PAGE 1 / 220

### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

									Office Use	Only	
1.	NAME OF COMMITTEE (in 1		PE OR PI	RINT ▼		ample: If typi er the lines.	ng, type	12FE4N	M5		
_^	merica PAC										
			1 1 1				1 1 1 1		1 1 1 1	1 1 1	
4.0	DDF00 /		O. BOX	341027							
AD •	DRESS (number and	street) —									
	Check if diffe than previous reported. (AC	ly ,	AUSTIN					TX	78734		
2.	FEC IDENTIFICA	ATION NUME	BER ▼	C	SITY 🛦			STATE A	Ž	ZIP COD	E 🛦
	C C00879510			3.	IS THIS REPORT		NEW (N) <b>OR</b>		AMENDED A)		
4.	TYPE OF REP (Choose One)	ORT	(b) Montl Repo	rt 🔲 🗀	eb 20 (M2)		May 20 (M5)	Au	g 20 (M8)	Ш.	Nov 20 (M11) (Non-Election Year Only)
	(a) Quarterly Rep	orts:	Due	М	ar 20 (M3)		Jun 20 (M6)	Se	p 20 (M9)		Dec 20 (M12) (Non-Election Year Only)
	April 15			A	or 20 (M4)		Jul 20 (M7)	Oc	t 20 (M10)		Jan 31 (YE)
	July 15	Report (Q1) Report (Q2)		12-Day <b>PRE</b> -Election		Primary (12F	P)	Genera	ıl (12G)	F	Runoff (12R)
	October	15		Report for the:		Convention	(12C)	Specia	l (12S)		
	January 3	Report (Q3) 31 Report (YE)		Elec	tion on	M = M /	D   D /	YIYIYI	Y	in the State of	
	July 31 N	/lid-Year lon-election		30-Day  POST-Election  Report for the:		General (300	G)	Runoff	(30R)		Special (30S)
	Terminati (TER)	on Report			tion on	M = M /	D   D /	Y " Y " Y "		in the State of	
5.	Covering Period	07	/ D D D	2024		through	09	/ D D D	2024		
	ertify that I have ex be or Print Name of		•	d to the best CHRIS, , ,	of my kno	wledge and	belief it is tru	ue, correct a	nd complete	<del>)</del> .	
Sig	nature of Treasurer	GOBER,	CHRIS, , ,					Date 10	M / D 15	D /	2024
NO	TE: Submission of fa	alse, erroneous	, or inco	mplete informat	ion may sı	ubject the per	son signing th	nis Report to	the penaltie	s of 52 l	J.S.C. § 30109.
<u> </u>	Office Use Only									FORN ev. 05/20	

### **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name America PAC 2024 09 30 2024 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 0.00 January 1, 0 (b) Cash on Hand at 967759.92 Beginning of Reporting Period..... 74950020.00 83700020.00 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 75917779.92 83700020.00 6(a) and 6(c) for Column B)..... 79701380.95 71919140.87 7. Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 3998639.05 3998639.05 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

me		

I. Receipts  ributions (other than loans) From: Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	74950000.00  74950020.00  74950020.00  0.00	COLUMN B Calendar Year-to-Date  83700000.00  20.00  83700020.00
Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	20.00 , 74950020.00 , 0.00	20.00 83700020.00
Than Political Committees  (i) Itemized (use Schedule A)	20.00 , 74950020.00 , 0.00	20.00 83700020.00
(ii) Itemized (use Schedule A)	20.00 , 74950020.00 , 0.00	20.00 83700020.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)  Political Party Committees  Other Political Committees	74950020.00 0.00	83700020.00
Lines 11(a)(i) and (ii)  Political Party Committees  Other Political Committees	0.00	
Other Political Committees	4 1 4 1 4	0.00
		0.00
	0.00	0.00
Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	74950020.00	83700020.00
	4 4	4
Committees	0.00	0.00
oans Received	0.00	0.00
Repayments Received	0.00	0.00
ets To Operating Expenditures	7 7 7	7 7 7
unds, Rebates, etc.)		
ry Totals to Line 37, page 5)	0.00	0.00
nds of Contributions Made	,	,
ederal Candidates and Other		
	0.00	0.00
· · · · · · · · · · · · · · · · · · ·	0.00	0.00
· · · · · · · · · · · · · · · · · · ·	0.00	0.00
	0.00	0.00
	4	4 4
evin Funds (from Schedule H5)	0.00	0.00
otal Transfers (add 18(a) and 18(b))	0.00	0.00
e 1 ()	Totals to Line 33, page 5)	Totals to Line 33, page 5)

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	Total This Period			
Operating Expenditures:  (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calendar Year-to-Date		
(i) Federal Share	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(ii) Non-rederal Share(b) Other Federal Operating	0.00	4 4		
Expenditures	6093447.31	6127187.39		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	6093447.31	6127187.39		
Transfers to Affiliated/Other Party	000011.01			
Committees	0.00	0.00		
Federal Candidates/Committees and Other Political Committees	0.00	0.00		
Independent Expenditures (use Schedule E)	65825693.56	73574193.56		
Coordinated Party Expenditures (52 U.S.C. § 30116(d))	4 4	73374133.30		
(use Schedule F)	0.00	0.00		
Loan Repayments Made	0.00	0.00		
Loans MadeRefunds of Contributions To:	0.00	0.00		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees	0.00	4 4		
(such as PACs)	0.00	0.00		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00		
Other Disbursements (Including		4 4		
Non-Federal Donations)	0.00	0.00		
Fodoval Floation Activity (FO. H.C.C. & 20101/00		4 4		
Federal Election Activity (52 U.S.C. § 30101(20 (a) Allocated Federal Election Activity	))			
(from Schedule H6)				
(i) Federal Share	0.00	0.00		
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid				
Entirely With Federal Funds	0.00	0.00		
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	71919140.87	79701380.95		
Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	74040440.07			
HOTH LINE OT/	71919140.87	79701380.95		

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)  III. Net Contributions/	. Net Contributions/ COLUMN A			
Operating Expenditures	Total This Period	Calendar Year-to-Date		
3. Total Contributions (other than loans) (from Line 11(d), page 3)	74950020.00	83700020.00		
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00		
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	74950020.00	83700020.00		
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	6093447.31	6127187.39		
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00		
8. Net Operating Expenditures (subtract Line 37 from Line 36)	6093447.31	6127187.39		

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

220 FOR LINE NUMBER: **PAGE** 6 OF Use separate schedule(s) (check only one) X 11a 11b 11c 12 13 14 15 16

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) America PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt MUSK, ELON, , , Mailing Address 2110 RANCH ROAD 620 S. #341886 2024 03 City Zip Code Transaction ID: SA11A.20 **AUSTIN** TX 78734-0277 Amount of Each Receipt this Period FEC ID number of contributing 5000000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SPACE EXPLORATION TECHNOLOGIES CORP. CEO CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 74950000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MUSK, ELON, , Date of Receipt Mailing Address 2110 RANCH ROAD 620 S. #341886 07 10 2024 City State Zip Code Transaction ID: SA11A.21 **AUSTIN**  $\mathsf{TX}$ 78734-0277 Amount of Each Receipt this Period FEC ID number of contributing 5000000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SPACE EXPLORATION TECHNOLOGIES CORP. CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 74950000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. MUSK, ELON, , , Date of Receipt Mailing Address 2110 RANCH ROAD 620 S. #341886 2024 18 City Zip Code State Transaction ID: SA11A.22 TX **AUSTIN** 78734-0277 Amount of Each Receipt this Period FEC ID number of contributing 4950000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SPACE EXPLORATION TECHNOLOGIES CORP. CEO CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 74950000.00 Other (specify) 14950000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 

### SCHEDULE A (FEC Form 3X)

220 FOR LINE NUMBER: **PAGE** OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

ITEMIZED RECEIPTS Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) America PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt MUSK, ELON, , , Mailing Address 2110 RANCH ROAD 620 S. #341886 2024 05 City Zip Code Transaction ID: SA11A.23 **AUSTIN** TX 78734-0277 Amount of Each Receipt this Period FEC ID number of contributing 7500000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SPACE EXPLORATION TECHNOLOGIES CORP. CEO CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 74950000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MUSK, ELON, , Date of Receipt Mailing Address 2110 RANCH ROAD 620 S. #341886 80 06 2024 City State Zip Code Transaction ID: SA11A.24 **AUSTIN**  $\mathsf{TX}$ 78734-0277 Amount of Each Receipt this Period FEC ID number of contributing 7500000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SPACE EXPLORATION TECHNOLOGIES CORP. CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 74950000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. MUSK, ELON, , , Date of Receipt Mailing Address 2110 RANCH ROAD 620 S. #341886 2024 08 20 City Zip Code State Transaction ID: SA11A.28 TX **AUSTIN** 78734-0277 Amount of Each Receipt this Period FEC ID number of contributing 15000000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SPACE EXPLORATION TECHNOLOGIES CORP. CEO CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 74950000.00 Other (specify) 3000000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7 7

### SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: **PAGE** 8 Use separate schedule(s) (check only one) X 11a 11b 11c

220

OF

ITEMIZED RECEIPTS for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) America PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name MUSK, ELON, , , Date of Receipt Mailing Address 2110 RANCH ROAD 620 S. #341886 2024 05 City Zip Code State Transaction ID: SA11A.27 **AUSTIN** TX 78734-0277 Amount of Each Receipt this Period FEC ID number of contributing 30000000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SPACE EXPLORATION TECHNOLOGIES CORP. CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 74950000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 3000000.00 SUBTOTAL of Receipts This Page (optional)..... 74950000.00 TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X)		FOR LINE	FOR LINE NUMBER: PAGE 9 OF 220				
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	lly one)				
	Detailed Summary Page	X 21b	22 23 26 27				
		28a	28b 28c 29 30b				
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam							
NAME OF COMMITTEE (In Full)	is and address of any politic	a. committee to	conce communications from Such Committee.				
/ America PAC							
Full Name (Last, First, Middle Initial)			5 . (5:1				
A. CHAIN BRIDGE BANK			Date of Disbursement				
Mailing Address 1390 CHAIN BRIDGE RD STE 515			07 02 2024				
,	State Zip Code		FEC Identification Number				
	VA 22101						
Purpose of Disbursement							
BANK FEE			Transaction ID : SB.1				
Candidate Name		Category/	Amount of Each Disbursement this Period				
Office Sought: House Disbursem	pent For:	Туре	25.00				
	Primary General		7 7				
President	Other (specify) ▼		Memo Item				
State: District:							
Full Name (Last, First, Middle Initial)							
3. CHAIN BRIDGE BANK			Date of Disbursement				
			M M / D D / Y Y Y Y				
Mailing Address 1390 CHAIN BRIDGE RD STE 515			07 03 2024				
,	State Zip Code		FEC Identification Number				
	VA 22101						
Purpose of Disbursement		· · ·	C				
BANK FEE Candidate Name			Transaction ID : SB.2				
Candidate Name		Category/	Amount of Each Disbursement this Period				
Office Sought: House Disbursem	nent For:	Туре	25.00				
	Primary General		7 7 7				
	Other (specify)						
State: District:	(0000)		Memo Item				
Full Name (Last, First, Middle Initial)							
CHAIN BRIDGE BANK			Date of Disbursement				
Mailing Address 1390 CHAIN BRIDGE RD STE 515			07 05 2024				
City	State Zip Code		EEC Identification Number				
MCLEAN	VA 22101		FEC Identification Number				
Purpose of Disbursement	<u> </u>		C				
BANK FEE		1 []	Transaction ID : SB.3				
Candidate Name		Category/ Type	Amount of Each Disbursement this Period				
Office Sought: House Disbursem	nent For:	i ype	25.00				
	Primary General		7 7				
	Other (specify)		П., .				
State: District:	(opoo) <b>V</b>		Memo Item				
SUBTOTAL of Disbursements This Page (optional)			75.00				
			7 7 7				
TOTAL This Period (last page this line number only).							
(   3							

SCHEDULE B (FEC Form 3X)	Har -	water and to the	FOR LINE	NUMBER:	PAGE 10 OF 220	
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	of the			
		Summary Page	X 21b		23	26 27
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NAME OF COMMITTEE (In Full)	- 4.14 444.					
America PAC						
/						
Full Name (Last, First, Middle Initial)				Data of	Diahuraama	nt
A. CHAIN BRIDGE BANK					Disburseme	
Mailing Address 1390 CHAIN BRIDGE RD STE 515				07	05	2024
City	tate	Zip Code		EEC Ido	ntification N	umbor
	VA	22101		FEC Ide	illication iv	umber
Purpose of Disbursement						
BANK FEE				Tran	saction ID	: SB.4
Candidate Name			Category/	Amount	of Each Dis	bursement this Period
Office Sought: House Disbursem	ent For:		Туре			25.00
	Primary	General			7	4 4
	Other (spec			□ M		
State: District:	` .	, ,		l livien	no Item	
Full Name (Last, First, Middle Initial)						
B. CMDI				Date of	Disburseme	nt
				M = M	/ D D	/ Y = Y = Y
Mailing Address 1593 SPRING HILL RD STE 400				07	09	2024
City	tate	Zip Code		EEC Ido	ntification N	umbor
Troons contien	VA	22182			illication iv	umber
Purpose of Disbursement				C		
DATABASE MANAGEMENT SERVICES Candidate Name				Tran	saction ID	: SB.50
Candidate Name			Category/ Type	Amount	of Each Dis	bursement this Period
Office Sought: House Disbursem	ent For:		туре	<del> </del>		500.00
	Primary	General			7	<del></del>
	Other (spec	cify)		☐ Marrie		
State: District:				Ivien	no Item	
Full Name (Last, First, Middle Initial)						
C. CHAIN BRIDGE BANK				Date of	Disburseme	nt
Mailing Address 1390 CHAIN BRIDGE RD STE 515				07	10	2024
Mailing Address 1390 CHAIN BRIDGE RD 31E 313				07	10	2024
City	tate	Zip Code		EEC Ide	ntification N	umher
	VA	22101			illioation iv	umber
Purpose of Disbursement						
BANK FEE Candidate Name					saction ID	
Candidate Name			Category/ Type	Amount	of Each Dis	bursement this Period
Office Sought: House Disbursem	ent For:		1,400	1		25.00
	Primary	General			7	4 4
President	Other (spec	eify) 🔻		Men	no Item	
State: District:				Li wien		
SUBTOTAL of Disbursements This Page (optional)					7	550.00
TOTAL This Deviced (lead on the life in the lead of th						
<b>TOTAL</b> This Period (last page this line number only).				1	4 1 1	

SCHEDULE B (FEC Form 3X)	lla	and and and to the	FOR LIN	FOR LINE NUMBER:				PAGE	11 C	F 220
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check o	· /	<i>'</i> — ' — —					
		Summary Page	X 21		$\downarrow$	23 28c	2		27 30b	
Any information copied from such Reports and Statem or for commercial purposes, other than using the name										
NAME OF COMMITTEE (In Full)		7 11 11								
America PAC										
/										
Full Name (Last, First, Middle Initial)				Doto	of Di	sbursei	mont			
A. CHAIN BRIDGE BANK										
Mailing Address 1390 CHAIN BRIDGE RD STE 515				0		15			2024	Y
,	tate	Zip Code		FEC	Ident	ification	Num	ber		
MCLEAN Purpose of Disbursement	VA	22101			-	-	-	_		
BANK FEE										
Candidate Name			Catamamul			action	_	-	nt this F	Pariod
			Category/ Type	AIIIO	arit Ol	Lacii	וטטפוט	Seille	iii ullo F	enou
Office Sought: House Disbursem	ent For:			ΠΙ.		<b>3</b> 5. I			25.0	0
	Primary	General				,		,		
President  State: District:	Other (speci	ify) ▼			Лето	Item				
Full Name (Last, First, Middle Initial)				+-						
D				Date	of Di	sbursei	ment			
B. CHAIN BRIDGE BANK					M /	D		Υ	Y	Υ
Mailing Address 1390 CHAIN BRIDGE RD STE 515				0	7	15		L.	2024	
,	tate VA	Zip Code 22101		FEC	Ident	ification	Num	ber		
Purpose of Disbursement		22101		С						
BANK FEE					rono	action l	D . CI	2 7	-	
Candidate Name			Category/	_					nt this F	Period
			Type		_		-	-	25.0	
Office Sought: House Disbursem		Comenal							25.0	0
	Primary Other (speci	General								
State: District:	otrici (apcoi	y)			Ието	Item				
Full Name (Last, First, Middle Initial)										
C. THE GOBER GROUP PLLC				Date	of Di	sburse	ment			
				M		D			YY	Υ
Mailing Address PO BOX 341016				0	7	15	5		2024	
City	tate	Zip Code								
	TX	78734		FEC	Ident	ification	Num	ber		
Purpose of Disbursement		·			_					
LEGAL CONSULTING					Trans	action	ID : S	B.57		
Candidate Name			Category/	Amo	unt of	Each	Disbur	seme	nt this F	Period
Office Sought: House Disbursem	ent For:		Туре	-					38104.0	0
	Primary	General			_				1 40	
President	Other (speci	ify) ▼		П	Лето	Item				
State: District:						.,,,,,,,				
								-	20154.0	00
SUBTOTAL of Disbursements This Page (optional)			·····•			7		,	38154.0	,0
TOTAL This Period (last page this line number only).										

FOR LINE (check only 21b 28a	22 23 26 27			
ed by any pers al committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.			
	Date of Disbursement  O7 17 2024			
Category/ Type	FEC Identification Number  C  Transaction ID : SB.84  Amount of Each Disbursement this Period  47.97  Memo Item			
Category/ Type	Date of Disbursement  M M M / 19 / 2024  FEC Identification Number  C  Transaction ID : SB.8  Amount of Each Disbursement this Period  100.00  Memo Item			
Category/ Type	Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			

SCHEDULE B (FEC Form 3X)	lise senar	ate schedule(s)	FOR LINE I	PAGE 13 OF 220	
TEMIZED DISBURSEMENTS	for each ca	ategory of the ummary Page	(check only 21b 28a	22	23 26 27 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name					
NAME OF COMMITTEE (In Full)	- and addit	co or arry pointies		Conort Continuo	and the most such continues.
America PAC					
Full Name (Last, First, Middle Initial)					
RACONTEUR MEDIA COMPANY				Date of Dist	bursement
Mailing Address PO BOX 26511				07	19 2024
,	tate TX	Zip Code 78755		FEC Identific	cation Number
Purpose of Disbursement				С	
SUBSCRIPTION/WEB SERVICE/TRAVEL					dia ID OD 22
Candidate Name			Cotogs		ction ID : SB.89
			Category/ Type	Amount of E	Each Disbursement this Period
Office Sought: House Disbursem	ent For:		76-		31637.88
	Primary	General			4 4
President State: District:	Other (specif	fy) ▼		Memo I	tem
Full Name (Last, First, Middle Initial)					
BASELICE & ASSOCIATES INC				Date of Disl	
Mailing Address PO BOX 50238				08	07 2024
,		Zip Code		FEC Identific	cation Number
7.007	TX	78763			
Purpose of Disbursement SURVEY RESEARCH				C	
Candidate Name					ction ID : SB.90
Candidate Name			Category/	Amount of E	Each Disbursement this Period
Office Sought: House Disbursem	ent For		Туре		621375.00
	Primary	General			4 4
	Other (specif			П	
State: District:				Memo I	tem
Full Name (Last, First, Middle Initial)				Date of Disl	hursamant
" CHAIN BRIDGE BANK				M M /	D D / Y Y Y Y
Mailing Address 1390 CHAIN BRIDGE RD STE 515				08	07 2024
City	tate	Zip Code		FEC Identifi	cation Number
MCLEAN	VA	22101		i LO identili	Cation Number
Purpose of Disbursement	·			C	
BANK FEE					ction ID : SB.9
Candidate Name			Category/ Type	Amount of E	Each Disbursement this Period
Office Sought: House Disbursem	ent For:		-1		50.00
	Primary	General			4 4
	Other (specif	fy) ▼		Memo I	tom
State: District:				Ivierno i	ICIII
SUBTOTAL of Disbursements This Page (optional)					653062.88
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TOTAL This Period (last page this line number only).					

