

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

NAME OF COMMITTEE (In Full) PALMETTO ACTION			FEC IDENTIFICATION NUMBER ▼ C C00950600		
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 Y Y					
Full Name of Payee MHB MEDIA INC			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y Y Y 05 / 27 / 2026		
Mailing Address PO BOX 3033			Amount 841386.08		
City ARLINGTON		State VA	Zip Code 22203		
Purpose of Expenditure MEDIA PLACEMENT		Category/ Type		Transaction ID : SE24.32182 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y Y Y 05 / 26 / 2026	
Name of Federal Candidate LYNCH, MARK, , ,			☐ Support ☒ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: <u>SC</u>
Calendar Year-To-Date Per Election for Office Sought 2008057.44			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 Y Y 05 / 28 / 2026		
Mailing Address PO BOX 3033			Amount 52430.40		
City ARLINGTON		State VA	Zip Code 22203		
Purpose of Expenditure RADIO PLACEMENT		Category/ Type		Transaction ID : SE24.32183 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y Y Y 05 / 27 / 2026	
Name of Federal Candidate LYNCH, MARK, , ,			☐ Support ☒ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: <u>SC</u>
Calendar Year-To-Date Per Election for Office Sought 2008057.44			Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			893816.48		
(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.					
Signature PEPPE, DANNY, , ,			Date M M M / D D D / Y Y Y Y Y Y Y Y 05 / 28 / 2026		

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NAME OF COMMITTEE (In Full) PALMETTO ACTION		FEC IDENTIFICATION NUMBER ▼ C C00950600
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee PATCHWORK CREATIVE		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 28 / 2026
Mailing Address 2000 14TH N STE 450		Amount 2500.00
City ARLINGTON	State VA	Zip Code 22201
Purpose of Expenditure RADIO PRODUCTION	Category/ Type	Transaction ID : SE24.32184 Date of Disbursement or Obligation MM / DD / YYYY 05 / 27 / 2026
Name of Federal Candidate LYNCH, MARK, ,	☐ Support ☒ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: SC
Calendar Year-To-Date Per Election for Office Sought 2008057.44		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 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.....▶	2500.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	896316.48

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.

PEPPE, DANNY, , ,

Signature

Date

MM / DD / YYYY
05 / 28 / 2026