

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) UNITED DEMOCRACY PROJECT ("UDP")		FEC IDENTIFICATION NUMBER ▼ C C00799031
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee Mail Matters LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 10 / 2026
Mailing Address 35 Cold Spring Rd Ste 111		Amount 50341.81
City Rocky Hill	State CT	Zip Code 06067-3161
Purpose of Expenditure Direct Mail	Category/ Type	Transaction ID : EC1125787E6044841B82 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Conyears-Ervin, Melissa, , , ☒ Support ☐ Oppose		Office Sought: ☒ House District: 07 ☐ President ☐ Senate State: IL
Calendar Year-To-Date Per Election for Office Sought 5028248.54		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶

Full Name of Payee MVAR Media LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 10 / 2026
Mailing Address 1421 Prince St Ste 320		Amount 162734.59
City Alexandria	State VA	Zip Code 22314-2805
Purpose of Expenditure Media Placement/Production	Category/ Type	Transaction ID : ED41798DD2DDDD4ACCB E Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Conyears-Ervin, Melissa, , , ☒ Support ☐ Oppose		Office Sought: ☒ House District: 07 ☐ President ☐ Senate State: IL
Calendar Year-To-Date Per Election for Office Sought 5028248.54		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	213076.40
(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.

D'Alessio, Christopher, , ,

Signature

Date

MM / DD / YYYY
03 / 11 / 2026

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Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on			MM / DD / YYYY		
Full Name of Payee Targeted Platform Media LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 10 / 2026			
Mailing Address PO Box 237		Amount 50000.00			
City Crownsville	State MD	Zip Code 21032-0237	Transaction ID : EBBBBDE0403484AF5B18		
Purpose of Expenditure Media Placement		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Friedman, Jason, ,		☐ Support ☒ Oppose	Office Sought: ☒ House District: 07 ☐ President ☐ Senate State: IL		
Calendar Year-To-Date Per Election for Office Sought		5028248.54	Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶		
Full Name of Payee Targeted Platform Media LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 10 / 2026			
Mailing Address PO Box 237		Amount 1450000.00			
City Crownsville	State MD	Zip Code 21032-0237	Transaction ID : E91AD2540049E498BBFF		
Purpose of Expenditure Media Placement		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Conyears-Ervin, Melissa, ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 07 ☐ President ☐ Senate State: IL		
Calendar Year-To-Date Per Election for Office Sought		5028248.54	Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures.....		1500000.00			
(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 D'Alessio, Christopher, , ,		Date MM / DD / YYYY 03 / 11 / 2026			

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Full Name of Payee MVAR Media LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 10 / 2026		
Mailing Address 1421 Prince St Ste 320		Amount 9748.29		
City Alexandria	State VA	Zip Code 22314-2805	Transaction ID : E7D01AA694DA14BB2AA6	
Purpose of Expenditure Media Production/Placement		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Friedman, Jason, , ,		☐ Support ☒ Oppose	Office Sought: ☒ House District: 07 ☐ President ☐ Senate State: IL	
Calendar Year-To-Date Per Election for Office Sought		5028248.54	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.....		9748.29		
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures.....		1722824.69		
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 D'Alessio, Christopher, , ,		Date MM / DD / YYYY 03 / 11 / 2026		