SCHEDULE B (FEC Form 3X)	lla	and and and to the	FOR LIN	E NUMBER:	PAGE 14 OF 220	
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check only one)			
		Summary Page	X 211		23 28c	26 27 29 30b
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NAME OF COMMITTEE (In Full)						
America PAC						
Full Name (Last, First, Middle Initial)				_		
A. CMDI				Date o	f Disbursem	_
Mailing Address 1593 SPRING HILL RD STE 400				08	07	2024
City	tate	Zip Code		EEC Id	entification I	Number
	VA	22182			entineation	vuilibei
Purpose of Disbursement						
DATABASE MANAGEMENT SERVICES Candidate Name				1	ansaction ID	
Candidate Name			Category/ Type	Amoun	t of Each Di	sbursement this Period
Office Sought: House Disbursem	ent For		туре	- I		500.00
	Primary	General			7	7- 1-7-
President	Other (speci	ify) ▼		Me Me	emo Item	
State: District:				I I IVIC	ano item	
Full Name (Last, First, Middle Initial)						
B. M&B ANALYTICS, LLC				Date o	f Disbursem	ent
Mailing Address DO DOV 0500				M = M	/ D D	/ Y Y Y Y
Mailing Address PO BOX 2583				08	07	2024
City	tate	Zip Code		FFO Id		M
7.6270 (1.757.17)	VA	22301		FEC 10	entification I	Number
Purpose of Disbursement						
DATA ANALYTICS/SURVEY RESEARCH/CONSUL Candidate Name	_TING			Tra	nsaction ID	: SB.48
Candidate Name			Category/ Type	Amoun	t of Each Di	sbursement this Period
Office Sought: House Disbursem	ent For		туре	- I		1216992.00
	Primary	General			7	4- 4-
President	Other (speci	ify)		I I	ma Itam	
State: District:				IVIE	emo Item	
Full Name (Last, First, Middle Initial)						
C. CHAIN BRIDGE BANK				Date o	f Disbursem	ent
Mailing Address 1390 CHAIN BRIDGE RD STE 515					12	2024
Mailing Address 1390 CHAIN BRIDGE RD 31E 313					12	ZUZ-T
City	tate	Zip Code		EEC Id	entification I	Number
	VA	22101			- Intilication i	Variabel
Purpose of Disbursement				C		
BANK FEE  Candidate Name					ansaction ID	
Candidate Name			Category/ Type	Amoun	t of Each Di	sbursement this Period
Office Sought: House Disbursem	ent For:		.,,,,	- 1		175.00
Senate	Primary	General				7
	Other (speci	ify) ▼		Me	emo Item	
State: District:						
						1217667.00
SUBTOTAL of Disbursements This Page (optional)			·····•		-	1217007.00
TOTAL This Period (last page this line number only).						

SCHEDULE B (FEC Form 3X)	Her :	waka ashirida ( )	FOR LINE	NUMBER:	PAGE 15 OF 220	
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check on			
		Summary Page	X 21b		23 28c	26 27 29 30b
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NAME OF COMMITTEE (In Full)						
America PAC						
Full Name (Last, First, Middle Initial)						
A. RIGHTSIDE COMPLIANCE LLC				Date of	Disburseme	ent / Y Y Y Y Y Y Y
Mailing Address PO BOX 341027				08	12	2024
AUSTIN	tate TX	Zip Code 78734			entification N	Number
Purpose of Disbursement						
COMPLIANCE CONSULTING Candidate Name					insaction ID	
Canadate Name			Category/ Type	Amount	t of Each Di	sbursement this Period
Office Sought: House Disbursem	ent For:		.,,,,	1 L 🗀		20000.00
	Primary	General				,
State: District:	Other (spec	city) 🔻		Me	mo Item	
Full Name (Last, First, Middle Initial)						
B. CHAIN BRIDGE BANK				Date of	Disburseme	ent
CHAIN BRIDGE BANK				M = M	/ D D	/ Y Y Y Y Y
Mailing Address 1390 CHAIN BRIDGE RD STE 515	i			08	13	2024
,	tate VA	Zip Code 22101		FEC Id	entification N	Number
MCLEAN Purpose of Disbursement	VA	22101		С		
BANK FEE					nasatian ID	- CD 44
Candidate Name			Category/		nsaction ID t of Each Di	sbursement this Period
			Type			75.00
Office Sought: House Disbursem	ent For: Primary	General			7	75.00
	Other (spec					
State: District:	oo. (opoo	,,		Me	mo Item	
Full Name (Last, First, Middle Initial)						
<sup>C.</sup> CHAIN BRIDGE BANK					Disburseme	_
Mailing Address 1390 CHAIN BRIDGE RD STE 515				08	14	2024
City	tate	Zip Code		EEC 14	entification N	Number
	VA	22101			Chimoanon I	NUTIO CI
Purpose of Disbursement  BANK FEE				C		
Candidate Name			Category/	1	ansaction ID	<b>): SB.12</b> sbursement this Period
			Type			
Office Sought: House Disbursem						225.00
	Primary Other (spec	General				
State: District:	Other (spec	√11y) <b>▼</b>		Me	mo Item	
SUBTOTAL of Disbursements This Page (optional)					1 20 1	20300.00
TOTAL This Period (last page this line number only).						

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS		ite schedule(s)	(check only	·			
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NAME OF COMMITTEE (In Full)							
America PAC							
Full Name (Last, First, Middle Initial)				Date of Disburs	omont		
<sup>A.</sup> SW2 POLITICAL LLC					D / Y Y Y Y		
Mailing Address 107 S WEST ST #956					14 2024		
City ALEXANDRIA	State Z	Zip Code 22314		FEC Identification	on Number		
Purpose of Disbursement							
POLITICAL STRATEGY CONSULTING Candidate Name					n ID : SB.60		
Cardidate Name			Category/ Type	Amount of Each	n Disbursement this Period		
Office Sought: House Disburser	ment For:		1,700		25000.00		
Senate	Primary	General			7		
President State: District:	Other (specify	y) <b>▼</b>		Memo Item			
Full Name (Last, First, Middle Initial)							
B				Date of Disburs	ement		
SW2 POLITICAL LLC					D / Y Y Y Y		
Mailing Address 107 S WEST ST #956				08	14 2024		
,		Zip Code		FEC Identification	on Number		
ALEXANDRIA Purpose of Disbursement	VA	22314					
POLITICAL STRATEGY CONSULTING				Transaction ID : SB.61			
Candidate Name			Category/ Type		n Disbursement this Period		
Office Sought: House Disburser	ment For:				25000.00		
Senate	Primary	General			,		
State: District:	Other (specify	<b>/</b> )		Memo Item			
Full Name (Last, First, Middle Initial)				_			
<sup>C.</sup> THE GOBER GROUP PLLC				Date of Disburs			
Mailing Address PO BOX 341016					14 2024		
City	State	Zip Code		FEC Identification	on Number		
AUSTIN	TX	78734			on Number		
Purpose of Disbursement  LEGAL CONSULTING				C			
Candidate Name			Category/ Type		n ID : SB.58 n Disbursement this Period		
Office Sought: House Disburser	ment For:		1,400		39801.00		
Senate	Primary	General			4 4		
President	Other (specify	<b>y</b> ) ▼		Memo Item			
State: District:							
SUBTOTAL of Disbursements This Page (optional)			······	7	89801.00		
TOTAL This Period (last page this line number only)	)						

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS		rate schedule(s)	FOR LINE I				
		category of the Summary Page	X 21b 28a	22 23 26 27 28b 28c 29 30b			
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NAME OF COMMITTEE (In Full)							
America PAC							
Full Name (Last, First, Middle Initial)				Date of Disbursement			
<sup>A.</sup> CHAIN BRIDGE BANK	* CHAIN BRIDGE BANK						
Mailing Address 1390 CHAIN BRIDGE RD STE 515				08 15 2024			
•	state	Zip Code		FEC Identification Number			
	VA	22101					
Purpose of Disbursement BANK FEE				C			
Candidate Name				Transaction ID : SB.13			
Sandad Harris			Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disbursem	nent For:		: 7,50	25.00			
Senate	Primary	General		7 7 7			
	Other (spec	cify) ▼		Memo Item			
State: District:							
Full Name (Last, First, Middle Initial)  B. INITIUE				Date of Disbursement			
<sup>B.</sup> INTUIT				M M / D D / Y Y Y Y			
Mailing Address 2700 COAST AVE				08 17 2024			
,	state	Zip Code		FEC Identification Number			
	CA	94043					
Purpose of Disbursement SUBSCRIPTION			I	C			
Candidate Name			Cata :: : : '	Transaction ID: SB.85			
			Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disbursem	ent For:	I	71	47.97			
Senate	Primary	General		7 7 7			
	Other (spec	sify)		Memo Item			
State: District:							
Full Name (Last, First, Middle Initial)				Date of Disbursement			
CHAIN BRIDGE BANK							
Mailing Address 1390 CHAIN BRIDGE RD STE 515				08 19 2024			
City	state	Zip Code		FEC Identification Number			
MCLEAN	VA	22101					
Purpose of Disbursement							
BANK FEE Candidate Name				Transaction ID : SB.14			
Candidate Name			Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disbursem	nent For:		Турс	52.50			
	Primary	General		7 7 7			
President	Other (spec	eify) ▼		Memo Item			
State: District:							
SUBTOTAL of Disbursements This Page (optional)			······	125.47			
TOTAL This Period (last page this line number only).				1			

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only X 21b 28a	one) 22 23 26 27 28b 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name			
	e and address of any point	cai committee to	Solicit contributions from Such committee.
NAME OF COMMITTEE (In Full)			
/ America PAC			
Full Name (Last, First, Middle Initial)			Date of Disbursement
* CAMPAIGN SIDEKICK			M M / D D / Y Y Y Y
Mailing Address 1550 OLD ANNETTA			08 21 2024
,	State Zip Code		FEC Identification Number
7.223	TX 76008		
Purpose of Disbursement			
SUBSCRIPTION Condidate Name			Transaction ID : SB.86
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disbursem	nent For:	туре	35000.00
Senate	Primary General		
President Oistrict:	Other (specify) ▼		Memo Item
Full Name (Last, First, Middle Initial)			_
<b>.</b>			Date of Disbursement
CHAIN BRIDGE BANK			M M / D D / Y Y Y Y
Mailing Address 1390 CHAIN BRIDGE RD STE 515	5		08 21 2024
City	State Zip Code		FEC Identification Number
	VA 22101		
Purpose of Disbursement			
BANK FEE Candidate Name			Transaction ID : SB.15
Candidate Name		Category/	Amount of Each Disbursement this Period
Office Sought: House Disbursem	nent For:	Туре	332.50
	Primary General		
	Other (specify)		
State: District:	(-1, ),		Memo Item
Full Name (Last, First, Middle Initial)			2. (2.)
DERIVE TECHNOLOGIES LLC			Date of Disbursement
Mailing Address PO BOX 1651			08 21 2024
City	State Zip Code		EEC Identification Number
MADISON	WI 53701		FEC Identification Number
Purpose of Disbursement	,		
POLITICAL STRATEGY CONSULTING			Transaction ID : SB.63
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disbursem	nent For:	Type	20000.00
	Primary General		4 4
	Other (specify) ▼		Mama Hara
State: District:	• • • • •		Memo Item
SUBTOTAL of Disbursements This Page (optional)			55332.50
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TOTAL This Period (last page this line number only).			

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 28a	7 one) 22 23 26 27 28b 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)	c and address of any point	car committee to	o solicit contributions from such contributes.
America PAC			
/			
Full Name (Last, First, Middle Initial)  A. LEAD BLOCKED STRATECIES, LLC			Date of Disbursement
A. LEAD BLOCKER STRATEGIES, LLC	;		M M / D D / Y Y Y
Mailing Address 3835 9TH STREET NUNIT 105W			08 21 2024
,	State Zip Code		FEC Identification Number
7 11 12 11 10 1 0 1 1	VA 22203		
Purpose of Disbursement POLITICAL STRATEGY CONSULTING			C
Candidate Name			Transaction ID : SB.65
Saladao Halio		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disbursem	nent For:	турс	20000.00
Senate	Primary General		7 7 7
President	Other (specify) ▼		Memo Item
State: District:			The nem
Full Name (Last, First, Middle Initial)			
3. MINE CREEK STRATEGIES INC			Date of Disbursement
Mailian Address 400 CAINT CATUEDINES OT NIA			M M / D D / Y Y Y Y
Mailing Address 400 SAINT CATHERINES CT NW			08 21 2024
,	State Zip Code GA 30064		FEC Identification Number
MARIETTA Purpose of Disbursement	GA 30064		
POLITICAL STRATEGY CONSULTING			C
Candidate Name		Catagony	Transaction ID : SB.62  Amount of Each Disbursement this Period
		Category/ Type	Amount of Each Disbursement this Fellou
Office Sought: House Disbursem	nent For:		20000.00
	Primary General		
	Other (specify)		Memo Item
State: District:			
Full Name (Last, First, Middle Initial)			Date of Disbursement
OSCEOLA STRATEGIES LLC			
Mailing Address 8 THE GREEN STE A			08 21 2024
City	State Zip Code		EEC Identification Number
DOVER	DE 19901		FEC Identification Number
Purpose of Disbursement			
COLLATERAL MATERIALS-LANYARDS			Transaction ID : SB.40
Candidate Name		Category/	Amount of Each Disbursement this Period
Office Sought: House Disbursem	nent For:	Туре	5980.00
	Primary General		7 7 7
	Other (specify)		□
State: District:	(-1 J) ¥		Memo Item
SUBTOTAL of Disbursements This Page (optional)			45980.00
TOTAL This Period (last page this line number only).			1

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	•
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only X 21b 28a	7 one) 22 23 26 27 28b 28c 29 30b
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NAME OF COMMITTEE (In Full)	and address of any politi	Johnmillee (U	55 SSTAIDGROUND HOTH SHOTT COTHININGE.
America PAC			
Full Name (Last, First, Middle Initial)			Date of Dishares
<sup>A.</sup> P2 PATHWAY PUBLIC AFFAIRS LLO	С		Date of Disbursement
Mailing Address 1401 H ST NW STE 550			08 / 21 / 2024
WASHINGTON	State Zip Code DC 20005		FEC Identification Number
Purpose of Disbursement			C
POLITICAL STRATEGY CONSULTING Candidate Name			Transaction ID : SB.64
Sandidato Hamo		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disbursen	nent For:	.,,,,,	30000.00
	Primary General		
President State: District:	Other (specify) ▼		Memo Item
Full Name (Last, First, Middle Initial)			
<b>5</b>			Date of Disbursement
PUSH DIGITAL LLC			M M / D D / Y Y Y Y
Mailing Address 342 EAST BAY STREET			08 21 2024
,	State Zip Code SC 29401		FEC Identification Number
CHARLESTON Purpose of Disbursement	SC 29401		C
DIGITAL MEDIA CONSULTING			Transaction ID : SB.54
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disbursen			17173.99
	Primary General		
State: District:	Other (specify)		Memo Item
Full Name (Last, First, Middle Initial)			Data of Dishursament
<sup>C.</sup> CHAIN BRIDGE BANK			Date of Disbursement
Mailing Address 1390 CHAIN BRIDGE RD STE 515	j		08 22 2024
City	State Zip Code		FEC Identification Number
MCLEAN  Rurness of Disbursement	VA 22101		
Purpose of Disbursement  BANK FEE			C
Candidate Name		Category/ Type	Transaction ID : SB.16 Amount of Each Disbursement this Period
Office Sought: House Disbursen	nent For:	.,,,,	75.00
Senate	Primary General		7 7 7
	Other (specify) ▼		Memo Item
State: District:			
SUBTOTAL of Disbursements This Page (optional)			47248.99
TOTAL This Period (last page this line number only)			1

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 28a	one) 22 23 26 27 28b 28c 29 30b
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or for commercial purposes, other than using the name	le and address of any politic	cai committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
/ America PAC			
Full Name (Last, First, Middle Initial)			Date of Dishursement
. CHAIN BRIDGE BANK			Date of Disbursement
Mailing Address 1390 CHAIN BRIDGE RD STE 515			08 23 2024
,	State Zip Code		FEC Identification Number
	VA 22101		
Purpose of Disbursement			
BANK FEE			Transaction ID : SB.17
Candidate Name		Category/	Amount of Each Disbursement this Period
		Type	77.70
Office Sought: House Disburserr			77.50
Senate	Primary General		, , , , , , , , , , , , , , , , , , , ,
	Other (specify) ▼		Memo Item
State: District:			
Full Name (Last, First, Middle Initial)			Data of Dishamon and
. IMGE LLC			Date of Disbursement
Mailing Address 4404 LI STREET NW SLUTE 550			08 23 2024
Mailing Address 1401 H STREET NW SUITE 550			00 23 2024
,	State Zip Code		FEC Identification Number
117 (51 111 1 5 1 5 1 1	DC 20005		
Purpose of Disbursement	DTION		C
DIGITAL CONSULTING/WEB SERVICE/SUBSCRI	PHON		Transaction ID : SB.53
Candidate Name		Category/	Amount of Each Disbursement this Period
Office Cought		Type	22449.00
Office Sought: House Disbursem			32118.98
	Primary General		
	Other (specify)		Memo Item
State: District:			_
Full Name (Last, First, Middle Initial)			Date of Disbursement
" RIGHTSIDE COMPLIANCE LLC			
Mailing Address PO BOX 341027			08 23 7 2024
City	State Zip Code		
AUSTIN	TX 78734		FEC Identification Number
Purpose of Disbursement	1		C
COMPLIANCE CONSULTING		1	Transaction ID : SB.44
Candidate Name		Category/	Amount of Each Disbursement this Period
Office Sought: House Disbursem	nent For:	Type	30000.00
	Primary General		7 7
	Other (specify)		
State: District:	onioi (apecily) ▼		Memo Item
State. District.			
SUBTOTAL of Disbursements This Page (optional)			62196.48
TOTAL This Period (last page this line number only).			

