

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 3
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 M M M / D D D / Y Y Y Y Y Y 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 M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y 09 09 2026		
Mailing Address 300 INDEPENDENCE AVE SE			Amount 303.20		
City WASHINGTON		State DC	Zip Code 20003-1021		Transaction ID : E58BDA163D6A54782834
Purpose of Expenditure IE- HAGEMAN - DONATION PROCESSING		Category/ Type		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y 09 09 2026	
Name of Federal Candidate HAGEMAN, HARRIET, , ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: WY
Calendar Year-To-Date Per Election for Office Sought 13165.54			Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶ _____		
Full Name of Payee POP ACTA			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y 09 11 2026		
Mailing Address 441 N LEE ST			Amount 625.00		
City ALEXANDRIA		State VA	Zip Code 22314-2301		Transaction ID : EA888A40E8CA14DF9B35
Purpose of Expenditure IE-HAGEMAN-DIGITAL ADVERTISING		Category/ Type		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y 09 11 2026	
Name of Federal Candidate HAGEMAN, HARRIET, , ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: WY
Calendar Year-To-Date Per Election for Office Sought 13790.54			Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶					928.20
(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 KILGORE, PAUL, , ,			Date M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y 09 25 2026		

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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 09 / 15 / 2026
Mailing Address 300 INDEPENDENCE AVE SE		Amount 247.88
City WASHINGTON	State DC	Zip Code 20003-1021
Purpose of Expenditure IE- HAGEMAN - DONATION PROCESSING	Category/ Type	Transaction ID : E6CBDF18039F34EC7A52 Date of Disbursement or Obligation MM / DD / YYYY 09 / 15 / 2026
Name of Federal Candidate HAGEMAN, HARRIET, , ,		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: WY
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 09 / 16 / 2026
Mailing Address 1900 RESTON METRO PLZ STE 600		Amount 208.34
City RESTON	State VA	Zip Code 20190-5952
Purpose of Expenditure IE-HAGEMAN-DIGITAL MARKETING	Category/ Type	Transaction ID : E14F3487A59B14347A6B Date of Disbursement or Obligation MM / DD / YYYY 09 / 16 / 2026
Name of Federal Candidate HAGEMAN, HARRIET, , ,		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: WY
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	456.22
(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
09 / 25 / 2026

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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 SENATE CONSERVATIVES FUND		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 22 / 2026	
Mailing Address 300 INDEPENDENCE AVE SE		Amount 122.60	
City WASHINGTON	State DC	Zip Code 20003-1021	Transaction ID : EB969F431099E4C829A0
Purpose of Expenditure IE- HAGEMAN - DONATION PROCESSING		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 09 / 22 / 2026
Name of Federal Candidate HAGEMAN, HARRIET, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: WY
Calendar Year-To-Date Per Election for Office Sought		14369.36	Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶

Full Name of Payee ENVISION MARKETING		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 24 / 2026	
Mailing Address 148 GRAVES MILL RD		Amount 11162.65	
City LYNCHBURG	State VA	Zip Code 24502-4202	Transaction ID : E63395D5614834EE98F7
Purpose of Expenditure IE-HAGEMAN-DIRECT MAIL PRODUCTION		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 09 / 24 / 2026
Name of Federal Candidate HAGEMAN, HARRIET, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: WY
Calendar Year-To-Date Per Election for Office Sought		25532.01	Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	11285.25
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	12669.67

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
09 / 25 / 2026