

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

NAME OF COMMITTEE (In Full) PALMETTO FIRST PAC			FEC IDENTIFICATION NUMBER ▼ C C00956490	
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on			MM / DD / YYYY	
Full Name of Payee Hall, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 23 / 2026		
Mailing Address 920 US 64 Hwy W #513		Amount 8946.36		
City Apex	State NC	Zip Code 27523	Transaction ID : SE.4205	
Purpose of Expenditure Text Messaging		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 08 / 26 / 2026	
Name of Federal Candidate Graham, Darline, , ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: SC	
Calendar Year-To-Date Per Election for Office Sought		637544.25	Disbursement For: ☐ Primary ☐ General 2026 ☒ Other (specify) ▶ Runoff	
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..... ▶		8946.36		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶				
(c) TOTAL Independent Expenditures..... ▶		8946.36		
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.				
Reid, Katie, , , Signature		Date MM / DD / YYYY 08 / 24 / 2026		