SCHEDULE B (FEC Form 3X)	l l		FOR LINE	NUMBER:		PAGE 22 OF 220
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check on	·		
		Summary Page	X 21b		23 28c	26 27 29 30b
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Any information copied from such Reports and Staten or for commercial purposes, other than using the nam						
NAME OF COMMITTEE (In Full)		7 P - 10			<u> </u>	
America PAC						
/						
Full Name (Last, First, Middle Initial)				Data of	Disburseme	at.
A. BLUESTONE STRATEGIES & CONS	SULTING	GROUP				
Mailing Address PO BOX 134				08	26	2024
City GARRISONVILLE	State VA	Zip Code 22463		FEC Ide	ntification No	umber
Purpose of Disbursement	VA	22403				
POLITICAL STRATEGY CONSULTING			г	C.		20.00
Candidate Name			Category/		<b>saction ID</b> : of Fach Dis	bursement this Period
			Type			
Office Sought: House Disbursen					7	51393.44
	Primary Other (spec	General				
State: District:	onior (spec	'''y <i>)</i> ▼		Men	no Item	
Full Name (Last, First, Middle Initial)						
B. CHAIN BRIDGE BANK				Date of	Disburseme	nt
				M = M	/ D D	/ Y = Y = Y = Y
Mailing Address 1390 CHAIN BRIDGE RD STE 518	5			08	26	2024
City	State	Zip Code		FFC Ide	ntification N	ımhor
MCLEAN	VA	22101		FEC Ide	ntification N	umber
Purpose of Disbursement				C		
BANK FEE Candidate Name					saction ID :	
Candidate Name			Category/ Type	Amount	of Each Dis	bursement this Period
Office Sought: House Disbursen	nent For:		Турс	- I		75.00
Senate	Primary	General			4	4
	Other (spec	ify)		Men	no Item	
State: District:				ш		
Full Name (Last, First, Middle Initial)  C. THE TARRANGE CROUDLES				Doto of	Disburseme	nt.
THE TARRANCE GROUP LLC				M M		/ Y Y Y Y Y
Mailing Address 201 N UNION STREET, SUITE 310	)			08	26	2024
-		I				
City S ALEXANDRIA	State VA	Zip Code 22314		FEC Ide	ntification No	umber
Purpose of Disbursement	7/1	22014		C		
SURVEY RESEARCH					saction ID	SB.91
Candidate Name			Category/			bursement this Period
Office Cought			Туре	-		27000.00
Office Sought: House Disbursen Senate	nent For: Primary	General			-	27000.00
President	Other (spec			П		
State: District:	(-1-30	• / •		Men	no Item	
SUBTOTAL of Disbursements This Page (optional)						78468.44
<b>TOTAL</b> This Period (last page this line number only)				1		

SCHEDULE B (FEC Form 3X)	I la - ·	water activities ( )	FOR LINE	NUMBER		PAGE 23 OF 220			
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check on	,					
		Summary Page	X 21b		23 28c	26 27 29 30b			
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Any information copied from such Reports and Statem or for commercial purposes, other than using the nam									
NAME OF COMMITTEE (In Full)		7 P - 10							
America PAC									
/									
Full Name (Last, First, Middle Initial)				Doto	f Disburser	mont			
A. CHAIN BRIDGE BANK					_				
Mailing Address 1390 CHAIN BRIDGE RD STE 515				08	27				
,	state VA	Zip Code		FEC Id	entification	Number			
MCLEAN Purpose of Disbursement	VA	22101							
BANK FEE				C					
Candidate Name			Category/		ansaction I	D: SB.19 Disbursement this Period			
			Type	7.1110011	. C. Lucii L				
Office Sought: House Disbursem				1 <u>L.</u>	7	75.00			
	Primary	General							
State: District:	Other (spec	eity) 🔻		Me	emo Item				
Full Name (Last, First, Middle Initial)									
D				Date o	f Disburser	nent			
<sup>B.</sup> CHAIN BRIDGE BANK				M = M	M M / D D / Y Y Y Y				
Mailing Address 1390 CHAIN BRIDGE RD STE 515	;			08	28	3 2024			
0.1		T: 0 !							
,	state VA	Zip Code 22101		FEC Id	entification	Number			
Purpose of Disbursement				С					
BANK FEE					ansaction I	D · SR 20			
Candidate Name			Category/			Disbursement this Period			
			Туре			47F 00			
Office Sought: House Disbursem	ent For: Primary	General				175.00			
	Other (spec								
State: District:	oo. (opoo	,,		Me	emo Item				
Full Name (Last, First, Middle Initial)									
C. PUBLIC OPINION STRATEGIES, I	LC			Date o	f Disburser	nent			
				M M	/ D 1				
Mailing Address 214 N FAYETTE STREET				08	28	2024			
City	state	Zip Code		EEC In	ontification	Number			
ALEXANDRIA	VA	22314		FEC 10	entification	INUITIDEI			
Purpose of Disbursement				C					
SURVEY RESEARCH Candidate Name					ansaction I				
Sandidato Hamo			Category/ Type	Amoun	t of Each [	Disbursement this Period			
Office Sought: House Disbursem	nent For:		.,,,,	-     "		27000.00			
Senate	Primary	General			-	7			
	Other (spec	eify) 🔻		Me	emo Item				
State: District:									
CURTOTAL of Distance and Till D. ( )						27250.00			
SUBTOTAL of Disbursements This Page (optional)			······	-	-	1.100.00			
TOTAL This Period (last page this line number only).									

SCHEDULE B (FEC Form 3X)	11		FOR LINE	NUMBER:		PAGE 24 OF 220
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check onl	<b>'</b> — ' –	¬	
		Summary Page	X 21b	22	23	26 27
			28a	28b	28c	29 30b
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NAME OF COMMITTEE (In Full)		, p				
America PAC						
Full Name (Last, First, Middle Initial)						
A. PUBLIC OPINION STRATEGIES, LL	Date of I	Disburseme	nt			
Mailing Address 214 N FAYETTE STREET				08	28	2024
ALEXANDRIA	tate VA	Zip Code 22314			tification N	umber
Purpose of Disbursement						
SURVEY RESEARCH Candidate Name					saction ID	
Candidate Name			Category/	Amount of	of Each Dis	bursement this Period
Office Sought: House Disbursem	ent For:		Type	1		27000.00
	Primary	General				7 7
President State: District:	Other (spec	ify) ▼		Mem	o Item	
Full Name (Last, First, Middle Initial)						
B. ARENA MAIL & DIGITAL					Disburseme	
Mailing Address 1260 E STRINGHAM AVE SUITE	100			09	03	2024
Mailing Address 1200 E STRINGHAM AVE SOITE -	+00			00	00	2021
,	tate	Zip Code		FFC Ider	tification N	umber
5, (E. E. ((C. 5)))	UT	84106			illioation 14	umbor
Purpose of Disbursement						
COLLATERAL MATERIALS-LANYARDS  Candidate Name					saction ID :	
Sandidate Name			Category/ Type	Amount	of Each Dis	bursement this Period
Office Sought: House Disbursem	ent For:		Турс	1		4238.00
Senate	Primary	General			7	4 4
President	Other (spec	ify)		Mem	o Item	
State: District:				LI WOM		
Full Name (Last, First, Middle Initial)						
<sup>C.</sup> CHAIN BRIDGE BANK					Disburseme	
Mailing Address 1390 CHAIN BRIDGE RD STE 515				09	03	2024
City	tate	Zip Code		FEO 13	A161 A1	
MCLEAN	VA	22101		FEC Ider	tification N	umber
Purpose of Disbursement		·				
BANK FEE					saction ID	: SB.21
Candidate Name			Category/	Amount	of Each Dis	bursement this Period
Office Sought: House Disbursem	ent For:		Туре	-		240.00
	Primary	General				4 4
	Other (spec			NA=	o Itam	
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SCHEDULE B (FEC Form 3X)	11		FOR LIN	E NUMBER	<del></del>		PAG	GE 25 C	)F 220
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Full Name (Last, First, Middle Initial)				Data	of Dict	ourcom	ont		
A. P2 PATHWAY PUBLIC AFFAIRS LLO	2				_	oursem			V
Mailing Address 1401 H ST NW STE 550				09		03	] / [ ]	2024	Y
0.4.		7: 0 1 -							
,	state DC	Zip Code 20005		FEC	dentifi	cation I	Number		
Purpose of Disbursement				С					
POLITICAL STRATEGY CONSULTING					ransar	tion IF	) : SB.6	7	
Candidate Name			Category/					<b>r</b> nent this F	Period
Office Occupies			Type	<b>│</b> ┌──	_	-		30000.0	0
Office Sought: House Disburser Senate		Consust						30000.0	U .
	Primary Other (spec	General							
State: District:	- 11.01 (Spec			N	lemo l	tem			
Full Name (Last, First, Middle Initial)									
B. RACONTEUR MEDIA COMPANY				Date	of Disl	oursem	ent		
				M	M M / D D / Y Y Y Y				
Mailing Address PO BOX 26511				09		03		2024	
,	state	Zip Code		FFC	dentifi	cation I	Number		
7.001.11	TX	78755			22				
Purpose of Disbursement PRINTING/POSTAGE			· · ·	C					
Candidate Name			0-1 /				: SB.76		احداد
			Category/ Type	Amou	III OT E	acn D	spursen	nent this F	rerioa
Office Sought: House Disbursem	ent For:			[				53845.6	1
	Primary	General					7		
	Other (spec	ify)		N	lemo l	tem			
State: District:				1-					
Full Name (Last, First, Middle Initial)  C. DED ELECTIONIT OF ATECNIL C				Date	of Diel	oursem	ent		
RED ELEPHANT STRATEGY LLC				M	_	DDD		YYY	V
Mailing Address 25475 MARSH LANDING PKWY				09		03	ľ	2024	
City	state	Zip Code							
PONTE VEDRA BEACH	FL	32082		FEC	dentifi	cation I	Number		
Purpose of Disbursement				С					
POLITICAL STRATEGY CONSULTING					ransa	ction II	) : SB.6	В	
Candidate Name			Category/	Amou	nt of E	Each D	isbursen	nent this F	Period
Office Sought: House Disbursem	ont For:		Туре					30000.0	0
	ent For: Primary	General					-	23000.0	
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TOTAL This Period (last page this line number only).				- 1 .					

SCHEDULE B (FEC Form 3X)	11		FOR LINE	NUMBER:		PAGE 26 OF 220
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		Summary Page	X 21b 28a	22 28b	23 28c	26 27 29 30b
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NAME OF COMMITTEE (In Full)						
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Full Name (Last, First, Middle Initial)				Date of	Disburseme	nt
A. RIGHTSIDE COMPLIANCE LLC					/ D D	/ Y Y Y Y
Mailing Address PO BOX 341027				09	03	2024
City	tate	Zip Code		EEC Ide	ntification N	umher
7.00.1	TX	78734			illioation 14	
Purpose of Disbursement COMPLIANCE CONSULTING				C		
Candidate Name			ليسيا		saction ID	
			Category/ Type	Amount	of Each Dis	bursement this Period
Office Sought: House Disbursem	ent For:		.,,,,,	1   ' '		30000.00
	Primary	General			7	4
	Other (spec	eify) ▼		Men	no Item	
State: District:						
Full Name (Last, First, Middle Initial)  B. THE LINCENIC COMPANIX				Data of	Disburseme	nt
THE LUKENS COMPANY						
Mailing Address 2800 SHIRLINGTON ROAD SUITE	900			09	03	2024
<u> </u>						
,	tate	Zip Code		FEC Ide	ntification N	umber
ARLINGTON Purpose of Disbursement	VA	22206				
COLLATERAL MATERIALS-LANYARDS				C		
Candidate Name			Category/	1	saction ID :	SB.41 bursement this Period
			Type	Amount	UI Lacii Dis	bursement this Fellou
Office Sought: House Disbursem	ent For:	1		11	<b>7</b> 5 1 1	3299.89
	Primary	General			,	,
	Other (spec	ify)		Men	no Item	
State: District:  Full Name (Last, First, Middle Initial)						
•				Date of	Disburseme	nt
ANN PIERCE				M M	/ D D	/ Y Y Y Y Y
Mailing Address 167 OLD CORINTH ROAD				09	04	2024
City	toto	Zin Codo				
•	tate GA	Zip Code 30263		FEC Ide	ntification N	umber
Purpose of Disbursement				C		
POLITICAL STRATEGY CONSULTING			L_, l		saction ID	: SB.69
Candidate Name			Category/	Amount	of Each Dis	bursement this Period
Office Sought: House Distance	ont Fam		Туре			7500.00
Office Sought: House Disbursem	ent For: Primary	General				7000.00
	Other (spec			П.,		
State: District:	(-1-30	• •		Men	no Item	
<u> </u>						
SUBTOTAL of Disbursements This Page (optional)						40799.89
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TOTAL This Period (last page this line number only).						

SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS		rate schedule(s)	FOR LINE I				
I LIVIIZED DISBUNGLIVIEN IS		category of the Summary Page	X 21b 28a	22 23 26 27 28b 28c 29 30b			
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NAME OF COMMITTEE (In Full)							
America PAC							
Full Name (Last, First, Middle Initial)				Date of Dishursement			
A. CHAIN BRIDGE BANK				Date of Disbursement			
Mailing Address 1390 CHAIN BRIDGE RD STE 515				09 04 2024			
,	state	Zip Code		FEC Identification Number			
	VA	22101					
Purpose of Disbursement				C			
BANK FEE Candidate Name				Transaction ID : SB.22			
Candidate Name			Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disbursem	nent For:		Турс	25.00			
	Primary	General		7 7 7			
President State: District:	Other (speci	ify) ▼		Memo Item			
Full Name (Last, First, Middle Initial)  3. CLIAIN DDIDGE DANK				Date of Disbursement			
CHAIN BRIDGE BANK				M M / D D / Y Y Y			
Mailing Address 1390 CHAIN BRIDGE RD STE 515	j			09 05 2024			
,	state	Zip Code		FEC Identification Number			
	VA	22101					
Purpose of Disbursement  BANK FEE				C			
Candidate Name			البحيا	Transaction ID : SB.23			
			Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disbursem	nent For:		.,,,,	125.00			
	Primary	General		4 4			
President	Other (speci	ify)		Mama Itam			
State: District:				Memo Item			
Full Name (Last, First, Middle Initial)							
CHAIN BRIDGE BANK				Date of Disbursement			
Mailing Address 1390 CHAIN BRIDGE RD STE 515				09 06 / 2024			
City	state	Zin Codo					
,	vate VA	Zip Code 22101		FEC Identification Number			
Purpose of Disbursement				C			
BANK FEE				Transaction ID : SB.24			
Candidate Name			Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disbursem	nent For:		.,,,,	400.00			
	Primary	General		4 4			
President	Other (speci	ify) ▼		Memo Item			
State: District:				Monto Rom			
SURTOTAL of Dichurcomente This Page (entional)				550.00			
SUBTOTAL of Disbursements This Page (optional)			······	550.00			
TOTAL This Period (last page this line number only).							

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER:	PAGE 28 OF 220
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)	00
	Detailed Summary Page		26 27 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)	The state of the position	IS SOME SOME DOME HOME	
/ America PAC			
Full Name (Last, First, Middle Initial)		Data of Dishurasment	
<sup>A.</sup> M&B ANALYTICS, LLC		Date of Disbursement	
Mailing Address PO BOX 2583		09 06	2024
,	State Zip Code	FEC Identification Nur	mher
7.2270 0.1210 1	VA 22301		TIDO!
Purpose of Disbursement		C	
DATA ANALYTICS/SURVEY RESEARCH/CONSUI	LTING	Transaction ID :	SB.49
Candidate Name	-	Category/ Amount of Each Disb	ursement this Period
Office Sought: House Disbursem	nent For:	Туре	40000.00
	Primary General		4-1-4-1
	Other (specify) ▼	Memo Item	
State: District:		Ivierno item	
Full Name (Last, First, Middle Initial)			
<sup>3.</sup> PUSH DIGITAL LLC		Date of Disbursement	
		M M / D D	YYYYY
Mailing Address 342 EAST BAY STREET		09 06	2024
,	State Zip Code SC 29401	FEC Identification Nur	mber
CHARLESTON Purpose of Disbursement	SC 29401		
DIGITAL MEDIA CONSULTING		C	
Candidate Name	l	Transaction ID: S  Category/ Amount of Each Disb	
		Category/ Amount of Each Disb	ursement tills Fellod
Office Sought: House Disburserr	nent For:		15950.00
	Primary General		
	Other (specify)	Memo Item	
State: District:			
Full Name (Last, First, Middle Initial)		Date of Disbursement	
STRATEGIC ANALYTICS AND CO	ONSULTING, LLC	M M / D D	, , , , , , , , , , , , , , , , , , ,
Mailing Address 1400 VILLAGE SQUARE BLVDSTE	∃ 3-277	09 06	2024
City	State Zip Code	FFC Identification Nu	mhor
TALLAHASSEE	FL 32312	FEC Identification Nur	IIDel
Purpose of Disbursement			
POLITICAL STRATEGY CONSULTING		Transaction ID :	SB.70
Candidate Name	-	Category/ Amount of Each Disb	ursement this Period
Office Sought: House Disbursem	nent For:	Туре	40000.00
	Primary General		7
	Other (specify)	п	
State: District:	<del></del>	Memo Item	
SUBTOTAL of Disbursements This Page (optional)			95950.00
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TOTAL This Period (last page this line number only).			,

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE (check only	
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America PAC			
Full Name (Last, First, Middle Initial)			
CHAIN BRIDGE BANK			Date of Disbursement
Mailing Address 1390 CHAIN BRIDGE RD STE 515			09 09 2024
	State Zip Code VA 22101		FEC Identification Number
Purpose of Disbursement			C
BANK FEE			
Candidate Name		Category/	Transaction ID: SB.25 Amount of Each Disbursement this Period
Office Sought: House Disbursem	nent For	Туре	50.00
	Primary General		7 7 7
	Other (specify) ▼		Memo Item
Full Name (Last, First, Middle Initial)  3. CMDI			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address 1593 SPRING HILL RD STE 400			09 09 2024
*	State Zip Code		FEC Identification Number
TYSONS CORNER Purpose of Disbursement	VA 22182		
DATABASE MANAGEMENT SERVICES			C
Candidate Name		Cotono	Transaction ID : SB.52
		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disbursem	nent For:		500.00
	Primary General		7 7 7
State: President  District:	Other (specify)		Memo Item
Full Name (Last, First, Middle Initial)			
<sup>C.</sup> OSCEOLA STRATEGIES LLC			Date of Disbursement
Mailing Address 8 THE GREEN STE A			09 09 2024
City	State Zip Code		FEC Identification Number
DOVER	DE 19901		
Purpose of Disbursement PRINTING/POSTAGE			C
Candidate Name		Category/	Transaction ID : SB.77 Amount of Each Disbursement this Period
Office Sought: House Disbursem	nent For	Type	379708.00
	Primary General		
	Other (specify) ▼		Mama Itam
State: District:	· · · · ·		Memo Item
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SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER		PAGE 30 OF 220
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check on	only one)		
		Summary Page	X 21b		23 28c	26 27 29 30b
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America PAC						
/						
Full Name (Last, First, Middle Initial)				Data	f Diaburaam	ant
A. RAPID FIRE RESEARCH, LLC					f Disbursen	
Mailing Address 716 GIDDINGS AVE #41				09	09	2024
City	tate	Zip Code		FFO Id		Niverbox
•	MD	21401		FEC 10	entification	Number
Purpose of Disbursement						
DATA ANALYTICS/SURVEY RESEARCH/CONSUL	TING			Tra	ansaction I	D : SB.46
Candidate Name			Category/	Amoun	t of Each D	Disbursement this Period
Office Sought: House Disbursem	ent For:		Туре			27000.00
	Primary	General			7	4-14-1
	Other (speci			□ Ma	mo Item	
State: District:				I IVIE	ino item	
Full Name (Last, First, Middle Initial)						
B. THREE ARBOR INSURANCE, INC	<b>.</b> .			Date o	f Disbursen	nent
				M = M	/ D D	
Mailing Address 2828 OLD 280 COURT SUITE 126				09	09	2024
City	tate	Zip Code				
-	AL	35243		FEC Id	entification	Number
Purpose of Disbursement				C		
INSURANCE			L l		nsaction II	D : SB.56
Candidate Name			Category/	Amoun	t of Each D	Disbursement this Period
Office Sought: House Disbursem	ont For		Type			39554.30
	Primary	General				00004.00
	Other (speci					
State: District:		• ,		I Me	mo Item	
Full Name (Last, First, Middle Initial)						
C. CHAIN BRIDGE BANK				Date o	f Disbursen	nent
				M M	/ D D	
Mailing Address 1390 CHAIN BRIDGE RD STE 515				09	10	2024
City	tate	Zip Code		FF0 14	ontification	Number
MCLEAN	VA	22101		FEC IO	entification	Number
Purpose of Disbursement						
BANK FEE				Tra	ansaction I	D : SB.26
Candidate Name			Category/	Amoun	t of Each D	Disbursement this Period
Office Sought: House Disbursem	ent For		Type	- 1		50.00
	Primary	General			7	4 4
	Other (speci			NAC NAC	mo Item	
State: District:				IVIE		
SUBTOTAL of Disbursements This Page (optional)						66604.30
<b>TOTAL</b> This Period (last page this line number only).						

