

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

NAME OF COMMITTEE (In Full) Make Liberty Win			FEC IDENTIFICATION NUMBER ▼ C C00731133		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on			MM / DD / YYYY		
Full Name of Payee VisibleTrends			Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 04 / 2026		
Mailing Address 3139 Republic Blvd N			Amount 10000.00		
City Toledo	State OH	Zip Code 43615-1507	Transaction ID : E2DDB9866F7A7465289D		
Purpose of Expenditure Carey Acct: Phone Calls		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 05 / 04 / 2026		
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		942087.00	Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶		
Full Name of Payee Propellant Media			Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 07 / 2026		
Mailing Address 976 Brady Ave NW Suite 100			Amount 5800.00		
City Atlanta	State GA	Zip Code 30318-5699	Transaction ID : E98C1D815DFAF44E9B80		
Purpose of Expenditure Carey Acct: Digital Ads		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 05 / 04 / 2026		
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		957887.00	Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			15800.00		
(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.					
Signature Curtis, Elizabeth, , ,			Date MM / DD / YYYY 05 / 05 / 2026		

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Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee VisibleTrends		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 07 / 2026
Mailing Address 3139 Republic Blvd N		Amount 10000.00
City Toledo	State OH	Zip Code 43615-1507
Purpose of Expenditure Carey Acct: Phone Calls		Category/Type
Name of Federal Candidate Massie, Thomas, , ,		☒ Support ☐ Oppose
Office Sought: ☐ President ☐ Senate		District: 04 State: KY
Calendar Year-To-Date Per Election for Office Sought		957887.00
Disbursement For: ☒ Primary ☐ General		2026
Other (specify) ▶		

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address		Amount
City	State	Zip Code
Purpose of Expenditure		Category/Type
Name of Federal Candidate		☐ Support ☐ Oppose
Office Sought: ☐ President ☐ Senate		District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☐ General
Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	10000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	25800.00

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.

Curtis, Elizabeth, , ,
Signature

Date MM / DD / YYYY
05 / 05 / 2026