

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

NAME OF COMMITTEE (In Full) Gun Rights America			FEC IDENTIFICATION NUMBER ▼ C C00742635	
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on			M M / D D / Y Y Y Y Y Y	
Full Name of Payee National Association for Gun Rights [MEMO ITEM]		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 14 / 2026		
Mailing Address 201 Commonwealth Dr #201		Amount 2460.00		
City Greenville	State SC	Zip Code 29615-4814	Transaction ID : E2AB8855C70454FD3870	
Purpose of Expenditure Estimated Texting Voter Contact		Category/ Type	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate Gallrein, Ed, ,		☐ Support ☒ Oppose	Office Sought: ☒ House District: 04 ☐ President ☐ Senate State: KY	
Calendar Year-To-Date Per Election for Office Sought		46674.26	Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶	
Full Name of Payee National Association for Gun Rights [MEMO ITEM]		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 14 / 2026		
Mailing Address 201 Commonwealth Dr #201		Amount 9.00		
City Greenville	State SC	Zip Code 29615-4814	Transaction ID : E21E577C267C74D528F7	
Purpose of Expenditure Estimated Email Voter Contact		Category/ Type	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate Gallrein, Ed, ,		☐ Support ☒ Oppose	Office Sought: ☒ House District: 04 ☐ President ☐ Senate State: KY	
Calendar Year-To-Date Per Election for Office Sought		46674.26	Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....		0		
(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.				
Gates, Benjamin, , , Signature		Date M M / D D / Y Y Y Y Y Y 05 / 14 / 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) Gun Rights America		FEC IDENTIFICATION NUMBER ▼ C C00742635	
Check if ☒ 24-hour report ☐ 48-hour report		☒ New report ☐ Amends report filed on	

Full Name of Payee National Association for Gun Rights X		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 14 / 2026	
Mailing Address 201 Commonwealth Dr #201		Amount 9.00	
City Greenville	State SC	Zip Code 29615-4814	Transaction ID : ED0AAE6FA0EAF4AC285! Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure Estimated Email Voter Contact		Category/ Type	
Name of Federal Candidate Massie, Thomas, ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 04 ☐ President ☐ Senate State: KY
Calendar Year-To-Date Per Election for Office Sought		46674.26	Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶

Full Name of Payee National Association for Gun Rights X		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 19 / 2026	
Mailing Address 201 Commonwealth Dr #201		Amount 1230.00	
City Greenville	State SC	Zip Code 29615-4814	Transaction ID : E6FD186287E35402680F Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure Estimated Texting Voter Contact		Category/ Type	
Name of Federal Candidate Massie, Thomas, ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 04 ☐ President ☐ Senate State: KY
Calendar Year-To-Date Per Election for Office Sought		47904.26	Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	2469.00

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.

Gates, Benjamin, , ,

Signature

Date

MM / DD / YYYY
05 / 14 / 2026