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(check only	FOR LINE NUMBER: PAGE 31 OF 22 (check only one)			
	Detailed Summary Page	21b 28a	22 23 26 27 28b 28c 29 30b			
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NAME OF COMMITTEE (In Full)	, pom					
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Full Name (Last, First, Middle Initial)			Data of Dishuranment			
<sup>A.</sup> CHAIN BRIDGE BANK			Date of Disbursement			
Mailing Address 1390 CHAIN BRIDGE RD STE 515	;		09 11 2024			
,	State Zip Code		FEC Identification Number			
	VA 22101					
Purpose of Disbursement			C			
BANK FEE		ļ <u>[</u> ]	Transaction ID : SB.27			
Candidate Name		Category/	Amount of Each Disbursement this Period			
Office Sought:	nent For:	Туре	50.00			
Office Sought: House Disburser  Senate			50.00			
	Other (specify) —					
State: District:	Other (specify) ▼		Memo Item			
Full Name (Last, First, Middle Initial)  B. CLIAIN DDIDGE DANK			Date of Disbursement			
B. CHAIN BRIDGE BANK						
Mailing Address 1200 CHAIN PRIDGE SE STEET			09 12 2024			
Mailing Address 1390 CHAIN BRIDGE RD STE 515			00 12 2024			
,	State Zip Code		FEC Identification Number			
MCLEAN Purpose of Disbursement	VA 22101					
BANK FEE			C			
Candidate Name			Transaction ID : SB.28			
Sandidate Hallie		Category/	Amount of Each Disbursement this Period			
Office Sought: House Disbursem	nent For	Туре	52.50			
	nent For:  Primary General		52.50			
	Other (specify)					
State: District:	Carol (Specify)		Memo Item			
Full Name (Last, First, Middle Initial)						
C. CAMPAIGN SIDEKICK			Date of Disbursement			
Mailing Address 1550 OLD ANNETTA			09 13 2024			
City	State Zip Code		EEC Idontification Number			
The state of the s	TX 76008		FEC Identification Number			
Purpose of Disbursement			С			
SUBSCRIPTION			Transaction ID : SB.87			
Candidate Name		Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disbursem	nent For:	.,,,,	77000.00			
	Primary General		7 7 7			
	Other (specify) ▼		Mome Hors			
State: District:	· · · · · · · · · · · · · · · · · · ·		Memo Item			
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TOTAL This Period (last page this line number only).						
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Mailing Address 201 N UNION STREET, SUITE 310  City ALEXANDRIA Purpose of Disbursement SURVEY RESEARCH Candidate Name  Office Sought: House President State: District:  Full Name (Last, First, Middle Initial)  Pity Code VA  Zip Code VA  22314  FEC Identification Number  C  Transaction ID: SB.94  Amount of Each Disbursement this Period  Memo Item  Memo Item	SCHEDULE B (FEC Form 3X)	l la a						2 OF 220
Detailed Summary Page   28   28   28   30   30   30   30   30   30   30   3	ITEMIZED DISBURSEMENTS			I ` ·				
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Full)  America PAC  Full Name (Last, First, Middle Initial)  City AUSTIN AT THE GOBER GROUP PLLC  Mailing Address PO BOX 341016  City AUSTIN Purpose of Disbursement LEGAL CONSULTING Candidate Name  Office Sought: House President State: District  Full Name (Last, First, Middle Initial)  THE TARRANCE GROUP LLC  Mailing Address 201 N UNION STREET, SUITE 310  City ALEXANDRIA Purpose of Disbursement SURVEY RESEARCH Candidate Name  Office Sought: House President State: District  Full Name (Last, First, Middle Initial)  Crandidate Name  Office Sought: House President State: District  Full Name (Last, First, Middle Initial)  Crandidate Name  Office Sought: House President State: District  Full Name (Last, First, Middle Initial)  Crandidate Name  Office Sought: House President State: District  Full Name (Last, First, Middle Initial)  Crandidate Name  Office Sought: House President State: District  Full Name (Last, First, Middle Initial)  Crandidate Name  Office Sought: House President State: District  Full Name (Last, First, Middle Initial)  Crandidate Name  Office Sought: House President State: District  Full Name (Last, First, Middle Initial)  Crandidate Name  Office Sought: House President State: District  Fell Name (Last, First, Middle Initial)  Crandidate Name  Office Sought: House President State: District  Fell Candidate Name  Office Sought: House President State: District  Fell Name (Last, First, Middle Initial)  Date of Disbursement this Period  Transaction ID: \$8.94  Amount of Each Disbursement  99 15 2024  FEC Identification Number  Crategory! Transaction ID: \$8.94  Amount of Each Disbursement  99 15 2024  FEC Identification Number  Crategory! Transaction ID: \$8.94  Amount of Each Disbursement  99 15 2024  FEC Iden								
ANAME OF COMMITTEE (In Full)  America PAC  Full Name (Last, First, Middle Initial)  City AUSTIN  Candidate Name  Office Sought:   House   Disbursement For:   Primary   General   President   State:   Districts   President   President   President   State:   Disbursement		<u> </u>						
NAME OF COMMITTEE (in Full)  America PAC  Full Name (Last, First, Middle Initial)  A. THE GOBER GROUP PLLC  Mailing Address PO BOX 341016  City AUSTIN Purpose of Disbursement LEGAL CONSULTING Candidate Name  Office Sought:								
America PAC  Full Name (Last, First, Middle Initial)  A. THE GOBER GROUP PLLC  Mailing Address PO BOX 341016  City	1 1 7		, p					
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule	(s)   (check only	NUMBER: PAGE 33 OF 220 ly one)			
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<sup>A.</sup> CHAIN BRIDGE BANK			Date of Disbursement			
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BANK FEE		<u> </u>	Transaction ID : SB.31			
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A. DERIVE TECHNOLOGIES LLC					isbursemer	
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B. MINE CREEK STRATEGIES INC.				Date of D	isbursemer	nt
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A. CHAIN BRIDGE BANK  Mailing Address 1390 CHAIN BRIDGE RD STE 515	,		Date of Disbursement  09  18  2024
,	State Zip Code VA 22101		FEC Identification Number
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B. GOLDFINCH PARTNERS, LLC  Mailing Address PO BOX 408			Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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SCHEDULE B (FEC Form 3X)	Haa	water ask of the Co	FOR LINE NUMBER: PAGE 37 (					
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check or					
		Summary Page	X 211		23 28c	26 27 29 30b		
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Any information copied from such Reports and Statem or for commercial purposes, other than using the nam								
NAME OF COMMITTEE (In Full)								
America PAC								
Full Name (Last, First, Middle Initial)								
A. INTUIT				Date o	f Disbursen			
Mailing Address 2700 COAST AVE					18	2024		
,	tate CA	Zip Code 94043		FEC Id	entification	Number		
Purpose of Disbursement				С				
SUBSCRIPTION			l l		ansaction I	D : SB.88		
Candidate Name			Category/			Disbursement this Period		
Office Sought: House Disbursem	ent For:		Туре			95.94		
	Primary	General			7	4		
	Other (spec	ify) ▼		Me	emo Item			
Full Name (Last, First, Middle Initial)								
D	NOLII TI	NO ODOLIE	3	Date o	f Disbursen	nent		
BLUESTONE STRATEGIES & CONSULTING GROUP					/ D [	) / Y   Y   Y   Y		
Mailing Address PO BOX 134				09	19	2024		
,	tate	Zip Code		FEC Id	entification	Number		
GARRISONVILLE Purpose of Disbursement	VA	22463						
POLITICAL STRATEGY CONSULTING				C				
Candidate Name			Category/		nsaction II t of Each [	D: SB.73 Disbursement this Period		
Office Sought: House Disbursem	ent For		Туре			30000.00		
	Primary	General			7	4		
President	Other (spec	ify)		│	mo Itom			
State: District:				I IVIE	emo Item			
Full Name (Last, First, Middle Initial)					<del></del>			
C. CHAIN BRIDGE BANK					f Disbursen			
Mailing Address 1390 CHAIN BRIDGE RD STE 515				09	19			
City	tate	Zip Code		F50 ::		Niverban		
	VA	22101		FEC Id	entification	Number		
Purpose of Disbursement				C				
BANK FEE  Candidate Name					ansaction I			
Candidate Iname			Category/ Type	Amoun	t of Each D	Disbursement this Period		
Office Sought: House Disbursem	ent For:		Type	-		50.00		
	Primary	General			7	4 4		
	Other (spec	ify) ▼		│	emo Item			
State: District:								
						30145.94		
SUBTOTAL of Disbursements This Page (optional)			·····•		-	001-0.04		
TOTAL This Period (last page this line number only).								

SCHEDULE B (FEC Form 3X)	Use separ	rate schedule(s)	(s) FOR LINE NUMBER: (check only one)		PAGE 38 OF 220	
ITEMIZED DISBURSEMENTS	for each c	category of the Summary Page	X 21b   28a	22 23 28b 28c	26 27 29 30b	
Any information copied from such Reports and Statem or for commercial purposes, other than using the name						
NAME OF COMMITTEE (In Full)	addit	, pointe				
America PAC						
Full Name (Last, First, Middle Initial)				Data of Divi	mont	
<sup>A.</sup> CHAIN BRIDGE BANK				Date of Disburser		
Mailing Address 1390 CHAIN BRIDGE RD STE 515	09 20					
,	State	Zip Code		FEC Identification	Number	
	VA	22101				
Purpose of Disbursement						
BANK FEE			<u></u>	Transaction I	ID : SB.34	
Candidate Name			Category/		Disbursement this Period	
Office Squaht	lost F		Type		127.50	
Office Sought: House Disbursem		Concret			127.50	
	Primary	General				
State: District:	Other (speci	ııy <i>)</i> ▼		Memo Item		
Full Name (Last, First, Middle Initial)				_		
B				Date of Disburser	nent	
<sup>B.</sup> CHAIN BRIDGE BANK						
Mailing Address 1390 CHAIN BRIDGE RD STE 515		09 / 23				
City	State	Zip Code		FEC Identification	Number	
MCLEAN	VA	22101		FEC Identification	ivuiiiDei	
Purpose of Disbursement				С		
BANK FEE				Transaction ID : SB.35		
Candidate Name			Category/		Disbursement this Period	
Office Occupits			Type		05.00	
Office Sought: House Disbursem					95.00	
	Primary	General				
	Other (speci	пу)		Memo Item		
State: District:  Full Name (Last, First, Middle Initial)						
	1.0			Date of Disburser	ment	
LEAD BLOCKER STRATEGIES, L	LU			M M / D		
Mailing Address 3835 9TH STREET NUNIT 105W				09 23		
City	State	Zip Code	+	FEC Identification	Number	
,	VA	22203		FEC Identification	Number	
Purpose of Disbursement		<u>'</u>		С		
POLITICAL STRATEGY CONSULTING				Transaction	ID : SB.74	
Candidate Name	Candidate Name  Category/ Type					
Office Sought: House Disbursem	nent For		. , , , ,		20000.00	
Senate Primary General				4	4 4	
	Other (speci			П.,		
State: District:	(3500	•, •		Memo Item		
SUBTOTAL of Disbursements This Page (optional)			<b>&gt;</b>	7	20222.50	
TOTAL This Period (last page this line number only).				1		

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule				
ITEMIZED DISBURSEMENTS	for each category of th Detailed Summary Pag	e Consolt only	22 23 26 27 28b 28c 29 30b		
Any information copied from such Reports and Staten or for commercial purposes, other than using the nam					
NAME OF COMMITTEE (In Full)	io and dadress of any po		o construction from each committee.		
America PAC					
Full Name (Last, First, Middle Initial)					
M&B ANALYTICS, LLC			Date of Disbursement		
Mailing Address PO BOX 2583			09 23 2024		
City ALEXANDRIA	State Zip Code VA 22301		FEC Identification Number		
Purpose of Disbursement			C		
SURVEY RESEARCH			Transaction ID : SB.96		
Candidate Name		Category/ Type	Amount of Each Disbursement this Period		
Office Sought: House Disbursen	nent For:	71	40000.00		
Senate President	Primary Genera Other (specify) ▼	I	П.,		
State: District:	(apasa), <b>v</b>		Memo Item		
Full Name (Last, First, Middle Initial)					
B. UPONE INSIGHTS, LLC			Date of Disbursement		
Mailing Address 4251 25TH STREET N			09 23 2024		
,	State Zip Code		FEC Identification Number		
ARLINGTON	VA 22207				
Purpose of Disbursement					
SURVEY RESEARCH Candidate Name			Transaction ID : SB.95		
Candidate Name		Category/	Amount of Each Disbursement this Period		
Office Sought: House Disbursen	nent For:	Туре	90000.00		
	Primary Genera	I	7 7 7		
	Other (specify)	-	Memo Item		
State: District:			L Mellie Relli		
Full Name (Last, First, Middle Initial)  C. CHAIN BRIDGE BANK			Date of Disbursement		
CHAIN BRIDGE DAINN			M M / D D / Y Y Y Y		
Mailing Address 1390 CHAIN BRIDGE RD STE 515	5		09 24 2024		
,	State Zip Code		FEC Identification Number		
MCLEAN	VA 22101				
Purpose of Disbursement BANK FEE			C		
Candidate Name	Transaction ID : SB.36 Amount of Each Disbursement this Period				
Office Sought: House Disbursen	nent For:	Type	155.00		
	Primary Genera	ıl	7 7		
President	Other (specify) ▼		Mome Items		
State: District:	· · · · · · · · · · · · · · · · · · ·		Memo Item		
SUBTOTAL of Disbursements This Page (optional)			130155.00		
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TOTAL This Period (last page this line number only)					

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 28a	one) 22 23 26 27 28b 28c 29 30b	
Any information copied from such Reports and Statem				
or for commercial purposes, other than using the nam  NAME OF COMMITTEE (In Full)	e and address of any politi	car committee to	Solicit contributions from such committee.	
/ America PAC				
Full Name (Last, First, Middle Initial)			Data of Dishuranment	
<sup>A.</sup> MEETING STREET RESEARCH, LLO	C		Date of Disbursement	
Mailing Address 98 W SHIPYARD ROAD	09 24 2024			
,	State Zip Code		FEC Identification Number	
	SC 29464			
Purpose of Disbursement				
SURVEY RESEARCH			Transaction ID : SB.97	
Candidate Name		Category/	Amount of Each Disbursement this Period	
Office Sought: House Disbursem	nent For:	Туре	30000.00	
	Primary General		7 7 7	
	Other (specify)			
State: District:	outor (opoony) ▼		Memo Item	
Full Name (Last, First, Middle Initial)				
<b>.</b>			Date of Disbursement	
PEAK INSIGHTS LLC			M = M / D = D / Y = Y = Y	
Mailing Address 350 RYMAN STREETSUITE 300			09 24 2024	
,	State Zip Code		FEC Identification Number	
	MT 59802			
Purpose of Disbursement		C		
SURVEY RESEARCH			Transaction ID : SB.98	
Candidate Name		Category/	Amount of Each Disbursement this Period	
Office Sought: House Disbursem	oont For:	Туре	59000.00	
			33000.00	
	Primary General			
State: District:	Other (specify)		Memo Item	
Full Name (Last, First, Middle Initial)				
CHAIN BRIDGE BANK			Date of Disbursement	
Mailing Address 1390 CHAIN BRIDGE RD STE 515			09 25 7 2024	
City	State Zip Code			
	VA 22101		FEC Identification Number	
Purpose of Disbursement			C	
BANK FEE			Transaction ID : SB.37	
Candidate Name		Category/ Type	Amount of Each Disbursement this Period	
Office Sought: House Disbursem	nent For:		100.00	
Senate	7 7			
President	Other (specify) ▼		Memo Item	
State: District:			Memo item	
SUBTOTAL of Disbursements This Page (optional)			89100.00	
- Color in England in the Fage (optional)				
TOTAL This Period (last page this line number only).			1	

ITEMIZED DISBURSEMENTS	for each c	rate schedule(s) category of the Summary Page	FOR LINE (check only 21b 28a	
Any information copied from such Reports and Statem or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)  America PAC				
A. IMGE LLC  Mailing Address 1401 H STREET NW SUITE 550	Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
WASHINGTON Purpose of Disbursement WEB SERVICES Candidate Name  Office Sought: House Disbursen Senate	nent For: Primary Other (speci	Zip Code 20005	Category/ Type	FEC Identification Number  C  Transaction ID : SB.100  Amount of Each Disbursement this Period  46000.00  Memo Item
B. RAPID FIRE RESEARCH, LLC  Mailing Address 716 GIDDINGS AVE #41		Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
ANNAPOLIS Purpose of Disbursement SURVEY RESEARCH Candidate Name  Office Sought: House Disbursem Senate	nent For: Primary Other (speci	Zip Code 21401	Category/ Type	FEC Identification Number  C  Transaction ID: SB.99  Amount of Each Disbursement this Period  27000.00  Memo Item
C. T'S SCREENPRINTING  Mailing Address 24419 S PERSIMMON LANE		Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
PECULIAR Purpose of Disbursement CANVASSING FIELD OPERATIONS UNIFORMS Candidate Name  Office Sought: House Disbursen		Zip Code 64078	Category/ Type	FEC Identification Number  C  Transaction ID: SB.39  Amount of Each Disbursement this Period  45021.00
	Primary Other (speci	General ify) ▼		Memo Item
SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only)				118021.00

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SCHEDULE B (FEC Form 3X)	l le -	water activity	FOR LINE	NUMBER:		PAGE 42	OF 220
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	of the		(check only one)		
	Detailed Summary Page    Detailed Summary Page   28a		22 28b	23 28c	26 27 29 30b	1	
Any information conicd from such Danasta and Chates							-
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam							
NAME OF COMMITTEE (In Full)							
America PAC							
Full Name (Last, First, Middle Initial)							
<sup>A.</sup> CHAIN BRIDGE BANK	Date of I	Disburseme	nt				
Mailing Address 1390 CHAIN BRIDGE RD STE 515					26	2024	Y
City	state	Zip Code		EEC Idos	atification N	umbor	
	VA	22101		FEC Idei	ntification N	umber	
Purpose of Disbursement							
BANK FEE				Tran	saction ID	SB.38	
Candidate Name			Category/	Amount	of Each Dis	bursement this	Period
Office Sought: House Disbursem	ont For:		Туре			100	.00
	Primary	General			7	7	45
	Other (spec			П м			
State: District:	` '	• ,		Mem	o Item		
Full Name (Last, First, Middle Initial)							
B. CHAIN BRIDGE BANK				Date of I	Disburseme	nt	
					/ D D	/ Y = Y = Y	Y
Mailing Address 1390 CHAIN BRIDGE RD STE 515				09	27	2024	
,	state VA	Zip Code 22101		FEC Idea	ntification N	umber	
Purpose of Disbursement		22101		C			1
BANK FEE			L I		anatian ID	CD 404	
Candidate Name Category/					saction ID : of Each Dis	bursement this	Period
			Type				
Office Sought: House Disbursem	ent For:				75	25	5.00
	Primary	General					
State: District:	Other (spec	city)		Mem	o Item		
Full Name (Last, First, Middle Initial)							
C.				Date of I	Disburseme	nt	
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Mailing Address				1 LI			
011		I= 6 :					
City	state	Zip Code		FEC Idea	ntification N	umber	
Purpose of Disbursement		1		C			1
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Candidate Name Category/				Amount	of Each Dis	bursement this	Period
	Type						
Office Sought:							
	Primary	General					
State: District:	Other (spec	aiy) ▼		Mem	o Item		
State. District.							
SUBTOTAL of Disbursements This Page (optional)						125	5.00
CODITION OF DISDUISORIES THIS Lage (optional)						7	
TOTAL This Period (last page this line number only).						6093447	7.31

TEMIZED INDEPENDENT EXPENDITURES				PAGE 43 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item D	ate of Public Distribution/Dissemination
ARENA MAIL & DIGITAL				08 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1260 EAST STRINGHAM AVE			A	mount
STE 400		7: 0 1		
City	State	Zip Code		61875.50
SALT LAKE CITY	UT	84106		ransaction ID : SE24.44 ate of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office S	ought: House District: 00
TRUMP, DONALD, , ,		Oppose		esident Senate State:
Calendar Year-To-Date				ement For: Primary X General
Per Election for Office Sought	6	8481824.31	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item D	ate of Public Distribution/Dissemination
ARENA MAIL & DIGITAL				M M / D D / Y Y Y Y
Mailing Address 1260 EAST STRINGHAM AVE				08 19 2024
STE 400			A	mount
City	State	Zip Code		61875.50
SALT LAKE CITY	UT	84106		ransaction ID : SE24.45 ate of Disbursement or Obligation
Purpose of Expenditure	1	Category/		M M / D D / Y Y Y Y
PRINTING		Type		08 14 2024
Name of Federal Candidate:		Support	Office S	ought: House District:00
HARRIS, KAMALA, , ,		Oppose	X Pr	esident Senate State:
Calendar Year-To-Date	6	8481824.31	1	ement For: Primary X General
Per Election for Office Sought	7	0401024.31	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. •	123751.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es		· •	
(a) TOTAL Independent Expenditures				
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		_	M = M	/ D D / Y Y Y Y
Signature		_ Date	e 08	14 2024

# SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITORES				PAGE 44 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	n M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
ARENA MAIL & DIGITAL				08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1260 EAST STRINGHAM AVE				
STE 400				Amount
City	State	Zip Code		160892.50
SALT LAKE CITY	UT	84106		Transaction ID : SE24.72 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/		08 21 2024
		Type		
Name of Federal Candidate:		X Support	Office	Sought: House District:00
TRUMP, DONALD, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	, 6	8481824.31	Disbur 2024	sement For:
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
ARENA MAIL & DIGITAL				08 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1260 EAST STRINGHAM AVE				
STE 400				Amount
City	State	Zip Code		160892.50
SALT LAKE CITY	UT	84106		Transaction ID : SE24.73  Date of Disbursement or Obligation
Purpose of Expenditure		Category/		08 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
PRINTING/POSTAGE		Type		00 21 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date	6	8481824.31	1	sement For: Primary X General
Per Election for Office Sought	7	0101021101	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. •	321785.00
(b) SUBTOTAL of Unitemized Independent Expenditur	es		. •	7 7 7
(c) TOTAL Independent Expenditures				
()				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		5 .	M = 00	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	e 08	21 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 45 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				0
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Dat	te of Public Distribution/Dissemination
ARENA MAIL & DIGITAL				09 03 / 2024
Mailing Address 1260 EAST STRINGHAM AVE			Am	ount
STE 400				
City	State	Zip Code		321785.00
SALT LAKE CITY	UT	84106		ansaction ID : SE24.119 te of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
PRINTING/POSTAGE		Type		09 03 2024
Name of Federal Candidate:		Support	Office Sou	ught: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Pres	sident Senate State:
Calendar Year-To-Date		0.404.004.04	Disbursen	nent For: Primary X General
Per Election for Office Sought	, , ,	8481824.31	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Dat	te of Public Distribution/Dissemination
ARENA MAIL & DIGITAL				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1260 EAST STRINGHAM AVE				03 20 2024
STE 400			Am	ount
City	State	Zip Code		175550.00
SALT LAKE CITY	UT	84106		ansaction ID : SE24.209 te of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
PRINTING/POSTAGE		Type		09 16 2024
Name of Federal Candidate:		X Support	Office Sou	ught: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pres	sident Senate State:
Calendar Year-To-Date		0.404.004.04	Disbursen	nent For: Primary X General
Per Election for Office Sought	1	8481824.31	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				497335.00
			=	
(b) SUBTOTAL of Unitemized Independent Expenditur	es		· • _	
() 70711				
(c) TOTAL Independent Expenditures			• •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,			M = M	/ D D / Y Y Y Y
Signature		_ Date	9 09	03 2024

ITEMIZED INDEPENDENT EXPENDITURES PAGE 46 OF 220 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ America PAC C00879510 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee ARENA MAIL & DIGITAL 20 2024 Mailing Address 1260 EAST STRINGHAM AVE Amount **STE 400** City State Zip Code 175550.00 SALT LAKE CITY UT 84106 Transaction ID: SE24.210 Date of Disbursement or Obligation Purpose of Expenditure Category/ PRINTING/POSTAGE 09 2024 Type Name of Federal Candidate: 00 Support Office Sought: House District: HARRIS, KAMALA, , , Oppose President Senate State: Primary Disbursement For: X General Calendar Year-To-Date 68481824.31 2024 Per Election for Office Sought Other (specify) ▶ Date of Public Distribution/Dissemination Full Name of Payee Memo Item ARENA MAIL & DIGITAL 2024 20 Mailing Address 1260 EAST STRINGHAM AVE Amount **STE 400** 61875.50 City State Zip Code SALT LAKE CITY Transaction ID: SE24.271 UT 84106 Date of Disbursement or Obligation Purpose of Expenditure Category/ 2024 19 **PRINTING** Type Name of Federal Candidate: 00 X Support Office Sought: House District: TRUMP, DONALD, , , X President Oppose Senate State: X General Disbursement For: Primary Calendar Year-To-Date 68481824.31 2024 Per Election for Office Sought Other (specify) ▶ 237425.50 (a) SUBTOTAL of Itemized Independent Expenditures ...... (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. GOBER, CHRIS, , , 2024 16 09 Date Signature

PAGE 47 OF 220 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ America PAC C00879510 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee ARENA MAIL & DIGITAL 20 2024 Mailing Address 1260 EAST STRINGHAM AVE Amount **STE 400** City State Zip Code 61875.50 SALT LAKE CITY UT 84106 Transaction ID: SE24.272 Date of Disbursement or Obligation Purpose of Expenditure Category/ **PRINTING** 09 19 2024 Type Name of Federal Candidate: 00 Support Office Sought: House District: HARRIS, KAMALA, , , Oppose President Senate State: Primary Disbursement For: X General Calendar Year-To-Date 68481824.31 2024 Per Election for Office Sought Other (specify) ▶ Date of Public Distribution/Dissemination Full Name of Payee Memo Item ARENA MAIL & DIGITAL 2024 24 Mailing Address 1260 EAST STRINGHAM AVE Amount **STE 400** 467842.00 City State Zip Code SALT LAKE CITY Transaction ID: SE24.314 UT 84106 Date of Disbursement or Obligation Purpose of Expenditure Category/ 2024 PRINTING/POSTAGE Type Name of Federal Candidate: 00 Support Office Sought: House District: HARRIS, KAMALA, , , X President Oppose Senate State: X General Disbursement For: Primary Calendar Year-To-Date 68481824.31 2024 Per Election for Office Sought Other (specify) ▶ 529717.50 (a) SUBTOTAL of Itemized Independent Expenditures ..... (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. GOBER, CHRIS, , , 20 2024 09 Date Signature

TEMIZED INDEFENDENT EXPENDITORES				PAGE 48 OF 220
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
, ,				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
ARENA MAIL & DIGITAL				10 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1260 EAST STRINGHAM AVE				Amount
STE 400	State	Zip Code		261172.00
SALT LAKE CITY	UT	84106		Transaction ID : SE24.368
Purpose of Expenditure				Date of Disbursement or Obligation
PRINTING/POSTAGE		Category/ Type		09 / 26 / Y Y Y Y Y 2024
Name of Federal Candidate:		Support	Office	Sought: House District:00
TRUMP, DONALD, , ,		Oppose		President Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disbu 2024	rsement For: Primary General
	7			Other (specify)
Full Name of Payee  BLITZ CANVASSING LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address				M 08 / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				Amount
STE 400	Otata	Zin Code		745000.00
City DENVER	State	Zip Code 80231		Transaction ID : SE24.46 Date of Disbursement or Obligation
Purpose of Expenditure		Category/	$\neg$	M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type		08 14 2024
Name of Federal Candidate:		X Support	Office	Sought: House District:00
TRUMP, DONALD, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date	6	8481824.31		rsement For: Primary X General
Per Election for Office Sought		0401024.01	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. •	1006172.00
<b>(1) 01157571</b> (11 11 11 11 11 11 11 11 11 11 11 11 11				
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		• • • • • • • • • • • • • • • • • • • •
GOBER, CHRIS, , ,		_	M	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	e 09	26 2024

TIEMIZED INDEFENDENT EXPENDITORES				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	/ M / D D / Y N Y N Y
Full Name of Payee BLITZ CANVASSING LLC		☐ Memo	Item Date	of Public Distribution/Dissemination
Mailing Address 10065 E HARVARD AVE			- I	08 15 2024
STE 400			Amo	unt
City	State	Zip Code		745000.00
DENVER	СО	80231	<b>I</b>	saction ID : SE24.47 of Disbursement or Obligation
Purpose of Expenditure  CANVASSING/FIELD OPERATIONS		Category/ Type		08 / 14 / 2024
Name of Federal Candidate:		Support	Office Soug	ht: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Presid	
Calendar Year-To-Date Per Election for Office Sought	, 6	8481824.31	Disburseme	nt For:
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
BLITZ CANVASSING LLC			[	08 / 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE			Amou	unt.
STE 400			Amor	arit.
City DENVER	State	Zip Code 80231	<b>I</b>	567300.00 saction ID : SE24.48
Purpose of Expenditure		Category/	Date	of Disbursement or Obligation
CANVASSING/FIELD OPERATIONS		Туре	الك	08 14 2024
Name of Federal Candidate:		X Support	Office Soug	ht: House District: 00
TRUMP, DONALD, , ,		Oppose	X Presid	dent Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disburseme	nt For:  Primary
(a) SUBTOTAL of Itemized Independent Expenditures				1312300.00
			, <u> </u>	
(b) SUBTOTAL of Unitemized Independent Expenditure	res		· •	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		•
GOBER, CHRIS, , ,		5 :	M M /	14 2024
Signature		_ Date	9 08	17 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 50 OF 220
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X  FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				08 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				Au
STE 400				Amount
City	State	Zip Code		567300.00
DENVER	со	80231		Transaction ID : SE24.49 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type		08 14 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date	-	2040402424		sement For: Primary X General
Per Election for Office Sought	, , , ,	8481824.31	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				08 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				
STE 400				Amount
City	State	Zip Code		523431.85
DENVER	со	80231		Transaction ID : SE24.109 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		08 / 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type		00 20 2024
Name of Federal Candidate:		X Support	Office	Sought: House District:00
TRUMP, DONALD, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date	6	8481824.31		sement For: Primary X General
Per Election for Office Sought	1	0.101.101	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			· •	1090731.85
(b) SUBTOTAL of Unitemized Independent Expenditure	es		. •	7 7 7
(c) TOTAL Independent Expenditures				
(-,				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		_	M	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	e 08	14 2024

Signature

### SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES				PAGE 51 OF 220
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼
America i Ac				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	"M" / D "D / Y "Y "Y "Y
Full Name of Payee BLITZ CANVASSING LLC		☐ Memo	Item Date	of Public Distribution/Dissemination
			N N	08 27 7 2024
Mailing Address 10065 E HARVARD AVE			Amou	nt
STE 400		T = .		
City	State	Zip Code		523431.85
DENVER	СО	80231		saction ID : SE24.110 of Disbursement or Obligation
Purpose of Expenditure  CANVASSING/FIELD OPERATIONS		Category/ Type		08 / 28 / 2024
Name of Federal Candidate:		Support	Office Sough	nt: House District:00
HARRIS, KAMALA, , ,		Oppose	X Preside	
			Disbursemen	
Calendar Year-To-Date Per Election for Office Sought	, 6	8481824.31	2024	Other (specify)
Full Name of Payee		Memo	<u> </u>	of Public Distribution/Dissemination
BLITZ CANVASSING LLC			T.	09 03 / 2024
Mailing Address 10065 E HARVARD AVE				ــــا لــا لـــــا
STE 400			Amou	nt
City	State	Zip Code		346696.55
DENVER	со	80231	Trans	saction ID : SE24.133 of Disbursement or Obligation
Purpose of Expenditure  CANVASSING/FIELD OPERATIONS		Category/	N N	09 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
CANVASSING/FIELD OF ERATIONS		Type		
Name of Federal Candidate:		X Support	Office Sough	nt: House District: 00
TRUMP, DONALD, , ,		Oppose	X Preside	ent Senate State:
Calendar Year-To-Date	6	8481824.31	Disbursemen	nt For: Primary X General
Per Election for Office Sought	T T		C	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures				870128.40
(,,				1/9-1-1/9-1-1/8-1
(b) SUBTOTAL of Unitemized Independent Expenditure	es		<b>→</b>	7 7
(a) TOTAL Independent Evpanditures				
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
CODED CHDIS			M = M /	D D / Y T Y T Y T Y
GOBER, CHRIS, , ,		_ Date	9 08	28 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 52 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M = M / D = D / Y = Y = Y = Y
Full Name of Payee BLITZ CANVASSING LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
				09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE STE 400				Amount
City	State	Zip Code		346696.55
DENVER	СО	80231		Transaction ID : SE24.134 Date of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		09 / 05 / 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose		President Senate State:
Calendar Year-To-Date		23		rsement For: Primary X General
Per Election for Office Sought	6	8481824.31	2024	Other (specify)
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				
STE 400				Amount
City	State	Zip Code		306845.25
DENVER	со	80231		Transaction ID : SE24.135 Date of Disbursement or Obligation
Purpose of Expenditure  CANVASSING/FIELD OPERATIONS		Category/ Type		09 / 05 / Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	Sought: House District:00
TRUMP, DONALD, , ,		Oppose		President Senate State:
Only the Very To Date				rsement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	2024	Other (specify) >
(a) SUBTOTAL of Itemized Independent Expenditures				653541.80
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(a) TOTAL lades and out Forest differen				
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,			M =	M / D D / Y Y Y Y Y
Signature		_ Date	9 09	05 2024

Signature

### SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES				PAGE 53 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee BLITZ CANVASSING LLC		☐ Memo	Item Date	e of Public Distribution/Dissemination
Mailing Address 10065 E HARVARD AVE			Amo	ount
STE 400				
City DENVER	State	Zip Code 80231	Trar	306845.25 nsaction ID : SE24.136
Purpose of Expenditure		Category/		e of Disbursement or Obligation
CANVASSING/FIELD OPERATIONS		Type		09 05 2024
Name of Federal Candidate:		Support	Office Sou	ght: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Presi	dent Senate State:
Calendar Year-To-Date Per Election for Office Sought	, 6	8481824.31	Disburseme 2024	ent For: ☐ Primary ☐ General  Other (specify) ▶
Full Name of Payee BLITZ CANVASSING LLC		☐ Memo	Item Date	e of Public Distribution/Dissemination
				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE STE 400			Amo	ount
City	State	Zip Code		326950.85
DENVER	со	80231		nsaction ID : SE24.164 e of Disbursement or Obligation
Purpose of Expenditure  CANVASSING/FIELD OPERATIONS		Category/ Type		09 / 10 / 2024
Name of Federal Candidate: TRUMP, DONALD, , ,		Support Oppose	Office Sou	
- , - ,,,		Оррозе	X Presi	
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disburseme 2024	ent For:
(a) SUBTOTAL of Itemized Independent Expenditures			· -	633796.10
(b) SUBTOTAL of Unitemized Independent Expenditur	es		<b>•</b> L	
(c) TOTAL Independent Expenditures			<b>•</b>	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		_ Date	e 09	05 / 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 54 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				0 000073310
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Da	te of Public Distribution/Dissemination
BLITZ CANVASSING LLC				09 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE			Δη	nount
STE 400				
City	State	Zip Code		326950.85
DENVER	CO	80231		ansaction ID : SE24.165 te of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type		09 10 2024
Name of Federal Candidate:		Support	Office So	ught: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Pre	sident Senate State:
Calendar Year-To-Date	6	8481824.31	Disburser	ment For: Primary X General
Per Election for Office Sought	1	0401024.31	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Da	te of Public Distribution/Dissemination
BLITZ CANVASSING LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				55 55 2521
STE 400			An	nount
City	State	Zip Code		373417.60
DENVER	со	80231		ransaction ID : SE24.166 te of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type		09 10 2024
Name of Federal Candidate:		Support	Office So	ught: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pre	sident Senate State:
Calendar Year-To-Date		8481824.31	Disburser	nent For: Primary X General
Per Election for Office Sought	1	0401024.31	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				700368.45
(b) SUBTOTAL of Unitemized Independent Expenditure	es		· • _	
(a) TOTAL lader and out Fun and thurse				
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidate party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,			M M	/ D D / Y Y Y Y
Signature		_ Date	9 09	10 2024

TIEMIZED INDEFENDENT EXPENDITORES				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	/ M / D D / Y Y Y Y
Full Name of Payee BLITZ CANVASSING LLC		☐ Memo	Item Date	of Public Distribution/Dissemination
			[	M 09 / D 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE STE 400			Amou	unt
City	State	Zip Code	$ \Gamma$	373417.60
DENVER	СО	80231		saction ID : SE24.167 of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type	ا الـ	09 10 2024
Name of Federal Candidate:		Support	Office Soug	ht: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Presid	
Calendar Year-To-Date Per Election for Office Sought	, 6	8481824.31	Disburseme 2024	nt For:
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
BLITZ CANVASSING LLC				M
Mailing Address 10065 E HARVARD AVE				
STE 400			Amou	unt
City	State	Zip Code		65250.00
DENVER	со	80231		saction ID : SE24.193 of Disbursement or Obligation
Purpose of Expenditure  CANVASSING/FIELD OPERATIONS		Category/ Type		09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
N (5 1 10 11)				- 20
Name of Federal Candidate:  KENT, JOE, , ,		Support Oppose	Office Soug	\\\\
Calendar Year-To-Date Per Election for Office Sought	7 7	277161.26	Disburseme 2024	nt For:
(a) SUBTOTAL of Itemized Independent Expenditures			· [	438667.60
(b) SUBTOTAL of Unitemized Independent Expenditure	es		<b>-</b>	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		• •
GOBER, CHRIS, , ,		Date	e 09	10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	, 00	

TEMIZED INDEPENDENT EXPENDITURES				PAGE 56 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				0
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Da	te of Public Distribution/Dissemination
BLITZ CANVASSING LLC				09 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE			A	
STE 400			All	nount
City	State	Zip Code		65250.00
DENVER	CO	80231		ansaction ID : SE24.194 te of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type	_   _	09 16 2024
Name of Federal Candidate:		Support	Office So	ught: X House District: 03
PEREZ, MARIE, GLUESENKAMP, ,		Oppose	Pre	esident Senate State: WA
Calendar Year-To-Date		077404 00	Disburser	ment For: Primary X General
Per Election for Office Sought	7-1-1-7-	277161.26	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Da	te of Public Distribution/Dissemination
BLITZ CANVASSING LLC				M M / D D / Y Y Y Y
Mailing Address 10065 E HARVARD AVE				09 15 2024
STE 400			An	nount
City	State	Zip Code		106031.25
DENVER	со	80231		ransaction ID : SE24.195 tte of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type	_   _	09 16 2024
Name of Federal Candidate:		X Support	Office So	ught: X House District: 13
COUGHLIN, KEVIN, , ,		Oppose	Pre	esident Senate State: OH
Calendar Year-To-Date		453125.70	Disburser	ment For: Primary X General
Per Election for Office Sought	7	453125.70	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. •	171281.25
				, , , , , , , , , , , , , , , , , , , ,
(b) SUBTOTAL of Unitemized Independent Expenditure	es		. ▶	
/ N =				
(c) TOTAL Independent Expenditures	•••••		· • _	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its a	te or authorized			
GOBER, CHRIS, , ,		_	M = M	/ D D / Y Y Y Y Y
Signature		_ Date	9 09	16 2024

