

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)**

 PAGE 1 OF 1
 FOR SE OF FORM 24/28

NAME OF COMMITTEE (In Full) AMERICAN PRIORITIES			FEC IDENTIFICATION NUMBER ▼ C C00932723		
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on			M M / D D / Y Y Y Y		
Full Name of Payee SpeakEasy Political			Date of Public Distribution/Dissemination M M 02 / D D 13 / Y Y Y Y 2026		
Mailing Address 1902 Van Ness Ave FI 3			Amount 62713.39		
City San Francisco State CA Zip Code 94109			Transaction ID : SE.4113 Date of Disbursement or Obligation M M 02 / D D 11 / Y Y Y Y 2026		
Purpose of Expenditure Direct Mail			Category/Type 004		
Name of Federal Candidate ALLAM, NIDA, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>04</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NC</u>		
Calendar Year-To-Date Per Election for Office Sought 542965.09			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ►		
Full Name of Payee			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y		
Mailing Address			Amount ,		
City State Zip Code			Date of Disbursement or Obligation M M / D D / Y Y Y Y		
Purpose of Expenditure			Category/Type 		
Name of Federal Candidate			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought 			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ► _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ► 62713.39					
(b) SUBTOTAL of Unitemized Independent Expenditures ► ,					
(c) TOTAL Independent Expenditures..... ► 62713.39					
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.					
Hanna, Mark, , , Signature			Date M M 02 / D D 14 / Y Y Y Y 2026		