

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 VOTERS ALLIANCE			FEC IDENTIFICATION NUMBER ▼ C C00866368	
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on MM / DD / YYYY				
Full Name of Payee Red Maverick Media LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 24 / 2024	
Mailing Address 1426 N 3rd St, Ste. 310			Amount 44702.00	
City Harrisburg State PA Zip Code 17102		Transaction ID : SE.4215 Date of Disbursement or Obligation MM / DD / YYYY 02 / 20 / 2024		
Purpose of Expenditure IE-Von Canon-Direct Mail		Category/Type 004		
Name of Federal Candidate VON CANON, FRED, , ,			☐ Support Office Sought: ☒ House District: 13 ☒ Oppose ☐ President ☐ Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶	
Full Name of Payee			Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address			Amount 	
City State Zip Code			Date of Disbursement or Obligation MM / DD / YYYY	
Purpose of Expenditure		Category/Type		
Name of Federal Candidate			Office Sought: ☐ House District: _____ ☐ Oppose ☐ President ☐ Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶ 44702.00 (b) SUBTOTAL of Unitemized Independent Expenditures ▶ (c) TOTAL Independent Expenditures..... ▶ 44702.00				
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. Signature Lisker, Lisa, , , Date MM / DD / YYYY 02 / 25 / 2024				