

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 5
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) SLF PAC			FEC IDENTIFICATION NUMBER ▼ C C00571703		
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y					
Full Name of Payee RIVAL STRATEGY GROUP LLC			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 06 / 2026 M M M / D D D / Y Y Y Y Y Y		
Mailing Address P.O. BOX 92918			Amount 83393.18 M M M / D D D / Y Y Y Y Y Y		
City ALBUQUERQUE		State NM	Zip Code 87199		Transaction ID : SE.1 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 05 / 2026 M M M / D D D / Y Y Y Y Y Y
Purpose of Expenditure POSTAGE / PRINTING / PRODUCTION			Category/ Type		
Name of Federal Candidate PELTOLA, MARY, , ,			☐ Support ☒ Oppose Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: AK		
Calendar Year-To-Date Per Election for Office Sought 8300864.49			Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶ _____		
Full Name of Payee MHB MEDIA, INC			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 06 / 2026 M M M / D D D / Y Y Y Y Y Y		
Mailing Address P.O. BOX 3033			Amount 1956806.72 M M M / D D D / Y Y Y Y Y Y		
City ARLINGTON		State VA	Zip Code 22203		Transaction ID : SE.2 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 05 / 2026 M M M / D D D / Y Y Y Y Y Y
Purpose of Expenditure MEDIA PLACEMENT			Category/ Type		
Name of Federal Candidate OSSOFF, T., JONATHAN, ,			☐ Support ☒ Oppose Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: GA		
Calendar Year-To-Date Per Election for Office Sought 11511399.00			Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			2040199.90 M M M / D D D / Y Y Y Y Y Y		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			M M M / D D D / Y Y Y Y Y Y		
(c) TOTAL Independent Expenditures..... ▶			M M M / D D D / Y Y Y Y Y Y		
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.					
Crosby, Caleb, , , Signature			[Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 10 / 08 / 2026 M M M / D D D / Y Y Y Y Y Y		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 2 OF 5
FOR SE OF FORM 24/48

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Full Name of Payee CAVALRY LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 06 / 2026
Mailing Address 1634 EYE STREET NW #800		Amount 114698.00
City WASHINGTON	State DC	Zip Code 20006
Purpose of Expenditure MEDIA PLACEMENT	Category/ Type	Transaction ID : SE.3 Date of Disbursement or Obligation MM / DD / YYYY 10 / 06 / 2026
Name of Federal Candidate COLLINS, SUSAN, M., ,		Office Sought: ☐ House District: ☐ President ☒ Senate State: ME
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶

Full Name of Payee SLMG LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 06 / 2026
Mailing Address 1037 CUMMINGS CIR		Amount 5000.00
City MOUNT PLEASANT	State SC	Zip Code 29464
Purpose of Expenditure MEDIA PRODUCTION	Category/ Type	Transaction ID : SE.4 Date of Disbursement or Obligation MM / DD / YYYY 10 / 06 / 2026
Name of Federal Candidate COLLINS, SUSAN, M., ,		Office Sought: ☐ House District: ☐ President ☒ Senate State: ME
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	119698.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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Crosby, Caleb, , ,

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Date

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Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 3 OF 5
FOR SE OF FORM 24/48

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Full Name of Payee CREATIVE DIRECT		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 06 / 2026	
Mailing Address 1402 BELLEVILLE ST		Amount 159204.47	
City RICHMOND	State VA	Zip Code 23230	Transaction ID : SE.5
Purpose of Expenditure POSTAGE / PRINTING / PRODUCTION		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 05 / 2026
Name of Federal Candidate JACKSON, TROY, DALE, ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: ME
Calendar Year-To-Date Per Election for Office Sought		20544829.23	Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶

Full Name of Payee MHB MEDIA, INC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 06 / 2026	
Mailing Address P.O. BOX 3033		Amount 3252626.64	
City ARLINGTON	State VA	Zip Code 22203	Transaction ID : SE.6
Purpose of Expenditure MEDIA PLACEMENT		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 05 / 2026
Name of Federal Candidate EL-SAYED, ABDUL, ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: MI
Calendar Year-To-Date Per Election for Office Sought		30674422.29	Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	3411831.11
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 4 OF 5
FOR SE OF FORM 24/48

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Full Name of Payee MAJORITY STRATEGIES LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 06 / 2026
Mailing Address P.O. BOX 679219		Amount 90074.68
City DALLAS	State TX	Zip Code 75267
Purpose of Expenditure POSTAGE / PRINTING / PRODUCTION		Transaction ID : SE.7 Date of Disbursement or Obligation MM / DD / YYYY 10 / 02 / 2026
Name of Federal Candidate PAPPAS, CHRIS, , ,		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: NH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶

Full Name of Payee CAVALRY LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 06 / 2026
Mailing Address 1634 EYE STREET NW #800		Amount 338497.00
City WASHINGTON	State DC	Zip Code 20006
Purpose of Expenditure MEDIA PLACEMENT		Transaction ID : SE.8 Date of Disbursement or Obligation MM / DD / YYYY 10 / 06 / 2026
Name of Federal Candidate HUSTED, JON, , ,		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	428571.68
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 5 OF 5
FOR SE OF FORM 24/48

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Full Name of Payee SLMG LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 06 / 2026
Mailing Address 1037 CUMMINGS CIR		Amount 5000.00
City MOUNT PLEASANT	State SC	Zip Code 29464
Purpose of Expenditure MEDIA PRODUCTION	Category/ Type	Transaction ID : SE.9 Date of Disbursement or Obligation MM / DD / YYYY 10 / 06 / 2026
Name of Federal Candidate HUSTED, JON, , ,		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶
		43167481.47

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 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.....▶	5000.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	6005300.69

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