

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

NAME OF COMMITTEE (In Full) THANK YOU FOR YOUR ATTENTION TO THIS MATTER PAC	FEC IDENTIFICATION NUMBER ▼ C C00923516
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on	

Full Name of Payee EASTERN CAROLINA CONSERVATIVES FUND			Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 18 / 2026	
Mailing Address PO BOX 97275			Amount 8500.00	
City RALEIGH	State NC	Zip Code 27624	Transaction ID : SE.4122	
Purpose of Expenditure IN-KIND: PRODUCTION COST: TV AND CONNECTED TV		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 02 / 18 / 2026	
Name of Federal Candidate BUCKHOUT, LAURIE, ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 01 ☐ President ☐ Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought		191000.00	Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶	

Full Name of Payee SLMG LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 18 / 2026	
Mailing Address 1037 CUMMINGS CIR			Amount 62600.00	
City MOUNT PLEASANT	State SC	Zip Code 29464	Transaction ID : SE.4114	
Purpose of Expenditure PLACED MEDIA: CONNECTED TV		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 02 / 17 / 2026	
Name of Federal Candidate BUCKHOUT, LAURIE, ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 01 ☐ President ☐ Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought		100000.00	Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	71100.00
(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.

GANTT, CHARLES, , ,

Signature

Date

MM / DD / YYYY
02 / 18 / 2026

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(Schedule E)PAGE 2 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) THANK YOU FOR YOUR ATTENTION TO THIS MATTER PAC	FEC IDENTIFICATION NUMBER ▼ C C00923516
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Full Name of Payee SLMG LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 18 / 2026	
Mailing Address 1037 CUMMINGS CIR			Amount 37400.00	
City MOUNT PLEASANT	State SC	Zip Code 29464	Transaction ID : SE.4115	
Purpose of Expenditure PLACED MEDIA: TV		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 02 / 17 / 2026	
Name of Federal Candidate BUCKHOUT, LAURIE, ,		☒ Support ☐ Oppose	Office Sought: ☐ President ☐ Senate	District: 01 State: NC
Calendar Year-To-Date Per Election for Office Sought		37400.00	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: ☐ President ☐ Senate	District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	37400.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	108500.00

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.

GANTT, CHARLES, , ,

Signature

Date

MM / DD / YYYY
02 / 18 / 2026