

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 4
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Americans for Prosperity Action, Inc. (AFP Action) DBA CVA Action and DBA LIBRE Action		FEC IDENTIFICATION NUMBER ▼ C C00687103
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee PEOPLE WHO THINK		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 18 / 2026
Mailing Address 4522 LA-22 STE. 7		Amount 11163.15
City MANDEVILLE	State LA	Zip Code 70471
Purpose of Expenditure MAILER PRODUCTION	Category/ Type 004	Transaction ID : SE24.38587 Date of Disbursement or Obligation MM / DD / YYYY 08 / 19 / 2026
Name of Federal Candidate SULLIVAN, DAN, ,		☒ Support ☐ Oppose Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: AK
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶

Full Name of Payee PEOPLE WHO THINK		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 18 / 2026
Mailing Address 4522 LA-22 STE. 7		Amount 107194.33
City MANDEVILLE	State LA	Zip Code 70471
Purpose of Expenditure MAILER PRODUCTION	Category/ Type 004	Transaction ID : SE24.38590 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate ROGERS, MICHAEL, J, ,		☒ Support ☐ Oppose Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: MI
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	118357.48
(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.

Clancy, Margee, , , Treasurer

Signature

Date

MM / DD / YYYY
08 / 20 / 2026

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Full Name of Payee PEOPLE WHO THINK		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 18 / 2026
Mailing Address 4522 LA-22 STE. 7		Amount 70032.70
City MANDEVILLE	State LA	Zip Code 70471
Purpose of Expenditure MAILER PRODUCTION	Category/ Type 004	Transaction ID : SE24.38592 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate HUSTED, JON, , ,		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶

Full Name of Payee TARGETED VICTORY LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 18 / 2026
Mailing Address 2311 WILSON BOULEVARD SUITE 200		Amount 2500.00
City ARLINGTON	State VA	Zip Code 22201
Purpose of Expenditure MEDIA PRODUCTION	Category/ Type 004	Transaction ID : SE24.38589 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate EL-SAYED, ABDUL, , ,		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: MI
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	72532.70
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Clancy, Margee, , , Treasurer

Signature

Date

MM / DD / YYYY
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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 UNITED STATES POSTAL SERVICE		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 18 / 2026
Mailing Address 470 L'ENFANT PLAZA SW STE 604		Amount 20603.44
City WASHINGTON	State DC	Zip Code 20024
Purpose of Expenditure MAILER POSTAGE	Category/ Type 004	Transaction ID : SE24.38588 Date of Disbursement or Obligation MM / DD / YYYY 08 / 18 / 2026
Name of Federal Candidate SULLIVAN, DAN, ,		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: AK
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶

Full Name of Payee UNITED STATES POSTAL SERVICE		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 18 / 2026
Mailing Address 470 L'ENFANT PLAZA SW STE 604		Amount 358603.55
City WASHINGTON	State DC	Zip Code 20024
Purpose of Expenditure MAILER POSTAGE	Category/ Type 004	Transaction ID : SE24.38591 Date of Disbursement or Obligation MM / DD / YYYY 08 / 18 / 2026
Name of Federal Candidate ROGERS, MICHAEL, J, ,		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: MI
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	379206.99
(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.

Clancy, Margee, , , Treasurer

Signature

Date

MM / DD / YYYY
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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 UNITED STATES POSTAL SERVICE			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 18 / 2026		
Mailing Address 470 L'ENFANT PLAZA SW STE 604			Amount 218603.72		
City WASHINGTON		State DC	Zip Code 20024		Transaction ID : SE24.38593
Purpose of Expenditure MAILER POSTAGE		Category/Type 004		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 18 / 2026	
Name of Federal Candidate HUSTED, JON, , ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: OH
Calendar Year-To-Date Per Election for Office Sought			4545958.68 Disbursement For: ☐ Primary ☒ General 2026 ☐ 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		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Purpose of Expenditure		Category/Type			
Name of Federal Candidate			☐ Support ☐ Oppose		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..... ▶ 218603.72 (b) SUBTOTAL of Unitemized Independent Expenditures ▶ (c) TOTAL Independent Expenditures..... ▶ 788700.89					
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. Clancy, Margee, , , Treasurer Signature Date M M / D D / Y Y Y Y Y Y 08 / 20 / 2026					