

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 5
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) SENATE CONSERVATIVES FUND			FEC IDENTIFICATION NUMBER ▼ C C00448696		
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					
Full Name of Payee SENATE CONSERVATIVES FUND			Date of Public Distribution/Dissemination M M M D D D Y Y Y Y Y Y 01 14 2026		
Mailing Address 300 INDEPENDENCE AVE SE			Amount 167.33		
City WASHINGTON	State DC	Zip Code 20003-1021	Transaction ID : E54E5B85464C6478AB6F Date of Disbursement or Obligation M M M D D D Y Y Y Y Y Y 01 14 2026		
Purpose of Expenditure IE- MOORE - DONATION PROCESSING		Category/ Type			
Name of Federal Candidate MOORE, FELIX, BARRY, ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: <u>AL</u>		
Calendar Year-To-Date Per Election for Office Sought		75505.68	Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶ _____		
Full Name of Payee SENATE CONSERVATIVES FUND			Date of Public Distribution/Dissemination M M M D D D Y Y Y Y Y Y 01 21 2026		
Mailing Address 300 INDEPENDENCE AVE SE			Amount 59.85		
City WASHINGTON	State DC	Zip Code 20003-1021	Transaction ID : EC1FFD4F8FD274B84814 Date of Disbursement or Obligation M M M D D D Y Y Y Y Y Y 01 21 2026		
Purpose of Expenditure IE- MOORE - DONATION PROCESSING		Category/ Type			
Name of Federal Candidate MOORE, FELIX, BARRY, ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: <u>AL</u>		
Calendar Year-To-Date Per Election for Office Sought		75565.53	Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			227.18		
(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 <u>KILGORE, PAUL, , ,</u>			Date M M M D D D Y Y Y Y Y Y 02 20 2026		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 2 OF 5
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) SENATE CONSERVATIVES FUND		FEC IDENTIFICATION NUMBER ▼ C C00448696	
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY	

Full Name of Payee SENATE CONSERVATIVES FUND		Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 28 / 2026	
Mailing Address 300 INDEPENDENCE AVE SE		Amount 109.20	
City WASHINGTON	State DC	Zip Code 20003-1021	Transaction ID : E77F981314DDE44B285A
Purpose of Expenditure IE- MOORE - DONATION PROCESSING		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 01 / 28 / 2026
Name of Federal Candidate MOORE, FELIX, BARRY, ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: AL
Calendar Year-To-Date Per Election for Office Sought		75674.73	Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶

Full Name of Payee ENVISION MARKETING		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 02 / 2026	
Mailing Address 148 GRAVES MILL RD		Amount 9022.57	
City LYNCHBURG	State VA	Zip Code 24502-4202	Transaction ID : EBBFC2D1CEFE246FB8B
Purpose of Expenditure IE-MOORE-DIRECT MAIL PRODUCTION		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 02 / 02 / 2026
Name of Federal Candidate MOORE, FELIX, BARRY, ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: AL
Calendar Year-To-Date Per Election for Office Sought		84697.30	Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	9131.77
(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
02 / 20 / 2026

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 3 OF 5
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) SENATE CONSERVATIVES FUND		FEC IDENTIFICATION NUMBER ▼ C C00448696
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee SENATE CONSERVATIVES FUND		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 04 / 2026
Mailing Address 300 INDEPENDENCE AVE SE		Amount 30.50
City WASHINGTON	State DC	Zip Code 20003-1021
Purpose of Expenditure IE- MOORE - DONATION PROCESSING	Category/ Type	Transaction ID : EF358C6F0290F40DB870 Date of Disbursement or Obligation MM / DD / YYYY 02 / 04 / 2026
Name of Federal Candidate MOORE, FELIX, BARRY, ,	☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: AL
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶

Full Name of Payee TMA DIRECT		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 05 / 2026
Mailing Address 1900 RESTON METRO PLZ STE 600		Amount 277.78
City RESTON	State VA	Zip Code 20190-5952
Purpose of Expenditure IE-MOORE-DIGITAL MARKETING	Category/ Type	Transaction ID : EB3879650C6BC47B8883 Date of Disbursement or Obligation MM / DD / YYYY 02 / 05 / 2026
Name of Federal Candidate MOORE, FELIX, BARRY, ,	☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: AL
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	308.28
(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
02 / 20 / 2026

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 4 OF 5
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) SENATE CONSERVATIVES FUND		FEC IDENTIFICATION NUMBER ▼ C C00448696
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee SENATE CONSERVATIVES FUND		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 11 / 2026
Mailing Address 300 INDEPENDENCE AVE SE		Amount 54.25
City WASHINGTON	State DC	Zip Code 20003-1021
Purpose of Expenditure IE- MOORE - DONATION PROCESSING	Category/ Type	Transaction ID : E3DE77924435E49D6B35 Date of Disbursement or Obligation MM / DD / YYYY 02 / 11 / 2026
Name of Federal Candidate MOORE, FELIX, BARRY, ,		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: AL
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶

Full Name of Payee SENATE CONSERVATIVES FUND		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 19 / 2026
Mailing Address 300 INDEPENDENCE AVE SE		Amount 55.55
City WASHINGTON	State DC	Zip Code 20003-1021
Purpose of Expenditure IE- MOORE - DONATION PROCESSING	Category/ Type	Transaction ID : E9EA794E006F84F53A0E Date of Disbursement or Obligation MM / DD / YYYY 02 / 19 / 2026
Name of Federal Candidate MOORE, FELIX, BARRY, ,		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: AL
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	109.80
(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
02 / 20 / 2026

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 5 OF 5
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) SENATE CONSERVATIVES FUND			FEC IDENTIFICATION NUMBER ▼ C C00448696	
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on / /				
Full Name of Payee ENVISION MARKETING			Date of Public Distribution/Dissemination / /	
Mailing Address 148 GRAVES MILL RD			Amount 1455.30	
City LYNCHBURG State VA Zip Code 24502-4202		Transaction ID : E4C225ACD06E94B0D800 Date of Disbursement or Obligation / /		
Purpose of Expenditure IE-MOORE DIRECT MAIL PRODUCTION		Category/Type		
Name of Federal Candidate MOORE, FELIX, BARRY, ,		☒ Support ☐ Oppose Office Sought: ☐ House ☒ Senate District: _____ ☐ President State: AL		
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶ _____		
Full Name of Payee			Date of Public Distribution/Dissemination / /	
Mailing Address			Amount 	
City State Zip Code		Date of Disbursement or Obligation / /		
Purpose of Expenditure		Category/Type		
Name of Federal Candidate		☐ Support ☐ Oppose Office Sought: ☐ House ☐ Senate District: _____ ☐ President State: _____		
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			1455.30	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶				
(c) TOTAL Independent Expenditures..... ▶			11232.33	
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 / / 02 / 20 / 2026	