

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

NAME OF COMMITTEE (In Full) CONSERVATIVE FUTURE FUND			FEC IDENTIFICATION NUMBER ▼ C C00878264	
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 DTC MESSAGING			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 04 / 2026	
Mailing Address 716 GIDDINGS AVE #41			Amount 22445.14	
City ANNAPOLIS		State MD	Zip Code 21401	
Purpose of Expenditure MMS MESSAGING		Category/ Type		Transaction ID : SE24.35592 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 05 / 2026
Name of Federal Candidate HILLEARY, WILLIAM, V., ,			Office Sought: ☒ House District: 06 ☐ President ☐ Senate State: TN	
Calendar Year-To-Date Per Election for Office Sought 346093.14			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶ _____	
Full Name of Payee			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y	
Mailing Address			Amount 	
City		State	Zip Code	
Purpose of Expenditure		Category/ Type		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Name of Federal Candidate			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..... ▶			22445.14	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶				
(c) TOTAL Independent Expenditures..... ▶			22445.14	
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 RUTLAND, JANNA, , ,			Date M M / D D / Y Y Y Y Y Y 08 / 05 / 2026	