ITEMIZED INDEPENDENT EXPENDITURES				PAGE 57 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	n M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				09 / 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				Amount
STE 400	State	Zin Codo		106031.25
DENVER	CO	Zip Code 80231		Transaction ID : SE24.196
Purpose of Expenditure		Cotomony	_	Date of Disbursement or Obligation
CANVASSING/FIELD OPERATIONS		Category/ Type		09 16 2024
Name of Federal Candidate:		Support	Office	Sought: X House District: 13
SYKES, EMILIA, , ,		Oppose	_ F	President Senate State: OH
Calendar Year-To-Date		453125.70	1	sement For: Primary X General
Per Election for Office Sought	7 7	453125.70	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				09 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				
STE 400				Amount
City	State	Zip Code		80062.50
DENVER	со	80231		Transaction ID : SE24.197 Date of Disbursement or Obligation
Purpose of Expenditure  CANVASSING/FIELD OPERATIONS		Category/ Type		09 / 16 / Y Y Y Y Y
Name of Federal Candidate:				Sought: V House District: 09
MERRIN, DERRICK, , ,		Support		Sought. District.
WERRING, DERRICH, , ,		Oppose		Tesident Senate State.
Calendar Year-To-Date Per Election for Office Sought	7	358378.63	Disburs 2024	sement For:  Primary
(a) SUBTOTAL of Itemized Independent Expenditures			. 1	186093.75
(a) SOBTOTAL OF REMIZED INDEPENDENT EXPENDITURES				100000.70
(b) SUBTOTAL of Unitemized Independent Expenditure	res			
(a) 33213 M2 of officernized independent Experiation				
(c) TOTAL Independent Expenditures				
				, ,
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
CODED CHING			M	M / D D / Y Y Y Y Y
GOBER, CHRIS, , , Signature		_ Date	e 09	16 2024

TEMIZED INDEPENDENT EXPENDITORES				PAGE 58 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item Da	ate of Public Distribution/Dissemination
BLITZ CANVASSING LLC				M M / D D / Y Y Y Y
Mailing Address 10065 E HARVARD AVE				09 15 2024
STE 400			Ar	nount
City	State	Zip Code		80062.50
DENVER	СО	80231		ansaction ID : SE24.198 ate of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type	_   _	09 16 2024
Name of Federal Candidate:		Support	Office Sc	ought: X House District:09
KAPTUR, MARCY, , ,		Oppose	Pre	esident Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	, , ,	358378.63	Disburse 2024	ment For:
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination
BLITZ CANVASSING LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				00 10 2021
STE 400			Ar	nount
City	State	Zip Code		148462.50
DENVER	со	80231		ransaction ID : SE24.199 ate of Disbursement or Obligation
Purpose of Expenditure		Category/		09 16 2024
CANVASSING/FIELD OPERATIONS		Type		00 10 2021
Name of Federal Candidate:		X Support	Office Sc	ought: House District: 17
LAWLER, MIKE, , ,		Oppose	Pre	esident Senate State: NY
Calendar Year-To-Date		698935.53	Disburse	ment For: Primary X General
Per Election for Office Sought	7 7		2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			•	228525.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		_	M = M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	9 09	16 2024

Signature

### SCHEDULE E (FEC Form 3X)

TEMPED INDEPENDENT EXPENDITURES				
TEMIZED INDEPENDENT EXPENDITURES				PAGE 59 OF 220
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	n M = M / D = D / Y = Y = Y
Full Name of Payee BLITZ CANVASSING LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 10065 E HARVARD AVE				09 15 2024
STE 400				Amount
City	State	Zip Code		148462.50
DENVER	со	80231		Transaction ID : SE24.200 Date of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	Sought: X House District: 17
JONES, MONDAIRE, , ,		Oppose		President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought	7 7	698935.53	Disburs 2024	sement For:  Primary
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				09 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				A
STE 400			'	Amount
City	State	Zip Code		78750.00
DENVER	со	80231		Transaction ID : SE24.201 Date of Disbursement or Obligation
Purpose of Expenditure  CANVASSING/FIELD OPERATIONS		Category/ Type		09 / 16 / 2024
Name of Federal Candidate:		X Support	Office	Sought: X House District: 02
THERIAULT, AUSTIN, , ,		Oppose	F	President Senate State: ME
Calendar Year-To-Date Per Election for Office Sought		341906.83	Disburs 2024	sement For:  Primary  General  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			• [	227212.50
(b) SUBTOTAL of Unitemized Independent Expenditure	res			
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	M = 7	16 2024

				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item D	eate of Public Distribution/Dissemination
BLITZ CANVASSING LLC				09 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				
STE 400			A	mount
City	State	Zip Code		78750.00
DENVER	CO	80231		ransaction ID : SE24.202 Pate of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type		09 16 2024
Name of Federal Candidate:		Support	Office S	lought: House District: 02
GOLDEN, JARED, , ,		Oppose	Pi	resident Senate State: ME
Calendar Year-To-Date		341906.83	Disburse	ement For: Primary X General
Per Election for Office Sought	7 7	041000.00	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item D	ate of Public Distribution/Dissemination
BLITZ CANVASSING LLC				09 / DDD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				
STE 400			A	mount
City	State	Zip Code		110937.50
DENVER	СО	80231		Transaction ID : SE24.203 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type		09 16 2024
Name of Federal Candidate:		X Support	Office S	lought: House District: 45
STEEL, MICHELLE, , ,		Oppose	Pi	resident Senate State: CA
Calendar Year-To-Date		472670.67		ement For: Primary X General
Per Election for Office Sought	7 7	112010.01	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			· • L	189687.50
(b) SUBTOTAL of Unitemized Independent Expenditure	es		• •	
(c) TOTAL Independent Expenditures			. [	
(0, 10.112				
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its a	te or authorized			
GOBER, CHRIS, , ,		_	M = M	/ D D / Y Y Y Y
Signature		_ Date	9 09	16 2024

PAGE 61 OF 220 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ America PAC C00879510 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee BLITZ CANVASSING LLC 15 2024 Mailing Address 10065 E HARVARD AVE Amount **STE 400** City State Zip Code 110937.50 **DENVER** CO 80231 Transaction ID: SE24.204 Date of Disbursement or Obligation Purpose of Expenditure Category/ CANVASSING/FIELD OPERATIONS 09 2024 Type Name of Federal Candidate: 45 Support Office Sought: X House District: TRAN, DEREK, , , CA Oppose President State: Senate Primary X General Disbursement For: Calendar Year-To-Date 472670.67 2024 Per Election for Office Sought Other (specify) ▶ Date of Public Distribution/Dissemination Full Name of Payee Memo Item BLITZ CANVASSING LLC 2024 15 Mailing Address 10065 E HARVARD AVE Amount STE 400 132412.50 City State Zip Code **DENVER** Transaction ID: SE24.205 CO 80231 Date of Disbursement or Obligation Purpose of Expenditure Category/ 2024 CANVASSING/FIELD OPERATIONS Type Name of Federal Candidate: 41 X Support X House Office Sought: District: CALVERT, KEN, , , CA Oppose President Senate State: X General Disbursement For: Primary Calendar Year-To-Date 557052.21 2024 Per Election for Office Sought Other (specify) ▶ 243350.00 (a) SUBTOTAL of Itemized Independent Expenditures ..... (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. GOBER, CHRIS, , , 2024 16 09 Date Signature

TEMIZED INDEPENDENT EXPENDITORES				PAGE 62 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on Mam / Dad / Yayayay
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				09 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				Amount
STE 400				
City State		Zip Code		132412.50
	co	80231		<b>Transaction ID : SE24.206</b> Date of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		09 16 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 41
ROLLINS, WILL, , ,		Oppose		President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought		557052.21	Disbur 2024	sement For: ☐ Primary ☒ General ☐ Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				09 / 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				
STE 400				Amount
City State		Zip Code		86268.75
	со	80231		Transaction ID : SE24.207 Date of Disbursement or Obligation
Purpose of Expenditure  CANVASSING/FIELD OPERATIONS		Category/ Type		09 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
O/MV/AGGING/FIEED OF ENVIRONG		Турс		
Name of Federal Candidate:		X Support	Office	Sought: House District: 22
VALADAO, DAVID, , ,		Oppose		President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought		357773.40	Disbur 2024	sement For: Primary K General
rei Liettion foi Office Sought			2021	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				218681.25
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expe with, or at the request or suggestion of, any candidate or an party committee) any political party committee or its agent.				
GOBER, CHRIS, , ,		5.	M	M / 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	9 09	16 2024

Signature

### SCHEDULE E (FEC Form 3X)

_	31123322 2 (1 20 1 31111 3X)				
TE	EMIZED INDEPENDENT EXPENDITURES	3			PAGE 63 OF 220
N/	AME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
	America PAC				FEC IDENTIFICATION NUMBER ▼
,	unerica i 710				C C00879510
Cł	heck if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	n M = M / D = D / Y = Y = Y
	Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
	BLITZ CANVASSING LLC				09 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 10065 E HARVARD AVE				
	STE 400			4	Amount
	City	State	Zip Code		86268.75
	DENVER	СО	80231		Transaction ID : SE24.208 Date of Disbursement or Obligation
	Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		09 / 16 / Y Y Y Y Y Y
	Name of Federal Candidate:		Support	Office	Sought: X House District: 22
	SALAS, RUDY, , ,		Oppose		President Senate State: CA
	Calendar Year-To-Date Per Election for Office Sought		357773.40	Disburs 2024	sement For:  Primary
	Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
	BLITZ CANVASSING LLC		Wemo	itom	M M / D D / Y Y Y Y
	Mailing Address 10065 E HARVARD AVE				09 16 2024
	STE 400				Amount
	City	State	Zip Code		456899.15
	DENVER	со	80231		Transaction ID : SE24.224
	Purpose of Expenditure		Category/		Date of Disbursement or Obligation
	CANVASSING/FIELD OPERATIONS		Type		09 17 2024
	Name of Federal Candidate:		X Support	Office	Sought: House District: 00
	TRUMP, DONALD, , ,		Oppose	X F	President Senate State:
	Calendar Year-To-Date Per Election for Office Sought	6	68481824.31	Disburs 2024	sement For: ☐ Primary ☐ General ☐ Other (specify) ▶
				'	
	(a) SUBTOTAL of Itemized Independent Expenditure	;s		. •	543167.90
	(b) SUBTOTAL of Unitemized Independent Expenditu	ures			
	(c) TOTAL Independent Expenditures			•	
	Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candic party committee) any political party committee or its	date or authorized			
	GOBER, CHRIS, , ,		Date	M   M   M   M   M   M   M   M   M   M	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

TEMIZED INDEPENDENT EXPENDITURES				PAGE 64 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				C coord
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination
BLITZ CANVASSING LLC				M M / D D / Y Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1
Mailing Address 10065 E HARVARD AVE				mount
STE 400				nount
City	State	Zip Code		456899.15
DENVER	CO	80231		ransaction ID : SE24.225 ate of Disbursement or Obligation
Purpose of Expenditure		Category/		M = M / D = D / Y = Y = Y
CANVASSING/FIELD OPERATIONS		Type		09 17 2024
Name of Federal Candidate:		Support	Office So	ought: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Pre	esident Senate State:
Calendar Year-To-Date	6	8481824.31	Disburse	ment For: Primary X General
Per Election for Office Sought	1 1	0.0.02.00	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination
BLITZ CANVASSING LLC				09 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				
STE 400			Ar	mount
City	State	Zip Code		418386.80
DENVER	со	80231		ransaction ID : SE24.226 ate of Disbursement or Obligation
Purpose of Expenditure	1	Category/		M = M / D = D / Y = Y = Y
CANVASSING/FIELD OPERATIONS		Type		09 17 2024
Name of Federal Candidate:		X Support	Office So	ought: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pre	esident Senate State:
Calendar Year-To-Date	6	8481824.31	1	ment For: Primary X General
Per Election for Office Sought	1-1-1	0401024.31	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				875285.95
(b) SUBTOTAL of Unitemized Independent Expenditur	es		· • _	
(c) TOTAL Independent Expenditures				
(c) TOTAL Independent Expenditures	•••••		•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		_ Date	e 09	17 2024
Signature		_		

TEMIZED INDEPENDENT EXPENDITURES				PAGE 65 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item D	Pate of Public Distribution/Dissemination
BLITZ CANVASSING LLC				09 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE			A	mount
STE 400	State	Zin Codo		418386.80
DENVER	CO	Zip Code 80231		ransaction ID : SE24.227
Purpose of Expenditure		Cotogony		Pate of Disbursement or Obligation
CANVASSING/FIELD OPERATIONS		Category/ Type		09 17 2024
Name of Federal Candidate:		Support	Office S	ought: House District: 00
HARRIS, KAMALA, , ,		Oppose	X PI	resident Senate State:
Calendar Year-To-Date		8481824.31		ement For: Primary X General
Per Election for Office Sought		0401024.31	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item D	Pate of Public Distribution/Dissemination
BLITZ CANVASSING LLC				09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				
STE 400			A	mount
City	State	Zip Code		983751.25
DENVER	со	80231		Transaction ID : SE24.281 Date of Disbursement or Obligation
Purpose of Expenditure  CANVASSING/FIELD OPERATIONS		Category/ Type		09 / DDD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Fadaval Condidates				00
Name of Federal Candidate:		Support	Office S	lought: House District: 00
TRUMP, DONALD, , ,		Oppose	X PI	resident Senate State:
Calendar Year-To-Date		8481824.31		ement For: Primary X General
Per Election for Office Sought	7	0401024.31	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				1402138.05
				, , , , , , , , , , , , , , , , , , , ,
(b) SUBTOTAL of Unitemized Independent Expenditure	res		. •	
() 70741				
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		<b>.</b>	M = M	17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	e 09	17 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 66 OF 220
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼
7.11.10.100.17.10				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	n M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				09 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				
STE 400				Amount
City	State	Zip Code		983751.25
DENVER	СО	80231		Transaction ID : SE24.282 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type		09 20 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose	X F	President Senate State:
Calendar Year-To-Date		2040402424		sement For: Primary X General
Per Election for Office Sought	1 1	88481824.31	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				09 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				
STE 400			4	Amount
City	State	Zip Code		469896.65
DENVER	СО	80231		Transaction ID : SE24.283 Date of Disbursement or Obligation
Purpose of Expenditure		Category/	_	M M / D D / Y Y Y
CANVASSING/FIELD OPERATIONS		Type		09 20 2024
Name of Federal Candidate:		X Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X F	President Senate State:
Calendar Year-To-Date	6	8481824.31		sement For: Primary X General
Per Election for Office Sought	7	0401024.31	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. ▶	1453647.90
			ī	
(b) SUBTOTAL of Unitemized Independent Expenditure	es		- ▶	
(c) TOTAL Independent Expenditures			. [	
(b) TO TAE maspondont Experiations				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
GOBER, CHRIS, , ,			M = 7	20 2024
Signature		_ Date	e 09	20 2024

PAGE 67 OF 220 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ America PAC C00879510 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee BLITZ CANVASSING LLC 20 2024 Mailing Address 10065 E HARVARD AVE Amount **STE 400** City State Zip Code 469896.65 **DENVER** CO 80231 Transaction ID: SE24.284 Date of Disbursement or Obligation Purpose of Expenditure Category/ CANVASSING/FIELD OPERATIONS 09 20 2024 Type Name of Federal Candidate: 00 Office Sought: Support House District: HARRIS, KAMALA, , , Oppose President Senate State: Primary Disbursement For: X General Calendar Year-To-Date 68481824.31 2024 Per Election for Office Sought Other (specify) ▶ Date of Public Distribution/Dissemination Full Name of Payee Memo Item BLITZ CANVASSING LLC 2024 23 Mailing Address 10065 E HARVARD AVE Amount STE 400 39150.00 City State Zip Code Transaction ID: SE24.317 **DENVER** CO 80231 Date of Disbursement or Obligation Purpose of Expenditure Category/ 2024 CANVASSING/FIELD OPERATIONS Type Name of Federal Candidate: 03 X Support X House Office Sought: District: KENT, JOE, , , WA Oppose President Senate State: X General Disbursement For: Primary Calendar Year-To-Date 277161.26 2024 Per Election for Office Sought Other (specify) ▶ 509046.65 (a) SUBTOTAL of Itemized Independent Expenditures ..... (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. GOBER, CHRIS, , , 20 2024 09 Date Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 68 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
7				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item Da	ate of Public Distribution/Dissemination
BLITZ CANVASSING LLC				09 / 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE			Ar	nount
STE 400			— г	2015200
City	State	Zip Code		39150.00
DENVER	СО	80231		ransaction ID : SE24.318 ate of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		09 / 24 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office So	ought: X House District: 03
GLUESENKAMP PEREZ, MARIE, , ,		Oppose	l	esident Senate State: WA
Calendar Year-To-Date		23		ment For: Primary X General
Per Election for Office Sought	7	277161.26	2024	Other (specify)
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination
BLITZ CANVASSING LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				09 23 2024
STE 400			Ar	nount
City	State	Zip Code	— Г	89077.50
DENVER	со	80231		ransaction ID : SE24.319 ate of Disbursement or Obligation
Purpose of Expenditure	•	Category/		09 24 2024
CANVASSING/FIELD OPERATIONS		Type		09 24 2024
Name of Federal Candidate:		X Support	Office So	ought: X House District: 17
LAWLER, MIKE, , ,		Oppose	Pre	esident Senate State: NY
Calendar Year-To-Date		698935.53		ment For: Primary 🔀 General
Per Election for Office Sought	7 7	090933.33	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				128227.50
				, , , , , , , , , , , , , , , , , , , ,
(b) SUBTOTAL of Unitemized Independent Expenditure	es		· • _	
(c) TOTAL Independent Expenditures				
,,				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		_	M = M	/ D D / Y Y Y Y Y
Signature		_ Date	9 09	25 2024

Signature

## SCHEDULE E (FEC Form 3X)

SOMEDOLL L (LEG FORM OX)				
TEMIZED INDEPENDENT EXPENDITURES				PAGE 69 OF 220
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
, ,				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee BLITZ CANVASSING LLC		☐ Memo	Item Dat	e of Public Distribution/Dissemination
Mailing Address 10065 E HARVARD AVE				09 23 2024
STE 400			Am	ount
City	State	Zip Code		89077.50
DENVER	со	80231		e of Disbursement or Obligation
Purpose of Expenditure  CANVASSING/FIELD OPERATIONS		Category/ Type		09 / 24 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sou	ught: House District:17
JONES, MONDAIRE, , ,		Oppose		sident Senate State: NY
Calendar Year-To-Date Per Election for Office Sought	<b>7</b>	698935.53	Disbursem	nent For: ☐ Primary X General  Other (specify) ▶
Full Name of Payee		☐ Memo	Item Dat	e of Public Distribution/Dissemination
BLITZ CANVASSING LLC				09 / 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE			Λ	ount
STE 400			Am	ount
City	State	Zip Code		47250.00
DENVER	со	80231		e of Disbursement or Obligation
Purpose of Expenditure  CANVASSING/FIELD OPERATIONS		Category/ Type		09 / 24 / 2024
Name of Federal Candidate:		X Support	Office Sou	ught: X House District: 02
THERIAULT, AUSTIN, , ,		Oppose	Pres	sident Senate State: ME
Calendar Year-To-Date Per Election for Office Sought		341906.83	Disbursem 2024	nent For:
(a) SUBTOTAL of Itemized Independent Expenditures			•	136327.50
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	M = M	/ DDD / YDY YDY Y 25 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 70 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed o	on M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				Amount
STE 400		1		
City	State	Zip Code		47250.00
DENVER	СО	80231		Transaction ID : SE24.322 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type		09 24 2024
Name of Federal Candidate:		Support	Office	Sought: X House District: 02
GOLDEN, JARED, , ,		Oppose		President Senate State: ME
Calendar Year-To-Date		244006.82	1	sement For: Primary X General
Per Election for Office Sought	7 7	341906.83	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				09 25 2524
STE 400				Amount
City	State	Zip Code		48037.50
DENVER	со	80231		Transaction ID : SE24.323
Purpose of Expenditure		Category/		Date of Disbursement or Obligation
CANVASSING/FIELD OPERATIONS		Type	Ш	09 24 2024
Name of Federal Candidate:		X Support	Office	Sought:
MERRIN, DERRICK, , ,		Oppose		President Senate State: OH
Calendar Year-To-Date		358378.63		sement For: Primary K General
Per Election for Office Sought	7 7		2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. •	95287.50
(b) SUBTOTAL of Unitemized Independent Expenditure	'es		. ▶	
(c) TOTAL Independent Expenditures			.	
(c) TOTAL independent Expenditures				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		5	M	M / 25 / 2024
Signature		_ Date	e 09	20 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 71 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				0
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Da	te of Public Distribution/Dissemination
BLITZ CANVASSING LLC				09 23 7 2024
Mailing Address 10065 E HARVARD AVE			۸۳	nount
STE 400			All	louit
City	State	Zip Code		48037.50
DENVER	CO	80231		ansaction ID : SE24.324 te of Disbursement or Obligation
Purpose of Expenditure		Category/		M = M / D = D / Y = Y = Y
CANVASSING/FIELD OPERATIONS		Type		09 24 2024
Name of Federal Candidate:		Support	Office So	ught: X House District: 09
KAPTUR, MARCY, , ,		Oppose	Pre	sident Senate State: OH
Calendar Year-To-Date		252270.62	Disbursen	nent For: Primary X General
Per Election for Office Sought	7 7	358378.63	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Da	te of Public Distribution/Dissemination
BLITZ CANVASSING LLC				09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				09 23 2024
STE 400			Am	nount
City	State	Zip Code		63618.75
DENVER	со	80231	<b>I</b>	ansaction ID : SE24.325 te of Disbursement or Obligation
Purpose of Expenditure	1	Category/		M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type	_	09 24 2024
Name of Federal Candidate:		X Support	Office So	ught: X House District: 13
COUGHLIN, KEVIN, , ,		Oppose	Pre	sident Senate State: OH
Calendar Year-To-Date		453125.70	Disbursen	nent For: Primary X General
Per Election for Office Sought	T T	455125.70	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. •	111656.25
(b) SUBTOTAL of Unitemized Independent Expenditur	es		• •	
(a) TOTAL land on an elect Form and different				
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		_	M = M	/ D D / Y Y Y Y
Signature		_ Date	9 09	25 2024

