

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

NAME OF COMMITTEE (In Full) STRONGER MAINE			FEC IDENTIFICATION NUMBER ▼ C C00922294	
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on			MM / DD / YYYY	
Full Name of Payee Wildcatter Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 23 / 2026		
Mailing Address 10205 US Hwy 15-501 Unit 26 PMB #346		Amount 1250.00		
City Southern Pines	State NC	Zip Code 28387	Transaction ID : SE.4151	
Purpose of Expenditure T-Shirts		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 06 / 22 / 2026	
Name of Federal Candidate COLLINS, SUSAN M., ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: ME	
Calendar Year-To-Date Per Election for Office Sought		251250.00	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	Date of Disbursement or Obligation MM / DD / YYYY	
Purpose of Expenditure		Category/ Type		
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.....		1250.00		
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures.....		1250.00		
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 Williamson, Les, , ,		Date MM / DD / YYYY 06 / 22 / 2026		