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

NAME OF COMMITTEE (In Full)
SENATE CONSERVATIVES ACTION

FEC IDENTIFICATION NUMBER ▼
C C00524181

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
ALLEGIANCE DIRECT

Mailing Address 15 N KING ST
STE 205

City: LEESBURG | State: VA | Zip Code: 20176-2848

Purpose of Expenditure
IE-MOODY-DIRECT MAIL PRODUCTION

Category/ Type

Date of Public Distribution/Dissemination
08 / 20 / 2026

Amount
13566.09

Transaction ID : E52A29DD3A3544546BD8

Date of Disbursement or Obligation
08 / 21 / 2026

Name of Federal Candidate
MOODY, ASHLEY, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: _____ State: FL

Calendar Year-To-Date Per Election for Office Sought
20049.37

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

Full Name of Payee
ALLEGIANCE DIRECT

Mailing Address 15 N KING ST
STE 205

City: LEESBURG | State: VA | Zip Code: 20176-2848

Purpose of Expenditure
IE-MOODY-DIRECT MAIL PRODUCTION

Category/ Type

Date of Public Distribution/Dissemination
08 / 20 / 2026

Amount
6483.28

Transaction ID : E16FFCF7DCDEC4E2BB7

Date of Disbursement or Obligation
08 / 21 / 2026

Name of Federal Candidate
MOODY, ASHLEY, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House ☐ President ☒ Senate
District: _____ State: FL

Calendar Year-To-Date Per Election for Office Sought
20049.37

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

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 20049.37

(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.

KILGORE, PAUL, , ,
Signature

Date 08 / 21 / 2026

Image# 202608219903377111

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

NAME OF COMMITTEE (In Full)
SENATE CONSERVATIVES ACTION

FEC IDENTIFICATION NUMBER ▼
C C00524181

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
POP ACTA

Mailing Address 123 N COLLEGE AVE
STE 390

City FORT COLLINS State CO Zip Code 80524-2489

Purpose of Expenditure
IE-MOODY-DIGITAL MARKETING

Category/ Type

Date of Public Distribution/Dissemination
08 / 21 / 2026

Amount
555.55

Transaction ID : EC89E3B449A9D40499A3

Date of Disbursement or Obligation
08 / 21 / 2026

Name of Federal Candidate
MOODY, ASHLEY, , ,

☒ Support ☐ Oppose

Office Sought: ☐ House District: ____ ☐ President ☒ Senate State: FL

Calendar Year-To-Date Per Election for Office Sought 20604.92

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
M M / D D / Y Y Y Y

Amount

Date of Disbursement or Obligation
M M / D D / Y Y Y Y

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	▶	555.55
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures	▶	20604.92

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.

KILGORE, PAUL, , ,
Signature

Date 08 / 21 / 2026