

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

NAME OF COMMITTEE (In Full) Montana Outdoor Values Action Fund			FEC IDENTIFICATION NUMBER ▼ C C00860155		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on MM / DD / YYYY					
Full Name of Payee Deliver Strategies			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2024		
Mailing Address 1301 K St NW Ste 300W			Amount 23064.45		
City Washington		State DC	Zip Code 20005-7043		Transaction ID : 500002835 Date of Disbursement or Obligation MM / DD / YYYY 10 / 28 / 2024
Purpose of Expenditure GOTV Postcards		Category/ Type 004			
Name of Federal Candidate TESTER, R., JON, ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: MT
Calendar Year-To-Date Per Election for Office Sought			4830309.49 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
Full Name of Payee Flatirons Strategies			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2024		
Mailing Address 1312 17th St # 551			Amount 20000.00		
City Denver		State CO	Zip Code 80202-1508		Transaction ID : 500002837 Date of Disbursement or Obligation MM / DD / YYYY 10 / 28 / 2024
Purpose of Expenditure Estimated Cost - Digital Advertising		Category/ Type 004			
Name of Federal Candidate TESTER, R., JON, ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: MT
Calendar Year-To-Date Per Election for Office Sought			4830309.49 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			43064.45		
(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>Lombardi, Jill, , ,</u> Date MM / DD / YYYY 10 / 29 / 2024					

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NAME OF COMMITTEE (In Full) Montana Outdoor Values Action Fund		FEC IDENTIFICATION NUMBER ▼ C C00860155
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee MVAR Media, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2024
Mailing Address 1421 Prince St Ste 320		Amount 425.00
City Alexandria	State VA	Zip Code 22314-2805
Purpose of Expenditure Digital Ad Production	Category/ Type 004	Transaction ID : 500002836 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate TESTER, R., JON, , ☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: MT
Calendar Year-To-Date Per Election for Office Sought 4830309.49		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____

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..... ▶	425.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	43489.45

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.

Lombardi, Jill, , ,

Signature

Date

MM / DD / YYYY
10 / 29 / 2024