

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

NAME OF COMMITTEE (In Full) Wyoming Way Action PAC			FEC IDENTIFICATION NUMBER ▼ C C00949115		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on			MM / DD / YYYY		
Full Name of Payee Liberty Mailing LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 13 / 2026			
Mailing Address PO Box 5053 125 W. McKinley Way		Amount 118316.30			
City Youngstown	State OH	Zip Code 44514	Transaction ID : SE.4201		
Purpose of Expenditure Live Calls and Texting		Category/ Type 001	Date of Disbursement or Obligation MM / DD / YYYY 08 / 13 / 2026		
Name of Federal Candidate FRIESS, STEPHEN, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 00 ☐ President ☐ Senate State: WY		
Calendar Year-To-Date Per Election for Office Sought		1400587.61	Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶		
Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY			
Mailing Address		Amount			
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY		
Purpose of Expenditure		Category/ Type			
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.....		118316.30			
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures.....		118316.30			
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 West, Amanda, , ,		Date MM / DD / YYYY 08 / 14 / 2026			