ITEMIZED INDEPENDENT EXPENDITURES			PAGE 72 OF 220 FOR LINE 24 OF FORM	
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER	_
America PAC			C C00879510	
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	Y
Full Name of Payee		Memo	Item Date of Public Distribution/Dissemination	
BLITZ CANVASSING LLC			09 / 23 / Y Y Y Y Y 2024	Υ
Mailing Address 10065 E HARVARD AVE			Amount	
STE 400	State	Zin Codo	63618.75	П
DENVER	CO	Zip Code 80231	Transaction ID : SE24.326	Ш
Purpose of Expenditure		Cotomony	Date of Disbursement or Obligation	V
CANVASSING/FIELD OPERATIONS		Category/ Type	09 24 2024	
Name of Federal Candidate:		Support	Office Sought: X House District: 13	
SYKES, EMILIA, , ,		Oppose	President Senate State: OF	1
Calendar Year-To-Date		453125.70	Disbursement For: Primary Gene	ral
Per Election for Office Sought	7 1 7	400120.70	Other (specify)	
Full Name of Payee		☐ Memo	Item Date of Public Distribution/Dissemination	1
BLITZ CANVASSING LLC			09 / 23 / 2024	Y
Mailing Address 10065 E HARVARD AVE			Amount	
STE 400			Amount	_
City	State	Zip Code	51761.25	Ш
DENVER	СО	80231	Transaction ID : SE24.327  Date of Disbursement or Obligation	
Purpose of Expenditure  CANVASSING/FIELD OPERATIONS		Category/ Type	M 09 / 24 / Y 2024	Y
Name of Federal Candidate:		Support	Office Sought:  House District: 22	
VALADAO, DAVID, , ,		Oppose	President Senate State: CA	
Calendar Year-To-Date		industry i	Disbursement For: Primary X Gene	ral
Per Election for Office Sought	7	357773.40	2024 Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			. ▶ 115380.00	
(b) SUBTOTAL of Unitemized Independent Expenditure	res		· •	
(c) TOTAL Independent Expenditures				$\neg$
(c) TOTAL independent Expenditures				_
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
CORED CHRIS			M = M / D = D / Y = Y = Y	
GOBER, CHRIS, , , Signature		_ Date	e 09 25 2024	

ITEMIZED INDEPENDENT EXPENDITURES PAGE 73 OF 220 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ America PAC C00879510 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee BLITZ CANVASSING LLC 23 2024 Mailing Address 10065 E HARVARD AVE Amount **STE 400** City State Zip Code 51761.25 **DENVER** CO 80231 Transaction ID: SE24.328 Date of Disbursement or Obligation Purpose of Expenditure Category/ CANVASSING/FIELD OPERATIONS 09 2024 Type 22 Name of Federal Candidate: Support Office Sought: X House District: SALAS, RUDY, , , CA Oppose President State: Senate Primary X General Disbursement For: Calendar Year-To-Date 357773.40 2024 Per Election for Office Sought Other (specify) ▶ Date of Public Distribution/Dissemination Full Name of Payee Memo Item BLITZ CANVASSING LLC 2024 23 Mailing Address 10065 E HARVARD AVE Amount STE 400 79447.50 City State Zip Code Transaction ID: SE24.329 **DENVER** CO 80231 Date of Disbursement or Obligation Purpose of Expenditure Category/ 2024 CANVASSING/FIELD OPERATIONS Type Name of Federal Candidate: 41 X Support X House Office Sought: District: CALVERT, KEN, , , CA Oppose President Senate State: X General Disbursement For: Primary Calendar Year-To-Date 557052.21 2024 Per Election for Office Sought Other (specify) ▶ 131208.75 (a) SUBTOTAL of Itemized Independent Expenditures ..... (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. GOBER, CHRIS, , , 2024 25 09 Date Signature

TEMIZED INDEPENDENT EXPENDITORES				PAGE 74 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report Ne	ew repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y Y
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				Amount
STE 400				Amount
City State		Zip Code		79447.50
DENVER CO	0	80231		Transaction ID : SE24.330 Date of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		09 / 24 / 2024
Name of Federal Candidate:		Support	Office	Sought: X House District: 41
ROLLINS, WILL, , ,		Support Oppose		President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought		557052.21	Disbui 2024	rsement For:  Primary
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				
STE 400				Amount
City State		Zip Code		66566.25
DENVER CO	0	80231		Transaction ID : SE24.331 Date of Disbursement or Obligation
Purpose of Expenditure  CANVASSING/FIELD OPERATIONS		Category/		09 24 2024
CANVASSING/FILLD OF LIVATIONS		Type		
Name of Federal Candidate:		X Support	Office	Sought: House District: 45
STEEL, MICHELLE, , ,		Oppose		President Senate State: CA
Calendar Year-To-Date		472670.67	Disbui 2024	rsement For: Primary K General
Per Election for Office Sought			2024	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			•	146013.75
(b) SUBTOTAL of Unitemized Independent Expenditures			•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent expending with, or at the request or suggestion of, any candidate or autiparty committee) any political party committee or its agent.				
GOBER, CHRIS, , ,			M	25 2024
Signature		_ Date	9 09	2024

TEMIZED INDEPENDENT EXPENDITORES				PAGE 75 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item Dat	te of Public Distribution/Dissemination
BLITZ CANVASSING LLC				09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE			Δm	ount
STE 400				Ount
City	State	Zip Code		66566.25
DENVER	СО	80231	I	ansaction ID : SE24.332 te of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		09 24 2024
Name of Federal Candidate:		Support	Office Sor	ught: X House District: 45
TRAN, DEREK, , ,		Oppose		sident Senate State: CA
Calendar Year-To-Date Per Election for Office Sought		472670.67	Disbursen 2024	nent For:
Full Name of Payee		☐ Memo	Item Dat	te of Public Distribution/Dissemination
BLITZ CANVASSING LLC				09 / 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE			A	
STE 400			Am	ount
,	State	Zip Code		425700.70
DENVER	CO	80231		ansaction ID : SE24.310 te of Disbursement or Obligation
Purpose of Expenditure		Category/		09 24 7 2024
CANVASSING/FIELD OPERATIONS		Type		03 24 2024
Name of Federal Candidate:		X Support	Office Sor	ught: House District:00
TRUMP, DONALD, , ,		Oppose	X Pres	sident Senate State:
Calendar Year-To-Date	6	8481824.31	Disbursen	nent For: Primary X General
Per Election for Office Sought	- 1	0401024.31	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			•	492266.95
(b) SUBTOTAL of Unitemized Independent Expenditures	S		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its ag	or authorized			
GOBER, CHRIS, , ,		_	M = M	/ D D / Y Y Y Y Y Y 2024
Signature		_ Date	9 09	25 2024

TIENIZED INDEFENDENT EXPENDITORES				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M / D D / Y Y Y Y
Full Name of Payee BLITZ CANVASSING LLC		☐ Memo	_	of Public Distribution/Dissemination
Mailing Address 10065 E HARVARD AVE			L	09 23 2024
STE 400			Amou	int
City	State	Zip Code		425700.70
DENVER DENVER	СО	80231	l l	saction ID : SE24.311 of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		09 / 24 / 2024
Name of Federal Candidate:		Support	Office Sough	ht: House District: 00
HARRIS, KAMALA, , ,		Noppose Noppose	X Presid	
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disbursemer 2024	nt For: ☐ Primary ☐ General  Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
BLITZ CANVASSING LLC				09 23 7 2024
Mailing Address 10065 E HARVARD AVE			A	
STE 400			Amou	
City DENVER	State	Zip Code 80231		458186.25 saction ID : SE24.312
Purpose of Expenditure		Category/	Date	of Disbursement or Obligation
CANVASSING/FIELD OPERATIONS		Type		09 24 2024
Name of Federal Candidate:		X Support	Office Sougl	ht: House District: 00
TRUMP, DONALD, , ,		Oppose	X Presid	ent Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disbursemer	nt For:
(a) SUBTOTAL of Itemized Independent Expenditures			· [	883886.95
(b) SUBTOTAL of Unitemized Independent Expenditu	res		· [	
(c) TOTAL Independent Expenditures			<b>•</b>	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		
GOBER, CHRIS, , ,		Data	M M /	25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	; 09	2027

TEMIZED INDEPENDENT EXPENDITORES				PAGE 77 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee		Memo	Item D	ate of Public Distribution/Dissemination
BLITZ CANVASSING LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE			A	mount
STE 400	04-4-	75.0.1.		450406 25
City DENVER	State CO	Zip Code 80231		458186.25 Fransaction ID : SE24.313
Purpose of Expenditure			□	ate of Disbursement or Obligation
CANVASSING/FIELD OPERATIONS		Category/ Type		09 / 24 / 2024
Name of Federal Candidate:		Support	Office S	ought: House District: 00
HARRIS, KAMALA, , ,		Oppose		resident Senate State:
Calendar Year-To-Date Per Election for Office Sought	, 6	8481824.31	Disburse 2024	ement For: ☐ Primary ☐ General ☐ Other (specify) ▶
Full Name of Payee		☐ Memo	Item D	ate of Public Distribution/Dissemination
ECHO CANYON CONSULTING LLC				08 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3700 DUKE STREET				
			A	mount
City	State	Zip Code		50000.00
ALEXANDRIA	VA	22034		Transaction ID : SE24.42 Pate of Disbursement or Obligation
Purpose of Expenditure  CANVASSING/FIELD OPERATIONS		Category/ Type		08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office S	
TRUMP, DONALD, , ,		Oppose	X Pr	resident Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disburse	ement For: Primary X General
Tot Election for Office Godgite	7			Other (specify) >
(a) SUBTOTAL of Itemized Independent Expenditures			• • _	508186.25
(b) SUBTOTAL of Unitemized Independent Expenditur	es		[	
			, ,	
(c) TOTAL Independent Expenditures			• •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		5	M = M	25 2024
Signature		_ Date	e 09	2024

				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
ECHO CANYON CONSULTING LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3700 DUKE STREET				08 19 2024
3700 BORE STREET				Amount
City	State	Zip Code		50000.00
ALEXANDRIA	VA	22034		Transaction ID : SE24.43
Purpose of Expenditure	`			Date of Disbursement or Obligation
CANVASSING/FIELD OPERATIONS		Category/ Type		08 / 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose	$\times$	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	$\epsilon$	8481824.31	Disbu 2024	rsement For: Primary X General
				Other (specify)
Full Name of Payee  ECHO CANYON CONSULTING LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
				08 / 19 / 2024
Mailing Address 3700 DUKE STREET				Amount
City	State	Zip Code		1750000.00
ALEXANDRIA	VA	22034		Transaction ID: SE24.62  Date of Disbursement or Obligation
Purpose of Expenditure		Category/		08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type		00 14 2024
Name of Federal Candidate:		X Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date		212122121	Disbu	rsement For: Primary X General
Per Election for Office Sought	0	8481824.31	2024	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures				1800000.00
(b) SUBTOTAL of Unitemized Independent Expenditur	es			
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
COBED CHDIS			M	M / D D / Y Y Y
GOBER, CHRIS, , , Signature		_ Date	e 08	3 21 2024

ITEMIZED INDEPENDENT EXPENDITURES				PAGE 79 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				M = M / D = D / Y = Y = Y
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed o	on """ , "
Full Name of Payee ECHO CANYON CONSULTING LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 2700 DUKE STREET				08 / 19 / 2024
3700 DUKE STREET				Amount
City	State	Zip Code		1750000.00
ALEXANDRIA	VA	22034		Transaction ID : SE24.63 Date of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		08 14 2024
Name of Fodorsk Openfidets		77		
Name of Federal Candidate:		Support		Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	68481824.31	Disbur 2024	sement For: Primary Seneral
E WAY CO	,			Other (specify)
Full Name of Payee  ECHO CANYON CONSULTING LLC		∐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address				09 16 2024
Mailing Address 3700 DUKE STREET				Amount
City	State	Zip Code		65661.62
ALEXANDRIA	VA	22034		Transaction ID : SE24.190 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type		09 13 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 19
RILEY, JOSH, , ,		Oppose		President Senate State: NY
Calendar Year-To-Date		341218.21	1	sement For: Primary X General
Per Election for Office Sought	7 7	341210.21	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. •	1815661.62
(b) SUBTOTAL of Unitemized Independent Expenditure	es		. •	
(c) TOTAL Independent Expenditures				
(,				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,			М	M / D D / Y Y Y Y Y
Signature		_ Date	e 08	19 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 80 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed or	1 M M / D D / Y Y Y Y Y
Full Name of Payee		☐ Memo	Item [	Date of Public Distribution/Dissemination
ECHO CANYON CONSULTING LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3700 DUKE STREET			,	Amount
City	State	Zip Code		16271.25
ALEXANDRIA	VA	22034		Transaction ID : SE24.191 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Туре		09 13 2024
Name of Federal Candidate:		X Support	Office S	Sought: X House District:08
EVANS, GABE, , ,		Oppose	P	resident Senate State: CO
Calendar Year-To-Date Per Election for Office Sought	7	214473.85	Disburs 2024	ement For:
Full Name of Payee		Memo	Itom [	Date of Public Distribution/Dissemination
ECHO CANYON CONSULTING LLC		□ Memo	item	
Moiling Addross				09 / 16 / Y Y Y Y Y Y Y
Mailing Address 3700 DUKE STREET			4	Amount
City	State	Zip Code		16271.25
ALEXANDRIA	VA	22034		Transaction ID : SE24.192 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y
CANVASSING/FIELD OPERATIONS		Туре		09 13 2024
Name of Federal Candidate:		Support	Office S	Sought:   House District:08
CARAVEO, YADIRA, , ,		Oppose	P	resident Senate State: CO
Calendar Year-To-Date		214472 05		ement For: Primary X General
Per Election for Office Sought	7-1-1-5-	214473.85	2024	Other (specify) ▶
·				
(a) SUBTOTAL of Itemized Independent Expenditures				32542.50
(b) SUBTOTAL of Unitemized Independent Expenditure	es		•	
(c) TOTAL Independent Expenditures			[	
(-)				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
GOBER, CHRIS, , ,		_	M = N	/ D D / Y Y Y Y Y Y 16 2024
Signature		_ Date	9 09	16 2024

TEMIZED INDEFENDENT EXPENDITORES				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on M = M / D = D / Y = Y = Y
Full Name of Payee ECHO CANYON CONSULTING LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 3700 DUKE STREET				09 16 2024 Amount
				Amount
City	State	Zip Code		10928.23
ALEXANDRIA	VA	22034		<b>Transaction ID : SE24.181</b> Date of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		M 09 / 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	Sought: X House District: 02
BACON, DON, , ,		Oppose		President Senate State: NE
Calendar Year-To-Date Per Election for Office Sought	<u></u>	135649.68	Disbur 2024	sement For:  Primary
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
ECHO CANYON CONSULTING LLC				09 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3700 DUKE STREET				Amount
City	State	Zip Code		10928.22
ALEXANDRIA	VA	22034		Transaction ID : SE24.182 Date of Disbursement or Obligation
Purpose of Expenditure  CANVASSING/FIELD OPERATIONS		Category/ Type		M 09 / 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	Sought: House District: 02
VARGAS, TONY, , ,		X Oppose		President Senate State: NE
Calendar Year-To-Date Per Election for Office Sought	7 7	135649.68	Disbur 2024	sement For:
(a) SUBTOTAL of Itemized Independent Expenditures				21856.45
(b) SUBTOTAL of Unitemized Independent Expenditu	res			
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		• • •
GOBER, CHRIS, , ,			M_	M / D D / Y Y Y
Signature		_ Date	e 09	16 2024

TEMPER MADE ENDERN EXILENDITORED				FOR LINE 24 OF FORM 2V
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
,				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee ECHO CANYON CONSULTING LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
				09 / 16 / 2024
Mailing Address 3700 DUKE STREET				Amount
City	State	Zip Code		18688.00
ALEXANDRIA	VA	22034		Transaction ID : SE24.183 Date of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		09 13 / 2024
Name of Federal Candidate:		Support	Office	e Sought: X House District: 02
HERRELL, YVETTE, , ,		Oppose		President Senate State: NM
Calendar Year-To-Date Per Election for Office Sought		241484.43	Disbu 2024	rrsement For: ☐ Primary ☐ General ☐ Other (specify) ▶
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
ECHO CANYON CONSULTING LLC				09 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3700 DUKE STREET				Amount
				Amount
City	State	Zip Code		18688.00
ALEXANDRIA	VA	22034		Transaction ID : SE24.184  Date of Disbursement or Obligation
Purpose of Expenditure  CANVASSING/FIELD OPERATIONS		Category/ Type		09 13 / 2024
Name of Federal Candidate:		Support	Office	e Sought: X House District: 02
VASQUEZ, GABRIEL , , ,		Oppose		President Senate State: NM
Calendar Year-To-Date		241484.43		ursement For: Primary X General
Per Election for Office Sought	T T	241464.43	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. •	37376.00
(h) CURTOTAL of Unitersized Independent Expanditure	***			
(b) SUBTOTAL of Unitemized Independent Expenditur	<del>c</del> s		. ▶	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		5 .		9 16 2024
Signature		_ Date	e 0	9 10 2024

Signature

TEMIZED INDEPENDENT EXPENDITURES	1			PAGE 83 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	rt filed on	M / D D / Y Y Y Y Y
Full Name of Payee ECHO CANYON CONSULTING LLC		☐ Memo		of Public Distribution/Dissemination
Mailing Address 3700 DUKE STREET			Amou	09 16 2024
City	State	Zip Code		54851.05
ALEXANDRIA	VA	22034		action ID : SE24.185 of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		09 / 13 / 2024
Name of Federal Candidate:		Support	Office Sough	t: X House District: 07
KEAN, TOM, , ,		Oppose	Preside	N.I
Calendar Year-To-Date Per Election for Office Sought		254496.60	Disbursemen	t For: Primary General
	1		1 _	ther (specify)
Full Name of Payee  ECHO CANYON CONSULTING LLC		∐ Memo	Item Date o	of Public Distribution/Dissemination
Mailing Address 3700 DUKE STREET			Amou	nt
City	State	Zip Code		54851.05
ALEXANDRIA	VA	22034	Trans	saction ID : SE24.186 of Disbursement or Obligation
Purpose of Expenditure  CANVASSING/FIELD OPERATIONS		Category/ Type	M	09 / 13 / 2024
Name of Federal Candidate:		Support	Office Sough	it: X House District:07
ALTMAN, SUE, , ,		Oppose	Preside	NII
Calendar Year-To-Date Per Election for Office Sought	7 7	254496.60	Disbursemen 2024 O	t For:
(a) SUBTOTAL of Itemized Independent Expenditures	3		· [	109702.10
(b) SUBTOTAL of Unitemized Independent Expenditu	ıres		<b>•</b>	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	M = M /	16 2024

