

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

NAME OF COMMITTEE (In Full) Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼ C C00489799		
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 Assemble the Agency			Date of Public Distribution/Dissemination M M M D D D Y Y Y Y Y Y 07 31 2026		
Mailing Address 1001 Connecticut Ave NW			Amount 603752.00		
City State Zip Code Washington DC 20036-5504		Transaction ID : 500760186 Date of Disbursement or Obligation M M M D D D Y Y Y Y Y Y			
Purpose of Expenditure Estimated Cost of Dissemination of Digital Ads		Category/ Type 004			
Name of Federal Candidate Collins, Susan, , ,			☐ Support ☒ Oppose Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: ME		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶ _____		
Full Name of Payee Planned Parenthood Action Fund, Inc.			Date of Public Distribution/Dissemination M M M D D D Y Y Y Y Y Y 06 03 2026		
Mailing Address 123 William St			Amount 53.57		
City State Zip Code New York NY 10038-3804		Transaction ID : 500757154 Date of Disbursement or Obligation M M M D D D Y Y Y Y Y Y			
Purpose of Expenditure Staff Time for Voter Communications		Category/ Type 004			
Name of Federal Candidate Collins, Susan, , ,			☐ Support ☒ Oppose Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: ME		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			603805.57		
(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 Louie, Maggie, , ,			Date M M M D D D Y Y Y Y Y Y 08 01 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) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee Planned Parenthood Action Fund, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 09 / 2026
Mailing Address 123 William St		Amount 33.24
City New York	State NY	Zip Code 10038-3804
Purpose of Expenditure Staff Time for Voter Communications	Category/ Type 004	Transaction ID : 500757157 Date of Disbursement or Obligation MM / DD / YYYY 06 / 09 / 2026
Name of Federal Candidate Collins, Susan, , ,		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: ME
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶

Full Name of Payee Planned Parenthood Action Fund, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 14 / 2026
Mailing Address 123 William St		Amount 1822.31
City New York	State NY	Zip Code 10038-3804
Purpose of Expenditure Staff Time for Voter Communications	Category/ Type 004	Transaction ID : 500757149 Date of Disbursement or Obligation MM / DD / YYYY 06 / 14 / 2026
Name of Federal Candidate Collins, Susan, , ,		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: ME
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1855.55
(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.

Louie, Maggie, , ,

Signature

Date

MM / DD / YYYY
08 / 01 / 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) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee Planned Parenthood Action Fund, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 28 / 2026
Mailing Address 123 William St		Amount 852.37
City New York	State NY	Zip Code 10038-3804
Purpose of Expenditure Staff Time for Voter Communications	Category/ Type 004	Transaction ID : 500757150 Date of Disbursement or Obligation MM / DD / YYYY 06 / 28 / 2026
Name of Federal Candidate Collins, Susan, , , ☐ Support ☒ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: ME
Calendar Year-To-Date Per Election for Office Sought 754962.64		Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶ _____

Full Name of Payee Planned Parenthood Action Fund, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 05 / 2026
Mailing Address 123 William St		Amount 676.38
City New York	State NY	Zip Code 10038-3804
Purpose of Expenditure Estimated Cost for Staff Time for Voter Communications	Category/ Type 004	Transaction ID : 500760162 Date of Disbursement or Obligation MM / DD / YYYY 07 / 05 / 2026
Name of Federal Candidate Collins, Susan, , , ☐ Support ☒ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: ME
Calendar Year-To-Date Per Election for Office Sought 754962.64		Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1528.75
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Signature
Louie, Maggie, , ,

Date

MM / DD / YYYY
08 / 01 / 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) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ C C00489799
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 Planned Parenthood Action Fund, Inc.		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 19 / 2026	
Mailing Address 123 William St		Amount 224.77	
City New York	State NY	Zip Code 10038-3804	Transaction ID : 500760163
Purpose of Expenditure Estimated Cost for Staff Time for Voter Communications		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 07 / 19 / 2026
Name of Federal Candidate Collins, Susan, , ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: ME
Calendar Year-To-Date Per Election for Office Sought 754962.64		Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶ _____	

Full Name of Payee Planned Parenthood Maine Action Fund		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 06 / 02 / 2026	
Mailing Address 443 Congress St FI 3		Amount 200.00	
City Portland	State ME	Zip Code 04101-3531	Transaction ID : 500757160
Purpose of Expenditure Staff Time for Voter Communications		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Name of Federal Candidate Collins, Susan, , ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: ME
Calendar Year-To-Date Per Election for Office Sought 754962.64		Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	424.77
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Louie, Maggie, , ,

Signature

Date

M M / D D / Y Y Y Y Y Y
08 / 01 / 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) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if ☐ 24-hour report ☒ 48-hour report		☒ New report ☐ Amends report filed on	

Full Name of Payee Planned Parenthood Maine Action Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 17 / 2026	
Mailing Address 443 Congress St FI 3		Amount 1100.00	
City Portland	State ME	Zip Code 04101-3531	Transaction ID : 500757161
Purpose of Expenditure Staff Time for Voter Communications		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Collins, Susan, , ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: ME
Calendar Year-To-Date Per Election for Office Sought		754962.64	Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶

Full Name of Payee Porch Light Media, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 31 / 2026	
Mailing Address 439 Greene Ave Apt 1		Amount 146248.00	
City Brooklyn	State NY	Zip Code 11216-1146	Transaction ID : 500760164
Purpose of Expenditure Estimated Cost of Production of Digital Ads		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Collins, Susan, , ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: ME
Calendar Year-To-Date Per Election for Office Sought		754962.64	Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	147348.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	754962.64

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Louie, Maggie, , ,

Signature

Date

MM / DD / YYYY
08 / 01 / 2026