

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

NAME OF COMMITTEE (In Full) SENATE CONSERVATIVES ACTION		FEC IDENTIFICATION NUMBER ▼ C C00524181
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee BELIEVE MEDIA LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 10 / 2026
Mailing Address 15 E MARKET ST		Amount 1111.11
City LEESBURG	State VA	Zip Code 20176
Purpose of Expenditure IE-MARSHALL-DIGITAL MARKETING	Category/ Type	Transaction ID : EA2D5B31178024F89A0A Date of Disbursement or Obligation MM / DD / YYYY 08 / 07 / 2026
Name of Federal Candidate MARSHALL, ROGER, W, ,	☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: KS
Calendar Year-To-Date Per Election for Office Sought	1111.11	Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶

Full Name of Payee ALLEGIANCE DIRECT		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 20 / 2026
Mailing Address 15 N KING ST STE 205		Amount 6483.27
City LEESBURG	State VA	Zip Code 20176-2848
Purpose of Expenditure IE-MARSHALL-DIRECT MAIL PRODUCTION	Category/ Type	Transaction ID : E2959382F96AE41DBAD2 Date of Disbursement or Obligation MM / DD / YYYY 08 / 21 / 2026
Name of Federal Candidate MARSHALL, ROGER, W, ,	☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: KS
Calendar Year-To-Date Per Election for Office Sought	7594.38	Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	7594.38
(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.

KILGORE, PAUL, , ,

Signature

Date

MM / DD / YYYY
08 / 25 / 2026

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

NAME OF COMMITTEE (In Full) SENATE CONSERVATIVES ACTION			FEC IDENTIFICATION NUMBER ▼ C C00524181		
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 POP ACTA			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 08 / 21 / 2026 M M M / D D D / Y Y Y Y Y Y		
Mailing Address 123 N COLLEGE AVE STE 390			Amount 555.56		
City State Zip Code FORT COLLINS CO 80524-2489		Transaction ID : E3B98C804F01C44A1BAA Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 08 / 21 / 2026 M M M / D D D / Y Y Y Y Y Y			
Purpose of Expenditure IE-MARSHALL-DIGITAL MARKETING		Category/ Type			
Name of Federal Candidate MARSHALL, ROGER, W, ,			☒ Support ☐ Oppose Office Sought: ☐ House ☒ Senate District: _____ ☐ President State: KS		
Calendar Year-To-Date Per Election for Office Sought 8149.94			Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶ _____		
Full Name of Payee ALLEGIANCE DIRECT			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 08 / 24 / 2026 M M M / D D D / Y Y Y Y Y Y		
Mailing Address 15 N KING ST STE 205			Amount 3068.28		
City State Zip Code LEESBURG VA 20176-2848		Transaction ID : E9CB0E261EB6A4009BF9 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 08 / 24 / 2026 M M M / D D D / Y Y Y Y Y Y			
Purpose of Expenditure IE-MARSHALL-DIRECT MAIL PRODUCTION		Category/ Type			
Name of Federal Candidate MARSHALL, ROGER, W, ,			☒ Support ☐ Oppose Office Sought: ☐ House ☒ Senate District: _____ ☐ President State: KS		
Calendar Year-To-Date Per Election for Office Sought 11218.22			Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			3623.84		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶			11218.22		
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 KILGORE, PAUL, , , Date M M M / D D D / Y Y Y Y Y Y 08 / 25 / 2026 M M M / D D D / Y Y Y Y Y Y					