

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) LGBTQ CONNECTION PAC			FEC IDENTIFICATION NUMBER ▼ C C00722884		
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on MM / DD / YYYYYY					
Full Name of Payee FLEISCHER, DAVID, , ,			Date of Public Distribution/Dissemination MM / DD / YYYYYY 08 / 03 / 2026		
Mailing Address 520 N. KINGS RD., APT. 111			Amount 9663.34		
City WEST HOLLYWOOD		State CA	Zip Code 90048		Transaction ID : EDT.E.127
Purpose of Expenditure TRAVEL EXPENSES FOR CANVASSER		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYYYY 08 / 03 / 2026		
Name of Federal Candidate POWELL, DENISE, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 02 ☐ President ☐ Senate State: NE		
Calendar Year-To-Date Per Election for Office Sought		11524.99		Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶	
Full Name of Payee GECAN, MICHAEL, , ,			Date of Public Distribution/Dissemination MM / DD / YYYYYY 08 / 03 / 2026		
Mailing Address 19 MARION RD., E.			Amount 1561.65		
City PRINCETON		State NJ	Zip Code 08540		Transaction ID : EDT.E.126
Purpose of Expenditure TRAVEL EXPENSES FOR CANVASSER		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYYYY 08 / 03 / 2026		
Name of Federal Candidate POWELL, DENISE, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 02 ☐ President ☐ Senate State: NE		
Calendar Year-To-Date Per Election for Office Sought		11524.99		Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			11224.99		
(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 HARDY, NATHAN, , ,			Date MM / DD / YYYYYY 08 / 05 / 2026		

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(Schedule E)PAGE 2 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) LGBTQ CONNECTION PAC			FEC IDENTIFICATION NUMBER ▼ C C00722884		
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 M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y					
Full Name of Payee MT. MORIAH MISSIONARY BAPTIST CHURCH			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 08 / 03 / 2026 M M M / D D D / Y Y Y Y Y Y		
Mailing Address 2602 N. 24TH STREET			Amount 300.00		
City OMAHA State NE Zip Code 68110		Transaction ID : EDT.E.128 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 08 / 03 / 2026 M M M / D D D / Y Y Y Y Y Y			
Purpose of Expenditure FACILITY RENTAL FOR CANVASSING		Category/Type 24E			
Name of Federal Candidate POWELL, DENISE, , ,			☒ Support ☐ Oppose		Office Sought: ☒ House ☐ Senate District: 02 State: NE
Calendar Year-To-Date Per Election for Office Sought 11524.99			Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶		
Full Name of Payee			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y		
Mailing Address			Amount 		
City State Zip Code		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y			
Purpose of Expenditure		Category/Type			
Name of Federal Candidate			☐ Support ☐ Oppose		Office Sought: ☐ House ☐ Senate District: State:
Calendar Year-To-Date Per Election for Office Sought 			Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶ 300.00 (b) SUBTOTAL of Unitemized Independent Expenditures ▶ (c) TOTAL Independent Expenditures..... ▶ 11524.99					
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 HARDY, NATHAN, , , Date M M M / D D D / Y Y Y Y Y Y 08 / 05 / 2026 M M M / D D D / Y Y Y Y Y Y					