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

NAME OF COMMITTEE (In Full)
WE THE PEOPLE...CAN'T EVEN

FEC IDENTIFICATION NUMBER ▼
C C00957100

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
Barrick, Lauren, , ,

Mailing Address 1438 6th St. Cir NW

City: Hickory | State: NC | Zip Code: 28601

Purpose of Expenditure: Canvassing

Category/ Type:

Date of Public Distribution/Dissemination: 07 / 21 / 2026

Amount: 3000.00

Transaction ID : 8D13ADEF19CBFFA8DFE(

Date of Disbursement or Obligation: 08 / 26 / 2026

Name of Federal Candidate
BELL, ASHLEY, , ,

☒ Support ☐ Oppose

Office Sought: ☒ House ☐ President ☐ Senate District: 10 State: NC

Calendar Year-To-Date Per Election for Office Sought: 6070.00

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

Full Name of Payee
Barrick, Lauren, , ,

Mailing Address 1438 6th St. Cir NW

City: Hickory | State: NC | Zip Code: 28601

Purpose of Expenditure: Canvassing

Category/ Type:

Date of Public Distribution/Dissemination: 07 / 21 / 2026

Amount: 1000.00

Transaction ID : A631A3B0F05D7E7738B5

Date of Disbursement or Obligation: 08 / 24 / 2026

Name of Federal Candidate
BELL, ASHLEY, , ,

☒ Support ☐ Oppose

Office Sought: ☒ House ☐ President ☐ Senate District: 10 State: NC

Calendar Year-To-Date Per Election for Office Sought: 3070.00

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

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 4000.00

(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.

BARRICK, LAUREN, , ,
Signature

Date 09 / 11 / 2026

Image# 202609119904198168

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

NAME OF COMMITTEE (In Full)
WE THE PEOPLE...CAN'T EVEN

FEC IDENTIFICATION NUMBER ▼
C C00957100

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
Falber, Jaxsyn, , ,

Mailing Address 1438 6th St. Cir NW

City: Hickory | State: NC | Zip Code: 28601

Purpose of Expenditure: Canvassing

Category/ Type:

Date of Public Distribution/Dissemination: 07 / 31 / 2026

Amount: 350.00

Transaction ID : B0EEA50AA14E0928FEC3

Date of Disbursement or Obligation: 08 / 05 / 2026

Name of Federal Candidate
BELL, ASHLEY, , ,

☒ Support ☐ Oppose

Office Sought: ☒ House ☐ President ☐ Senate District: 10 State: NC

Calendar Year-To-Date Per Election for Office Sought: 350.00

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

Full Name of Payee
Van Horne, Max, , ,

Mailing Address 1302 Wildwood Road

City: Lenoir | State: NC | Zip Code: 28645

Purpose of Expenditure: Canvassing

Category/ Type:

Date of Public Distribution/Dissemination: 08 / 12 / 2026

Amount: 100.00

Transaction ID : 54DEAD6BB663DE073476

Date of Disbursement or Obligation: 08 / 13 / 2026

Name of Federal Candidate
BELL, ASHLEY, , ,

☒ Support ☐ Oppose

Office Sought: ☒ House ☐ President ☐ Senate District: 10 State: NC

Calendar Year-To-Date Per Election for Office Sought: 450.00

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

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 450.00

(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.

BARRICK, LAUREN, , ,
Signature

Date 09 / 11 / 2026

Image# 202609119904198169

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

NAME OF COMMITTEE (In Full)
WE THE PEOPLE...CAN'T EVEN

FEC IDENTIFICATION NUMBER ▼
C C00957100

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
Sherwood, Grayson, , ,

Mailing Address 802 pennell st NE

City: Lenoir | State: NC | Zip Code: 28645

Purpose of Expenditure: Canvassing | Category/ Type:

