

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

NAME OF COMMITTEE (In Full) Wyoming Way Action PAC		FEC IDENTIFICATION NUMBER ▼ C C00949115	
Check if ☐ 24-hour report ☒ 48-hour report		☒ New report ☐ Amends report filed on	

Full Name of Payee Liberty Mailing LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 27 / 2026	
Mailing Address PO Box 5053 125 W. McKinley Way		Amount 44557.63	
City Youngstown	State OH	Zip Code 44514	Transaction ID : SE.4123
Purpose of Expenditure Direct Mail	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 07 / 27 / 2026	
Name of Federal Candidate FRIESS, STEPHEN, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 00 ☐ President ☐ Senate State: WY
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶	

Full Name of Payee Liberty Mailing LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 27 / 2026	
Mailing Address PO Box 5053 125 W. McKinley Way		Amount 44557.63	
City Youngstown	State OH	Zip Code 44514	Transaction ID : SE.4124
Purpose of Expenditure Direct Mail	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 07 / 27 / 2026	
Name of Federal Candidate FRIESS, STEPHEN, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 00 ☐ 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.....▶	89115.26
(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.

West, Amanda, , ,

Signature

Date

MM / DD / YYYY
07 / 27 / 2026

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

NAME OF COMMITTEE (In Full) Wyoming Way Action PAC		FEC IDENTIFICATION NUMBER ▼ C C00949115	
Check if ☐ 24-hour report ☒ 48-hour report		☒ New report ☐ Amends report filed on	

Full Name of Payee Liberty Mailing LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 27 / 2026	
Mailing Address PO Box 5053 125 W. McKinley Way		Amount 44557.63	
City Youngstown	State OH	Zip Code 44514	Transaction ID : SE.4125 Date of Disbursement or Obligation MM / DD / YYYY 07 / 27 / 2026
Purpose of Expenditure Direct Mail		Category/ Type 004	
Name of Federal Candidate FRIESS, STEPHEN, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 00 ☐ President ☐ Senate State: WY
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2026 ☐ 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		☐ 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.....▶	44557.63
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	133672.89

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.

West, Amanda, , ,

Signature

Date

MM / DD / YYYY
07 / 27 / 2026