

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

NAME OF COMMITTEE (In Full) DEFENDING OUR VALUES PAC			FEC IDENTIFICATION NUMBER ▼ C C00928390		
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 Advocacy Marketing Partners			Date of Public Distribution/Dissemination M M M D D D Y Y Y Y Y Y 05 29 2026		
Mailing Address 1260 E Stringham Ave Suite 400			Amount 179500.00		
City State Zip Code Salt Lake City UT 84106		Transaction ID : SE.4307 Date of Disbursement or Obligation M M M D D D Y Y Y Y Y Y 05 26 2026			
Purpose of Expenditure Digital Ad Buy		Category/ Type		Name of Federal Candidate MALOY, CELESTE, , ,	
		☒ Support ☐ Oppose		Office Sought: ☒ House District: 03 ☐ President ☐ Senate State: UT	
Calendar Year-To-Date Per Election for Office Sought 179500.00			Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶		
Full Name of Payee SRCP Media			Date of Public Distribution/Dissemination M M M D D D Y Y Y Y Y Y 05 29 2026		
Mailing Address 201 North Union Street Suite 200			Amount 564435.00		
City State Zip Code Alexandria VA 22314		Transaction ID : SE.4309 Date of Disbursement or Obligation M M M D D D Y Y Y Y Y Y 05 27 2026			
Purpose of Expenditure TV - Buy		Category/ Type		Name of Federal Candidate MALOY, CELESTE, , ,	
		☒ Support ☐ Oppose		Office Sought: ☒ House District: 03 ☐ President ☐ Senate State: UT	
Calendar Year-To-Date Per Election for Office Sought 743935.00			Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			743935.00		
(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 M'Liss, Hadley, , ,			Date M M M D D D Y Y Y Y Y Y 05 31 2026		

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NAME OF COMMITTEE (In Full) DEFENDING OUR VALUES PAC		FEC IDENTIFICATION NUMBER ▼ C C00928390
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee SRCP Media		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 29 / 2026
Mailing Address 201 North Union Street Suite 200		Amount 10421.00
City Alexandria	State VA	Zip Code 22314
Purpose of Expenditure Production - TV	Category/ Type	Transaction ID : SE.4311 Date of Disbursement or Obligation MM / DD / YYYY 05 / 29 / 2026
Name of Federal Candidate MALOY, CELESTE, ,	☒ Support ☐ Oppose	Office Sought: ☒ House District: 03 ☐ President ☐ Senate State: UT
Calendar Year-To-Date Per Election for Office Sought 795904.00		Disbursement For: ☒ Primary ☐ General ☐ 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	Date of Disbursement or Obligation MM / DD / YYYY
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.....▶	10421.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	754356.00

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.

M'Liss, Hadley, , ,

Signature

Date

MM / DD / YYYY
05 / 31 / 2026