

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

NAME OF COMMITTEE (In Full) AMERICA'S RENEWAL PAC, INC.		FEC IDENTIFICATION NUMBER ▼ C C00902106	
Check if ☐ 24-hour report ☒ 48-hour report		☒ New report ☐ Amends report filed on	

Full Name of Payee SHOP SAVVY BROWARD, INC.			Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 20 / 2026		
Mailing Address 16280 S POST RD APT 202			Amount 2527.25		
City WESTON	State FL	Zip Code 33331	Transaction ID : SE24.35499		
Purpose of Expenditure PRINTING		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 07 / 13 / 2026		
Name of Federal Candidate CARBONARA, MICHAEL, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 22 ☐ President ☐ Senate State: FL		
Calendar Year-To-Date Per Election for Office Sought		68979.17	Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶		

Full Name of Payee ELIAS, BRANDON, , ,			Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 20 / 2026		
Mailing Address 11440 NW 42ND STREET			Amount 660.00		
City CORAL SPRINGS	State FL	Zip Code 33065	Transaction ID : SE24.35501		
Purpose of Expenditure CANVASSING		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 07 / 20 / 2026		
Name of Federal Candidate CARBONARA, MICHAEL, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 22 ☐ President ☐ Senate State: FL		
Calendar Year-To-Date Per Election for Office Sought		68979.17	Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	3187.25
(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.

BURFORD, FRANK, , ,

Signature

Date

MM / DD / YYYY
07 / 22 / 2026

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

NAME OF COMMITTEE (In Full) AMERICA'S RENEWAL PAC, INC.		FEC IDENTIFICATION NUMBER ▼ C C00902106
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee ELIAS, GREG, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 20 / 2026
Mailing Address 11440 NW 42ND STREET		Amount 660.00
City CORAL SPRINGS	State FL	Zip Code 33065
Purpose of Expenditure CANVASSING	Category/ Type	Transaction ID : SE24.35500 Date of Disbursement or Obligation MM / DD / YYYY 07 / 20 / 2026
Name of Federal Candidate CARBONARA, MICHAEL, , ,	☒ Support ☐ Oppose	Office Sought: ☒ House District: 22 ☐ President ☐ Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 68979.17		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
Purpose of Expenditure	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY
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.....▶	660.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	3847.25

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.

BURFORD, FRANK, , ,

Signature

Date

MM / DD / YYYY
07 / 22 / 2026