Date of Public Distribution/Dissemination: 08 / 12 / 2026

Amount: 100.00

Transaction ID : 0BEFA89BB8D57B821776

Date of Disbursement or Obligation: 08 / 13 / 2026

Name of Federal Candidate
BELL, ASHLEY, , ,

☒ Support ☐ Oppose

Office Sought: ☒ House ☐ President ☐ Senate | District: 10 | State: NC

Calendar Year-To-Date Per Election for Office Sought: 550.00

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

Full Name of Payee
Falber, Jaxsyn, , ,

Mailing Address 1438 6th St. Cir NW

City: Hickory | State: NC | Zip Code: 28601

Purpose of Expenditure: Canvassing | Category/ Type:

Date of Public Distribution/Dissemination: 08 / 12 / 2026

Amount: 100.00

Transaction ID : 5D139A3535C22FE26D72

Date of Disbursement or Obligation: 08 / 13 / 2026

Name of Federal Candidate
BELL, ASHLEY, , ,

☒ Support ☐ Oppose

Office Sought: ☒ House ☐ President ☐ Senate | District: 10 | State: NC

Calendar Year-To-Date Per Election for Office Sought: 650.00

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

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 200.00

(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.

BARRICK, LAUREN, , ,
Signature

Date 09 / 11 / 2026

Image# 202609119904198170

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

NAME OF COMMITTEE (In Full)
WE THE PEOPLE...CAN'T EVEN

FEC IDENTIFICATION NUMBER ▼
C C00957100

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
Falber, Jaxsyn, , ,

Mailing Address 1438 6th St. Cir NW

City: Hickory | State: NC | Zip Code: 28601

Purpose of Expenditure: Canvassing | Category/ Type:

Date of Public Distribution/Dissemination: 08 / 13 / 2026

Amount: 3120.00

Transaction ID : AD9EB2DD314D6C54F32A

Date of Disbursement or Obligation: 09 / 11 / 2026

Name of Federal Candidate
BELL, ASHLEY, , ,

☒ Support ☐ Oppose

Office Sought: ☒ House ☐ President ☐ Senate | District: 10 | State: NC

Calendar Year-To-Date Per Election for Office Sought: 11080.00

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

Full Name of Payee
Poplin, Jennifer, , ,

Mailing Address 2905 Easy St.

City: East Bend | State: NC | Zip Code: 27018

Purpose of Expenditure: Canvassing | Category/ Type:

Date of Public Distribution/Dissemination: 08 / 16 / 2026

Amount: 210.00

Transaction ID : CBA6980CE97D0E74403B

Date of Disbursement or Obligation: 08 / 23 / 2026

Name of Federal Candidate
BELL, ASHLEY, , ,

☒ Support ☐ Oppose

Office Sought: ☒ House ☐ President ☐ Senate | District: 10 | State: NC

Calendar Year-To-Date Per Election for Office Sought: 1860.00

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

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 3330.00

(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.

BARRICK, LAUREN, , ,
Signature

Date 09 / 11 / 2026

Image# 202609119904198171

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

NAME OF COMMITTEE (In Full)
WE THE PEOPLE...CAN'T EVEN

FEC IDENTIFICATION NUMBER ▼
C C00957100

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
Poplin, Jennifer, , ,

Mailing Address 2905 Easy St.

City East Bend | State NC | Zip Code 27018

Purpose of Expenditure
Canvassing

Category/ Type

Date of Public Distribution/Dissemination
08 / 23 / 2026

Amount
210.00

Transaction ID : AB298CEE91201E41CED4

Date of Disbursement or Obligation
08 / 30 / 2026

Name of Federal Candidate
BELL, ASHLEY, , ,

☒ Support ☐ Oppose

Office Sought: ☒ House ☐ President ☐ Senate District: 10 State: NC

Calendar Year-To-Date Per Election for Office Sought
6280.00

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

Full Name of Payee
Poplin, Jennifer, , ,

Mailing Address 2905 Easy St.

City East Bend | State NC | Zip Code 27018

Purpose of Expenditure
Canvassing

Category/ Type

Date of Public Distribution/Dissemination
08 / 27 / 2026

Amount
210.00

Transaction ID : C7FBB3901BCB1FFD3286

Date of Disbursement or Obligation
09 / 03 / 2026

Name of Federal Candidate
BELL, ASHLEY, , ,

☒ Support ☐ Oppose

Office Sought: ☒ House ☐ President ☐ Senate District: 10 State: NC

Calendar Year-To-Date Per Election for Office Sought
6700.00

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

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 420.00

(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.

