

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

NAME OF COMMITTEE (In Full) HOLD THE LINE PAC			FEC IDENTIFICATION NUMBER ▼ C C00736140	
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M M / D D D / Y Y Y Y Y Y				
Full Name of Payee Southern Pines Strategies			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 08 / 10 / 2026	
Mailing Address 1406 Cherokee Trl			Amount 22500.00	
City Sanford		State NC	Zip Code 27332	
Purpose of Expenditure TV & Digital Advertising		Category/Type 001	Transaction ID : SE.4903 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 08 / 10 / 2026	
Name of Federal Candidate NORMAN, RALPH, , ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: SC	
Calendar Year-To-Date Per Election for Office Sought		52500.00		Disbursement For: ☐ Primary ☐ General 2026 ☒ Other (specify) ▶ Special-Primary
Full Name of Payee Southern Pines Strategies			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 08 / 10 / 2026	
Mailing Address 1406 Cherokee Trl			Amount 22500.00	
City Sanford		State NC	Zip Code 27332	
Purpose of Expenditure TV & Digital Advertising		Category/Type	Transaction ID : SE.4904 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 08 / 10 / 2026	
Name of Federal Candidate GRAHAM, DARLINE, , ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: SC	
Calendar Year-To-Date Per Election for Office Sought		75000.00		Disbursement For: ☐ Primary ☐ General 2026 ☒ Other (specify) ▶ Special-Primary
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			45000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶				
(c) TOTAL Independent Expenditures..... ▶			45000.00	
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 Fritsch, Noel, , ,			Date M M M / D D D / Y Y Y Y Y Y 08 / 10 / 2026	