

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 TARGETED PLATFORM MEDIA LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 08 / 2026	
Mailing Address PO BOX 237		Amount 471747.00	
City CROWNSVILLE	State MD	Zip Code 21032-0237	Transaction ID : EF4833EFECF704360B1B
Purpose of Expenditure MEDIA PLACEMENT		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate BUSH, CORI, , ,		☐ Support ☒ Oppose	Office Sought: ☒ House District: 01 ☐ President ☐ Senate State: MO
Calendar Year-To-Date Per Election for Office Sought		1026613.24	Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶

Full Name of Payee SKDKNICKERBOCKER LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 08 / 2026	
Mailing Address 1150 18TH ST NW STE 800		Amount 12427.00	
City WASHINGTON	State DC	Zip Code 20036-3845	Transaction ID : ED1F8C130BA43434380D
Purpose of Expenditure MEDIA PRODUCTION		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate BUSH, CORI, , ,		☐ Support ☒ Oppose	Office Sought: ☒ House District: 01 ☐ President ☐ Senate State: MO
Calendar Year-To-Date Per Election for Office Sought		1026613.24	Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	484174.00
(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.

D'ALESSIO, CHRISTOPHER, , ,

Signature

Date

MM / DD / YYYY
07 / 10 / 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 THE PHONE CONSULTANTS		Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 10 / 2026
Mailing Address 41-750 RANCHO LAS PALMAS DR SUITE E-3		Amount 25900.25
City RANCHO MIRAGE	State CA	Zip Code 92270
Purpose of Expenditure GOTV PHONE CALLS	Category/ Type	Transaction ID : E702D1964880A44A1B42 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate BELL, WESLEY, MR, ,		Office Sought: ☒ House District: 01 ☐ President ☐ Senate State: MO
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶

Full Name of Payee THE PHONE CONSULTANTS		Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 10 / 2026
Mailing Address 41-750 RANCHO LAS PALMAS DR SUITE E-3		Amount 25900.25
City RANCHO MIRAGE	State CA	Zip Code 92270
Purpose of Expenditure GOTV PHONE CALLS	Category/ Type	Transaction ID : E9D39273E30174F3AB78 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate BUSH, CORI, , ,		Office Sought: ☒ House District: 01 ☐ President ☐ Senate State: MO
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	51800.50
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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D'ALESSIO, CHRISTOPHER, , ,

Signature

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Full Name of Payee UNITED MEDIA PARTNERS LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 10 / 2026
Mailing Address 850 NEW BURTON ROAD SUITE 201		Amount 60605.24
City DOVER	State DE	Zip Code 19904
Purpose of Expenditure DIRECT MAIL	Category/ Type	Transaction ID : E110816EC83A443C5BF3 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate BELL, WESLEY, MR, , ☒ Support ☐ Oppose		Office Sought: ☒ House ☐ Senate ☐ President District: 01 State: MO
Calendar Year-To-Date Per Election for Office Sought 1139018.98		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 ☐ Support ☐ Oppose		Office Sought: ☐ House ☐ Senate ☐ President District: State:
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	60605.24
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	596579.74

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.

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