BARRICK, LAUREN, , ,
Signature

Date 09 / 11 / 2026

Image# 202609119904198172

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

NAME OF COMMITTEE (In Full)
WE THE PEOPLE...CAN'T EVEN

FEC IDENTIFICATION NUMBER ▼
C C00957100

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
Holcomb, Megan, , ,

Mailing Address 3724 Vestal Rd

City: Jonesville | State: NC | Zip Code: 28642

Purpose of Expenditure: Canvassing | Category/ Type:

Date of Public Distribution/Dissemination: 08 / 16 / 2026

Amount: 210.00

Transaction ID : F54CA31BF702211A20F7

Date of Disbursement or Obligation: 08 / 23 / 2026

Name of Federal Candidate
BELL, ASHLEY, , ,

☒ Support ☐ Oppose

Office Sought: ☒ House ☐ President ☐ Senate | District: 10 | State: NC

Calendar Year-To-Date Per Election for Office Sought: 2070.00

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

Full Name of Payee
Adams, Avalyn, , ,

Mailing Address 2905 Easy St.

City: East Bend | State: NC | Zip Code: 27018

Purpose of Expenditure: Canvassing | Category/ Type:

Date of Public Distribution/Dissemination: 08 / 23 / 2026

Amount: 210.00

Transaction ID : 88ECA0AE261B678744B7

Date of Disbursement or Obligation: 08 / 30 / 2026

Name of Federal Candidate
BELL, ASHLEY, , ,

☒ Support ☐ Oppose

Office Sought: ☒ House ☐ President ☐ Senate | District: 10 | State: NC

Calendar Year-To-Date Per Election for Office Sought: 6490.00

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

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 420.00

(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.

BARRICK, LAUREN, , ,
Signature

Date 09 / 11 / 2026

Image# 202609119904198173

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

NAME OF COMMITTEE (In Full)
WE THE PEOPLE...CAN'T EVEN

FEC IDENTIFICATION NUMBER ▼
C C00957100

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
Adams, Avalyn, , ,

Mailing Address 2905 Easy St.

City: East Bend | State: NC | Zip Code: 27018

Purpose of Expenditure: Canvassing

Category/ Type:

Date of Public Distribution/Dissemination: 08 / 27 / 2026

Amount: 210.00

Transaction ID : 4303BF408C8FE8B59CD8

Date of Disbursement or Obligation: 09 / 03 / 2026

Name of Federal Candidate
BELL, ASHLEY, , ,

☒ Support ☐ Oppose

Office Sought: ☒ House ☐ President ☐ Senate District: 10 State: NC

Calendar Year-To-Date Per Election for Office Sought: 7120.00

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

Full Name of Payee
Holcomb, Megan, , ,

Mailing Address 3724 Vestal Rd

City: Jonesville | State: NC | Zip Code: 28642

Purpose of Expenditure: Canvassing

Category/ Type:

Date of Public Distribution/Dissemination: 08 / 27 / 2026

Amount: 210.00

Transaction ID : EE7F8B5A5AD18F5D96C0

Date of Disbursement or Obligation: 09 / 03 / 2026

Name of Federal Candidate
BELL, ASHLEY, , ,

☒ Support ☐ Oppose

Office Sought: ☒ House ☐ President ☐ Senate District: 10 State: NC

Calendar Year-To-Date Per Election for Office Sought: 7330.00

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

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 420.00

(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.

BARRICK, LAUREN, , ,
Signature

Date 09 / 11 / 2026

Image# 202609119904198174

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

NAME OF COMMITTEE (In Full)
WE THE PEOPLE...CAN'T EVEN

FEC IDENTIFICATION NUMBER ▼
C C00957100

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
Echevarria, Mona, , ,

Mailing Address 488 Brookride Dr.

