

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

NAME OF COMMITTEE (In Full) FREEDOM CAUCUS FUND			FEC IDENTIFICATION NUMBER ▼ C C00552851		
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on MM / DD / YYYY					
Full Name of Payee FREEDOM CAUCUS FUND			Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 30 / 2026		
Mailing Address PO BOX 96006			Amount 2.00		
City WASHINGTON		State DC	Zip Code 20090-6006		Transaction ID : E4D4F29437D3B43E7B50 Date of Disbursement or Obligation MM / DD / YYYY 06 / 30 / 2026
Purpose of Expenditure IE- OGLES - DONATION PROCESSING		Category/ Type			
Name of Federal Candidate OGLES, ANDY, , , IV			☒ Support ☐ Oppose		Office Sought: ☒ House District: 05 ☐ President ☐ Senate State: TN
Calendar Year-To-Date Per Election for Office Sought 49802.82			Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶		
Full Name of Payee FREEDOM CAUCUS FUND			Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 30 / 2026		
Mailing Address PO BOX 96006			Amount 175.00		
City WASHINGTON		State DC	Zip Code 20090-6006		Transaction ID : E49F6CF28887D4358B5F Date of Disbursement or Obligation MM / DD / YYYY 06 / 30 / 2026
Purpose of Expenditure IE- OGLES - DONATION PROCESSING		Category/ Type			
Name of Federal Candidate OGLES, ANDY, , , IV			☒ Support ☐ Oppose		Office Sought: ☒ House District: 05 ☐ President ☐ Senate State: TN
Calendar Year-To-Date Per Election for Office Sought 49802.82			Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			177.00		
(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 BROWN, MEGAN, , ,			Date MM / DD / YYYY 07 / 01 / 2026		

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) FREEDOM CAUCUS FUND		FEC IDENTIFICATION NUMBER ▼ C C00552851	
Check if ☐ 24-hour report ☒ 48-hour report		☒ New report ☐ Amends report filed on	

Full Name of Payee PBK COMMUNICATIONS, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 01 / 2026	
Mailing Address 2456 KIRK LN NW		Amount 234790.00	
City KENNESAW	State GA	Zip Code 30152-6237	Transaction ID : EB0587EA168F444DBA5F Date of Disbursement or Obligation MM / DD / YYYY 07 / 01 / 2026
Purpose of Expenditure IE- OGLES- MEDIA BUY		Category/ Type	
Name of Federal Candidate OGLES, ANDY, , , IV		☒ Support ☐ Oppose	Office Sought: ☒ House District: 05 ☐ President ☐ Senate State: TN
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..... ▶	234790.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	234967.00

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.

BROWN, MEGAN, , ,

Signature

Date

MM / DD / YYYY
07 / 01 / 2026