

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

NAME OF COMMITTEE (In Full) Protect Freedom Political Action Committee			FEC IDENTIFICATION NUMBER ▼ C C00657866		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on MM / DD / YYYY					
Full Name of Payee Conversion Creative			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2024		
Mailing Address PO Box 80219			Amount 25000.00		
City Charleston		State SC	Zip Code 29416		Transaction ID : SE.7686
Purpose of Expenditure Direct Mail		Category/ Type		Date of Disbursement or Obligation MM / DD / YYYY 10 / 04 / 2024	
Name of Federal Candidate BARRETT, THOMAS MORE, , ,			☒ Support ☐ Oppose		Office Sought: ☒ House District: 07 ☐ President ☐ Senate State: MI
Calendar Year-To-Date Per Election for Office Sought			25000.00 Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶		
Full Name of Payee Conversion Creative			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2024		
Mailing Address PO Box 80219			Amount 25000.00		
City Charleston		State SC	Zip Code 29416		Transaction ID : SE.7687
Purpose of Expenditure Direct Mail		Category/ Type		Date of Disbursement or Obligation MM / DD / YYYY 10 / 04 / 2024	
Name of Federal Candidate WILLIAMS, LILY TANG, , ,			☒ Support ☐ Oppose		Office Sought: ☒ House District: 02 ☐ President ☐ Senate State: NH
Calendar Year-To-Date Per Election for Office Sought			25000.00 Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			50000.00		
(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 Kilgore, Paul, , ,			Date MM / DD / YYYY 10 / 16 / 2024		

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NAME OF COMMITTEE (In Full) Protect Freedom Political Action Committee			FEC IDENTIFICATION NUMBER ▼ C C00657866		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee Conversion Creative			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 15 / 2024		
Mailing Address PO Box 80219			Amount 25000.00		
City Charleston		State SC	Zip Code 29416		Transaction ID : SE.7688
Purpose of Expenditure Direct mail		Category/ Type		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 04 / 2024	
Name of Federal Candidate THERIAULT, AUSTIN LEO, , ,			☒ Support ☐ Oppose		Office Sought: ☒ House District: <u>02</u> ☐ President ☐ Senate State: <u>ME</u>
Calendar Year-To-Date Per Election for Office Sought			25000.00 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
Full Name of Payee Conversion Creative			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 15 / 2024		
Mailing Address PO Box 80219			Amount 25000.00		
City Charleston		State SC	Zip Code 29416		Transaction ID : SE.7689
Purpose of Expenditure Direct Mail		Category/ Type		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 04 / 2024	
Name of Federal Candidate MERRIN, DEREK, , ,			☒ Support ☐ Oppose		Office Sought: ☒ House District: <u>09</u> ☐ President ☐ Senate State: <u>OH</u>
Calendar Year-To-Date Per Election for Office Sought			25000.00 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			50000.00		
(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 Kilgore, Paul, , ,			Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2024		

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NAME OF COMMITTEE (In Full) Protect Freedom Political Action Committee			FEC IDENTIFICATION NUMBER ▼ C C00657866		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on					
Full Name of Payee Conversion Creative			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2024		
Mailing Address PO Box 80219			Amount 25000.00		
City Charleston		State SC	Zip Code 29416		Transaction ID : SE.7690
Purpose of Expenditure Direct Mail		Category/ Type		Date of Disbursement or Obligation MM / DD / YYYY 10 / 04 / 2024	
Name of Federal Candidate JOHNSON, DREW, , ,			☒ Support ☐ Oppose		Office Sought: ☒ House District: 03 ☐ President ☐ Senate State: NV
Calendar Year-To-Date Per Election for Office Sought			25000.00		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..... ▶ 25000.00 (b) SUBTOTAL of Unitemized Independent Expenditures ▶ (c) TOTAL Independent Expenditures..... ▶ 125000.00					
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.					
Signature Kilgore, Paul, , ,			Date MM / DD / YYYY 10 / 16 / 2024		