of Payee FlexPoint Media Inc		Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 24 / 2024
Mailing Address PO Box 1051		Amount 365360.00
City New Albany	State OH	Zip Code 43054
Purpose of Expenditure TV placement and production	Category/ Type 004	Transaction ID : SE.4150 Date of Disbursement or Obligation MM / DD / YYYY 01 / 22 / 2024
Name of Federal Candidate LAROSE, FRANK, , ,		Office Sought: ☒ Support ☐ Oppose ☐ President ☒ Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1549534.00
(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.

McIntyre, Dustin, , ,

Signature

Date

MM / DD / YYYY
01 / 26 / 2024

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(Schedule E)PAGE 2 OF 2
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Check if ☐ 24-hour report ☒ 48-hour report		☒ New report ☐ Amends report filed on	

Full Name of Payee Majority Strategies LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 24 / 2024	
Mailing Address PO Box 679219		Amount 7919.50	
City Dallas	State TX	Zip Code 75267	Transaction ID : SE.4148
Purpose of Expenditure Text messaging		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 01 / 25 / 2024
Name of Federal Candidate LAROSE, FRANK, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		3055147.14	Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶

Full Name of Payee Targeted Victory		Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 24 / 2024	
Mailing Address 2311 Wilson Blvd Suite 200		Amount 10000.00	
City Arlington	State VA	Zip Code 22201	Transaction ID : SE.4147
Purpose of Expenditure Digital advertising		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 01 / 25 / 2024
Name of Federal Candidate LAROSE, FRANK, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		3047227.64	Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	17919.50
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	1567453.50

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
01 / 26 / 2024