

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

NAME OF COMMITTEE (In Full) Protect Progress			FEC IDENTIFICATION NUMBER ▼ C C00848440		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on			MM / DD / YYYY		
Full Name of Payee Kinetic Campaigns			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 12 / 2026		
Mailing Address 4304 Evergreen Lane			Amount 50571.15		
City Annandale		State VA	Zip Code 22003	Transaction ID : V899BD255CD0F6A711D9	
Purpose of Expenditure IE-Frankel-Direct Mail Production, Printing, Postage		Category/ Type	004	Date of Disbursement or Obligation MM / DD / YYYY 08 / 03 / 2026	
Name of Federal Candidate Frankel, Lois, , Rep.,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 23 ☐ President ☐ Senate State: FL		
Calendar Year-To-Date Per Election for Office Sought		151713.45		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶	
Full Name of Payee Kinetic Campaigns			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 12 / 2026		
Mailing Address 4304 Evergreen Lane			Amount 60274.78		
City Annandale		State VA	Zip Code 22003	Transaction ID : V8EFCD4D3356AC46CF43	
Purpose of Expenditure IE-Gilbert-Direct Mail Production, Printing, Postage		Category/ Type	004	Date of Disbursement or Obligation MM / DD / YYYY 08 / 06 / 2026	
Name of Federal Candidate Gilbert, Oliver, , ,		☐ Support ☒ Oppose	Office Sought: ☒ House District: 24 ☐ President ☐ Senate State: FL		
Calendar Year-To-Date Per Election for Office Sought		2056912.22		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			110845.93		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶			110845.93		
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 Philipczyk, Brandon, , ,			Date MM / DD / YYYY 08 / 13 / 2026		