24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

NAME OF COMMITTEE (In Full)
HEALTHCARE FREEDOM SUPER PAC

FEC IDENTIFICATION NUMBER ▼
C C00798009

Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
KAP Print LLC

Mailing Address 220 Quinn Drive

City: Dripping Springs | State: TX | Zip Code: 78620

Purpose of Expenditure
Mailer & Postage

Category/ Type

Date of Public Distribution/Dissemination
05 / 12 / 2026

Amount
15086.67

Transaction ID : SE.4503

Date of Disbursement or Obligation
05 / 11 / 2026

Name of Federal Candidate
COWAN, JOHN, , ,

☒ Support ☐ Oppose

Office Sought: ☒ House ☐ President ☐ Senate District: 11 State: GA

Calendar Year-To-Date Per Election for Office Sought
15086.67

Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶

Full Name of Payee

Mailing Address

City | State | Zip Code

Purpose of Expenditure

Category/ Type

Date of Public Distribution/Dissemination

Amount

Date of Disbursement or Obligation

Name of Federal Candidate

☐ Support ☐ Oppose

Office Sought: ☐ House ☐ President ☐ Senate District: State:

Calendar Year-To-Date Per Election for Office Sought

Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 15086.67

(b) SUBTOTAL of Unitemized Independent Expenditures ▶

(c) TOTAL Independent Expenditures ▶ 15086.67

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.

Carlin, Robert, F., ,
Signature

Date 05 / 12 / 2026