

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

NAME OF COMMITTEE (In Full) CONSERVATIVES FOR AMERICAN EXCELLENCE INC.		FEC IDENTIFICATION NUMBER ▼ C C00835967
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee MHB MEDIA INC.		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 15 / 2026
Mailing Address PO BOX 3033		Amount 49000.00
City ARLINGTON	State VA	Zip Code 22203
Purpose of Expenditure MEDIA PRODUCTION & ADVERTISEMENT	Category/ Type 004	Transaction ID : E-2107 Date of Disbursement or Obligation MM / DD / YYYY 08 / 14 / 2026
Name of Federal Candidate GRAY, CHARLES, , ,	☐ Support ☒ Oppose	Office Sought: ☒ House District: 00 ☐ President ☐ Senate State: WY
Calendar Year-To-Date Per Election for Office Sought 600642.45		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶

Full Name of Payee ALLIANCE FORGE CORPORATION		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 14 / 2026
Mailing Address 5648 SPANDRELL CIRCLE		Amount 1427.51
City SPARKS	State NV	Zip Code 89436
Purpose of Expenditure TEXT MESSAGE SERVICES	Category/ Type 004	Transaction ID : E-2114 Date of Disbursement or Obligation MM / DD / YYYY 08 / 14 / 2026
Name of Federal Candidate STRADA, JOE, , ,	☒ Support ☐ Oppose	Office Sought: ☒ House District: 11 ☐ President ☐ Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 216236.72		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	50427.51
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	50427.51

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.

HASTIE, CHRISSIE, , ,

Signature

Date

MM / DD / YYYY
08 / 15 / 2026