

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

NAME OF COMMITTEE (In Full) MoveOn.Org Political Action			FEC IDENTIFICATION NUMBER ▼ C C00341396		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on			MM / DD / YYYY		
Full Name of Payee 202 Consulting Solutions LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 27 / 2026		
Mailing Address 412 N 45Th St Apt 202			Amount 8050.00		
City Seattle		State WA	Zip Code 98103-6464		Transaction ID : 500074393
Purpose of Expenditure Online Ads Placement - Estimate		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 02 / 27 / 2026		
Name of Federal Candidate ALLAM, NIDA, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 04 ☐ President ☐ Senate State: NC		
Calendar Year-To-Date Per Election for Office Sought		10960.65	Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶		
Full Name of Payee NP Agency			Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 27 / 2026		
Mailing Address 1100 G St NW Ste 750			Amount 1950.00		
City Washington		State DC	Zip Code 20005-7411		Transaction ID : 500074394
Purpose of Expenditure Online Ads Production - Estimate		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 02 / 27 / 2026		
Name of Federal Candidate ALLAM, NIDA, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 04 ☐ President ☐ Senate State: NC		
Calendar Year-To-Date Per Election for Office Sought		10960.65	Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			10000.00		
(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.					
Matzzie, Tom, , , Signature			Date MM / DD / YYYY 02 / 28 / 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 Prompt.lo		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 26 / 2026	
Mailing Address 14419 Greenwood Ave N Ste Pm A		Amount 121.37	
City Seattle	State WA	Zip Code 98133-6865	Transaction ID : 500074395
Purpose of Expenditure Text Messaging - Estimate		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 02 / 26 / 2026
Name of Federal Candidate ALLAM, NIDA, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 04 ☐ President ☐ Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶	

Full Name of Payee Upland Software, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 19 / 2026	
Mailing Address 401 Congress Ave Ste 1850		Amount 574.23	
City Austin	State TX	Zip Code 78701-3788	Transaction ID : 500074396
Purpose of Expenditure Text Messaging - Estimate		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 02 / 19 / 2026
Name of Federal Candidate ALLAM, NIDA, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 04 ☐ President ☐ Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	695.60
(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.

Matzzie, Tom, , ,

Signature

Date

MM / DD / YYYY
02 / 28 / 2026

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NAME OF COMMITTEE (In Full) MoveOn.Org Political Action		FEC IDENTIFICATION NUMBER ▼ C C00341396
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee Upland Software, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 27 / 2026
Mailing Address 401 Congress Ave Ste 1850		Amount 265.05
City Austin	State TX	Zip Code 78701-3788
Purpose of Expenditure Text Messaging - Estimate	Category/Type 004	Transaction ID : 500074392 Date of Disbursement or Obligation MM / DD / YYYY 02 / 27 / 2026
Name of Federal Candidate ALLAM, NIDA, , ,		☒ Support ☐ Oppose Office Sought: ☒ House ☐ Senate District: 04 ☐ President State: NC
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
Purpose of Expenditure	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate		Office Sought: ☐ House ☐ Senate District: _____ ☐ President State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	265.05
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	10960.65

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.

Matzzie, Tom, , ,
Signature

Date MM / DD / YYYY
02 / 28 / 2026