City: Winston Salem | State: NC | Zip Code: 27103

Purpose of Expenditure: Canvassing

Category/ Type:

Date of Public Distribution/Dissemination: 08 / 27 / 2026

Amount: 210.00

Transaction ID : C73E94B7973FF9118048

Date of Disbursement or Obligation: 09 / 03 / 2026

Name of Federal Candidate
BELL, ASHLEY, , ,

☒ Support ☐ Oppose

Office Sought: ☒ House ☐ President ☐ Senate District: 10 State: NC

Calendar Year-To-Date Per Election for Office Sought: 7540.00

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

Full Name of Payee
Adams, Shamar, , ,

Mailing Address 3579 Jefferson St.

City: Sherrill Ford | State: NC | Zip Code: 28673

Purpose of Expenditure: Canvassing

Category/ Type:

Date of Public Distribution/Dissemination: 08 / 27 / 2026

Amount: 210.00

Transaction ID : 7364ADD5A9F6164E4CBF

Date of Disbursement or Obligation: 09 / 03 / 2026

Name of Federal Candidate
BELL, ASHLEY, , ,

☒ Support ☐ Oppose

Office Sought: ☒ House ☐ President ☐ Senate District: 10 State: NC

Calendar Year-To-Date Per Election for Office Sought: 7750.00

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

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 420.00

(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.

BARRICK, LAUREN, , ,
Signature

Date 09 / 11 / 2026

Image# 202609119904198175

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

NAME OF COMMITTEE (In Full)
WE THE PEOPLE...CAN'T EVEN

FEC IDENTIFICATION NUMBER ▼
C C00957100

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
Cadieu, Cassidy, , ,

Mailing Address 3579 Jefferson St.

City: Sherrill Ford | State: NC | Zip Code: 28673

Purpose of Expenditure: Canvassing

Category/ Type:

Date of Public Distribution/Dissemination: 08 / 27 / 2026

Amount: 210.00

Transaction ID : 39B99AA699B092B098DA

Date of Disbursement or Obligation: 09 / 03 / 2026

Name of Federal Candidate
BELL, ASHLEY, , ,

☒ Support ☐ Oppose

Office Sought: ☒ House ☐ President ☐ Senate District: 10 State: NC

Calendar Year-To-Date Per Election for Office Sought: 7960.00

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

Full Name of Payee
Hodges, Joshua, , ,

Mailing Address 3724 Vestal Rd

City: Jonesville | State: NC | Zip Code: 28642

Purpose of Expenditure: Canvassing

Category/ Type:

Date of Public Distribution/Dissemination: 08 / 27 / 2026

Amount: 210.00

Transaction ID : DBB085CDB9846D8CFCB

Date of Disbursement or Obligation: 09 / 03 / 2026

Name of Federal Candidate
BELL, ASHLEY, , ,

☒ Support ☐ Oppose

Office Sought: ☒ House ☐ President ☐ Senate District: 10 State: NC

Calendar Year-To-Date Per Election for Office Sought: 8170.00

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

(a) SUBTOTAL of Itemized Independent Expenditures ▶	420.00
(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.

BARRICK, LAUREN, , ,
Signature

Date: 09 / 11 / 2026

Image# 202609119904198176

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

NAME OF COMMITTEE (In Full)
WE THE PEOPLE...CAN'T EVEN

FEC IDENTIFICATION NUMBER ▼
C C00957100

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
Barrick, Lauren, , ,

Mailing Address 1438 6th St. Cir NW

City: Hickory | State: NC | Zip Code: 28601

Purpose of Expenditure: Canvassing Literature

Category/ Type:

Date of Public Distribution/Dissemination: 08 / 06 / 2026

Amount: 1000.00

Transaction ID : 5E9D88368FA4B537AECB

Date of Disbursement or Obligation: 08 / 18 / 2026

Name of Federal Candidate
BELL, ASHLEY, , ,

☒ Support ☐ Oppose

Office Sought: ☒ House ☐ President ☐ Senate District: 10 State: NC

Calendar Year-To-Date Per Election for Office Sought: 1650.00

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 ☐ 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 ▶ 1000.00

(b) SUBTOTAL of Unitemized Independent Expenditures ▶

(c) TOTAL Independent Expenditures ▶ 11080.00

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.

BARRICK, LAUREN, , ,
Signature

Date 09 / 11 / 2026