TEMIZED INDEFENDENT EXPENDITORES			PAGE 84 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
America PAC			C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on M M / D D / Y Y Y Y
Full Name of Payee ECHO CANYON CONSULTING LLC		☐ Memo	M M / D D / Y Y Y Y
Mailing Address 3700 DUKE STREET			09 16 2024 Amount
City	State	Zip Code	21926.70
ALEXANDRIA	VA	22034	Transaction ID : SE24.187  Date of Disbursement or Obligation
Purpose of Expenditure  CANVASSING/FIELD OPERATIONS		Category/ Type	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought: House District: 03
NUNN, ZACH, , ,		Oppose	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		139588.07	Disbursement For: ☐ Primary ☐ General 2024 ☐ Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date of Public Distribution/Dissemination
ECHO CANYON CONSULTING LLC			09 16 / Y Y Y Y Y Y Y Y
Mailing Address 3700 DUKE STREET			Amount
City	State	Zip Code	21926.70
ALEXANDRIA	VA	22034	Transaction ID : SE24.188  Date of Disbursement or Obligation
Purpose of Expenditure  CANVASSING/FIELD OPERATIONS		Category/ Type	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought: House District: 03
BACCAM, LANON, , ,		Oppose	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	7	139588.07	Disbursement For: ☐ Primary ☐ General 2024 ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			• 43853.40
(b) SUBTOTAL of Unitemized Independent Expenditur	es		<b>•</b>
(c) TOTAL Independent Expenditures			-
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized	•	•
GOBER, CHRIS, , ,		5	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	e 09 16 2024

TEMIZED INDEFENDENT EXPENDITORES			PAGE 85 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
America PAC			C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on M M / D D / Y Y Y Y Y
Full Name of Payee ECHO CANYON CONSULTING LLC		☐ Memo	M M / D D / Y Y Y Y
Mailing Address 3700 DUKE STREET			09 16 2024  Amount
City	State	Zip Code	65661.63
ALEXANDRIA	VA	22034	Transaction ID : SE24.189 Date of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought: House District: 19
MOLINARO, MARCUS, , ,		Oppose	President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	341218.21	Disbursement For: ☐ Primary ☐ General 2024 ☐ Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC			08 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552			Amount
City	State	Zip Code	194608.00
ARLINGTON	VA	22210	Transaction ID : SE24.66  Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type	08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	
		Орросо	
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disbursement For:  Primary  General 2024  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. ▶ 260269.63
(I-) OUDTOTAL of Units arised by decreased at Farmardite			
(b) SUBTOTAL of Unitemized Independent Expenditure	es		•
(c) TOTAL Independent Expenditures			· •
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized	•	• • • • • • • • • • • • • • • • • • • •
GOBER, CHRIS, , ,		_	M M / D D / Y Y Y Y
Signature		_ Date	e 09 16 2024

				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				08 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552				08 19 2024
FO BOX 101532				Amount
City	State	Zip Code		194608.00
ARLINGTON	VA	22210		Transaction ID : SE24.67
Purpose of Expenditure		0-1	_	Date of Disbursement or Obligation
DIGITAL MEDIA		Category/ Type		08 / 19 / 2024
Name of Federal Candidate:		Support	Office	Sought: House District:00
HARRIS, KAMALA, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disbu 2024	rsement For: Primary General
Full Name of Payer	,,	□ Massa	lt	Other (specify) ►  Date of Public Distribution/Dissemination
Full Name of Payee FULL REACH MEDIA GROUP LLC		∐ Memo	item	M M / D D / Y Y Y Y
Marker Address				08 21 2024
Mailing Address PO BOX 101552				Amount
Oit.	Otata	Zin Code		69925.00
City ARLINGTON	State	Zip Code		Transaction ID : SE24.74
	VA	22210		Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type	$\Box$	08 / 21 / Y Y Y Y Y Y
Name of Federal Candidate:		Support		Sought: House District: 00
TRUMP, DONALD, , ,		Oppose		President Senate State:
Calendar Year-To-Date	6	8481824.31	Disbu 2024	rsement For: Primary X General
Per Election for Office Sought	7		2024	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures				264533.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es			
(a) TOTAL Independent Evpenditures				
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its a	te or authorized			
GOBER, CHRIS, , ,			M	M / D D / Y Y Y Y
Signature		_ Date	e 08	3 19 2024

TILIMIZED INDEFENDENT EXPENDITORES			PAGE 87 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
America PAC			C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on M M / D D / Y Y Y Y Y
Full Name of Payee FULL REACH MEDIA GROUP LLC		☐ Memo	M M / D D / Y Y Y Y
Mailing Address PO BOX 101552			08 21 2024 Amount
City	Ctoto	Zin Codo	69925.00
City ARLINGTON	State VA	Zip Code 22210	Transaction ID : SE24.75 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type	08 / D1 / Y Y Y Y Y 2024
Name of Federal Candidate:		Support	Office Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disbursement For: ☐ Primary ☐ General 2024 ☐ Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC			08 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552			Amount
City	State	Zip Code	259478.00
ARLINGTON	VA	22210	Transaction ID : SE24.80  Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type	08 / D D / Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disbursement For: ☐ Primary ☐ General 2024 ☐ Other (specify) ▶
() 01070711 (1) : 11 1 1 1 1 5			
(a) SUBTOTAL of Itemized Independent Expenditures			329403.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		<b>&gt;</b>
(c) TOTAL Independent Expenditures			•
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized	•	• • • • • • • • • • • • • • • • • • • •
GOBER, CHRIS, , ,		_	M M / D D / Y Y Y Y
Signature		_ Date	e 08 21 2024

PAGE 88 OF 220 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ America PAC C00879510 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee FULL REACH MEDIA GROUP LLC 21 2024 Mailing Address PO BOX 101552 Amount City State Zip Code 259478.00 **ARLINGTON** VA 22210 Transaction ID: SE24.81 Date of Disbursement or Obligation Purpose of Expenditure Category/ **DIGITAL MEDIA** 08 2024 Type Name of Federal Candidate: 00 Support Office Sought: House District: HARRIS, KAMALA, , , Oppose President Senate State: Primary Disbursement For: X General Calendar Year-To-Date 68481824.31 2024 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Memo Item FULL REACH MEDIA GROUP LLC 2024 08 Mailing Address PO BOX 101552 Amount 22125.00 City State Zip Code Transaction ID: SE24.98 **ARLINGTON** V۸ 22210 Date of Disbursement or Obligation Purpose of Expenditure Category/ 2024 23 DIGITAL MEDIA Type Name of Federal Candidate: X Support Office Sought: House District: TRUMP, DONALD, , , X President Oppose Senate State: X General Disbursement For: Primary Calendar Year-To-Date 68481824.31 2024 Per Election for Office Sought Other (specify) ▶ 281603.00 (a) SUBTOTAL of Itemized Independent Expenditures ..... (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. GOBER, CHRIS, , , 2024 21 80 Date Signature

Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 89 OF 220
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼
America i Ao				C C00879510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M / D D / Y Y Y Y
Full Name of Payee  FULL REACH MEDIA GROUP LLC		☐ Memo	Item Date	of Public Distribution/Dissemination
				08 22 7 2024
Mailing Address PO BOX 101552			Amou	int
City	State	Zip Code		22125.00
ARLINGTON	VA	22210		saction ID : SE24.99 of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
DIGITAL MEDIA		Type	_  L	08 23 2024
Name of Federal Candidate:		Support	Office Sough	ht: House District:00
HARRIS, KAMALA, , ,		Oppose	X Presid	ent Senate State:
Calendar Year-To-Date			Disburseme	nt For: Primary X General
Per Election for Office Sought	(	68481824.31	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552				09 04 2024
1 0 20% 101002			Amou	int
City	State	Zip Code		129698.50
ARLINGTON	VA	22210	Tran	saction ID : SE24.123 of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
DIGITAL MEDIA		Type	_	09 03 2024
Name of Federal Candidate:		Support	Office Sough	ht: House District:00
TRUMP, DONALD, , ,		Oppose	X Presid	ent Senate State:
Calendar Year-To-Date		68481824.31	Disburseme	nt For: Primary X General
Per Election for Office Sought	7	00461624.31	2024	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			• • I	151823.50
(b) SUBTOTAL of Unitemized Independent Expenditure	es		· •	
()				
(c) TOTAL Independent Expenditures			· L	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,			M = M /	D D / Y Y Y Y Y
GUBER, CHRIS, , ,		_ Date	9 08	23 2024

Signature

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TEMIZED INDEPENDENT EXPENDITURES				PAGE 90 OF 220
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M = M / D = D / Y = Y = Y
Full Name of Payee FULL REACH MEDIA GROUP LLC		☐ Memo	Item Dat	e of Public Distribution/Dissemination
Mailing Address PO BOX 101552				09 04 2024
			Am	ount
City	State	Zip Code		129698.50
ARLINGTON	VA	22210		nsaction ID : SE24.124 e of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		09 / 03 / 2024
Name of Federal Candidate:		Support	Office Sou	ught: House District:00
HARRIS, KAMALA, , ,		Oppose	X Pres	sident Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disbursem 2024	nent For: ☐ Primary X General  Other (specify) ▶
Full Name of Payee		☐ Memo	Item Dat	e of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				09
Mailing Address PO BOX 101552				
			Am	ount
City	State	Zip Code		98979.00
ARLINGTON	VA	22210		ansaction ID : SE24.125 e of Disbursement or Obligation
Purpose of Expenditure		Category/		09 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
DIGITAL MEDIA		Type		لــــا لـنا لـنـا
Name of Federal Candidate:		X Support	Office Sou	ught: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pres	sident Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disbursen 2024	nent For: ☐ Primary ☐ General  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			•	228677.50
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	M = M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

TEMIZED INDEPENDENT EXPENDITORES				PAGE 91 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on M M M / D D / Y Y Y Y
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				09
Mailing Address PO BOX 101552				Amount
City	State	Zip Code		98979.00
ARLINGTON	VA	22210		Transaction ID : SE24.126 Date of Disbursement or Obligation
Purpose of Expenditure		Category/	$\overline{}$	M M / D D / Y Y Y Y
DIGITAL MEDIA		Туре		09 03 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	, 6	8481824.31	Disbur 2024	sement For: ☐ Primary ☐ General ☐ Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				09 03 7 2024
Mailing Address PO BOX 101552				August .
				Amount
City	State	Zip Code		1625.00
ARLINGTON	VA	22210		Transaction ID : SE24.127 Date of Disbursement or Obligation
Purpose of Expenditure		Category/	a l	09 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
DIGITAL MEDIA		Туре		
Name of Federal Candidate:		X Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date	6	8481824.31	1	sement For: Primary X General
Per Election for Office Sought	1	0401024.01	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. •	100604.00
(I) OUDTOTAL of Unitersity of Indiana and art Franco distance				
(b) SUBTOTAL of Unitemized Independent Expenditur	es			7 7 1 7
(c) TOTAL Independent Expenditures			• •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		5 .	M = 00	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	e 09	03 2024

PAGE 92 OF 220 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ America PAC C00879510 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee FULL REACH MEDIA GROUP LLC 03 2024 Mailing Address PO BOX 101552 Amount City State Zip Code 1625.00 **ARLINGTON** VA 22210 Transaction ID: SE24.128 Date of Disbursement or Obligation Purpose of Expenditure Category/ **DIGITAL MEDIA** 09 03 2024 Type Name of Federal Candidate: 00 Support Office Sought: House District: HARRIS, KAMALA, , , Oppose President Senate State: Primary Disbursement For: X General Calendar Year-To-Date 68481824.31 2024 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Memo Item FULL REACH MEDIA GROUP LLC 2024 Mailing Address PO BOX 101552 Amount 35033.50 City State Zip Code **ARLINGTON** Transaction ID: SE24.129 V۸ 22210 Date of Disbursement or Obligation Purpose of Expenditure Category/ 2024 03 DIGITAL MEDIA Type Name of Federal Candidate: X Support Office Sought: House District: TRUMP, DONALD, , , X President Oppose Senate State: X General Disbursement For: Primary Calendar Year-To-Date 68481824.31 2024 Per Election for Office Sought Other (specify) ▶ 36658.50 (a) SUBTOTAL of Itemized Independent Expenditures ..... (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. GOBER, CHRIS, , , 03 2024 09 Date Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 93 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				O THE STATE OF THE
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item D	ate of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				09 04 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552			A	mount
City	State	Zip Code	— [	35033.50
ARLINGTON	VA	22210		ransaction ID : SE24.130
Purpose of Expenditure		Catamani		ate of Disbursement or Obligation
DIGITAL MEDIA		Category/ Type		09 03 7 2024
Name of Federal Candidate:		Support	Office S	ought: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Pr	esident Senate State:
Calendar Year-To-Date		20404004 24		ement For: Primary X General
Per Election for Office Sought	, ,	88481824.31	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item D	ate of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				09 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552				
			A	mount
City	State	Zip Code		128257.00
ARLINGTON	VA	22210	<b>I</b>	Transaction ID : SE24.174 ate of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/	пl	09 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
DIGITAL MEDIA		Type		
Name of Federal Candidate:		X Support	Office S	ought: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pr	esident Senate State:
Calendar Year-To-Date	6	88481824.31	Disburse	ement For: Primary X General
Per Election for Office Sought	7 7		2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			• •	163290.50
(h) SUPTOTAL of Uniterpized Independent Expanditure	***		. г	
(b) SUBTOTAL of Unitemized Independent Expenditure	es			
(c) TOTAL Independent Expenditures			[	
			, r	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
GOBER, CHRIS, , ,		_	M = M	/ D D / Y Y Y Y Y
Signature		_ Date	e 09	03 2024

Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 94 OF 220 FOR LINE 24 OF FORM 3
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER
America PAC				
7 minoriou i 7 no				C C00879510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	/
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552			Amou	
Ott	01-1-	7:- 0-4-		120257.00
City	State	Zip Code	L.	128257.00
ARLINGTON	VA	22210		saction ID : SE24.175 of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Soug	ht: House District: 00
HARRIS, KAMALA, , ,		∑ Oppose	X Presid	
			Disburseme	
Calendar Year-To-Date Per Election for Office Sought	, ,	68481824.31	2024	nt For:
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				M M / D D / Y Y Y Y
Mailing Address PO POV 101553				09 13 2024
PO BOX 101552			Amou	unt
City	State	Zip Code		34644.00
ARLINGTON	VA	22210	Tran	nsaction ID : SE24.178 of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
DIGITAL MEDIA		Type	_	
Name of Federal Candidate:		X Support	Office Soug	ht: House District: 00
TRUMP, DONALD, , ,		Oppose	X Presid	dent Senate State:
Calendar Year-To-Date			Disburseme	nt For: Primary X Genera
Per Election for Office Sought	7	68481824.31	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	, ,			162901.00
(1, 2021011201100112001110000111011011011011				7
(b) SUBTOTAL of Unitemized Independent Expenditure	es			
(c) TOTAL Independent Expenditures			· •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
			M = M /	D D / Y Y Y Y
GOBER, CHRIS, , ,		_ Date	e 09	12 2024

TEMIZED INDEPENDENT EXPENDITORES				PAGE 95 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				09 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552				Amount
City	State	Zip Code		34644.00
ARLINGTON	VA	22210		Transaction ID : SE24.179 Date of Disbursement or Obligation
Purpose of Expenditure		Category/	$\overline{}$	M M / D D / Y Y Y Y
DIGITAL MEDIA		Type		09 13 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	, 6	8481824.31	Disbur 2024	sement For:
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				09 / 13 / 2024
Mailing Address PO BOX 101552				Amount
				Amount
City	State	Zip Code		195759.00
ARLINGTON	VA	22210		Transaction ID : SE24.180 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		09 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
DIGITAL MEDIA		Туре		
Name of Federal Candidate:		X Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date	6	8481824.31	1	sement For: Primary X General
Per Election for Office Sought	1 1	0101021101	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. •	230403.00
(b) SUBTOTAL of Unitemized Independent Expenditur	200		.	
(b) 306101AL of Officernized independent Experiation	es		•	
(c) TOTAL Independent Expenditures			• •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		Dete	e 09	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	6 09	10 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 96 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				
America PAC				FEC IDENTIFICATION NUMBER ▼
America i Ao				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				09 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552				Amount
City	State	Zip Code		21677.50
ARLINGTON	VA	22210		Transaction ID : SE24.218
Purpose of Expenditure		Cotogony	_	Date of Disbursement or Obligation
DIGITAL MEDIA		Category/ Type		09 16 2024
Name of Federal Candidate:		Support	Office	Sought: X House District: 08
EVANS, GABE, , ,		Oppose		President Senate State: CO
Calendar Year-To-Date		214473.85	Disbu 2024	rsement For: Primary X General
Per Election for Office Sought	7 7	2	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				09 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552				
10 30% 10 1002				Amount
City	State	Zip Code		21677.50
ARLINGTON	VA	22210		Transaction ID : SE24.219 Date of Disbursement or Obligation
Purpose of Expenditure	1	Category/		M M / D D / Y Y Y
DIGITAL MEDIA		Type		09 16 2024
Name of Federal Candidate:		Support	Office	e Sought: X House District: 08
CARAVEO, YADIRA, , ,		Oppose		President Senate State: CO
Calendar Year-To-Date		24 4 4 7 2 9 5	I	rsement For: Primary X General
Per Election for Office Sought	7-1-1-7-	214473.85	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				43355.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(a) TOTAL Independent Expenditures				
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		5	M	9 16 2024
Signature		_ Date	9 0	9 16 2024

TIENNIZED INDEFENDENT EXPENDITORES			FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
America PAC			C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	port filed on M M / D D / Y Y Y Y
Full Name of Payee FULL REACH MEDIA GROUP LLC		☐ Memo	M M / D D / Y Y Y Y
Mailing Address PO BOX 101552			09 16 2024 Amount
City	State	Zip Code	24810.50
ARLINGTON	VA	22210	Transaction ID : SE24.220 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought:  House District: 02
HERRELL, YVETTE, , ,		Oppose	President Senate State: NM
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	241484.43	Disbursement For:  Primary  ☐ General 2024  Other (specify) ►
Full Name of Payee		☐ Memo	Ditem Date of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC			09 / 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552			Amount
City	State	Zip Code	24810.50
ARLINGTON	VA	22210	Transaction ID : SE24.221  Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type	M 09 / 16 / Y Y Y 2024
Name of Federal Candidate:		Support	Office Sought: House District: 02
VASQUEZ, GABRIEL , , ,		Oppose	President Senate State: NM
Calendar Year-To-Date Per Election for Office Sought	7 7	241484.43	Disbursement For: ☐ Primary ☐ General 2024 ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			• 49621.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•	• • • • • • • • • • • • • • • • • • • •
GOBER, CHRIS, , ,		5	te 09 16 2024
Signature		_ Date	te 09 16 2024

TEMIZED INDEPENDENT EXPENDITURES			PAGE 98 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
America PAC			C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on
Full Name of Payee		Memo	Item Date of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC			09 / 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552			09 16 2024 Amount
City	State	Zip Code	14523.50
ARLINGTON	VA	22210	Transaction ID : SE24.222
Purpose of Expenditure			Date of Disbursement or Obligation
DIGITAL MEDIA		Category/ Type	09 / 16 / 2024
Name of Federal Candidate:		X Support	Office Sought: House District: 02
BACON, DON, , ,		Oppose	President Senate State: NE
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	135649.68	Disbursement For: ☐ Primary ☐ General  2024 ☐ Other (specify) ▶
Full Name of Payee		Memo	
FULL REACH MEDIA GROUP LLC			09 / 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552			09 10 2024
1 0 BOX 101332			Amount
City	State	Zip Code	14523.50
ARLINGTON	VA	22210	Transaction ID : SE24.223  Date of Disbursement or Obligation
Purpose of Expenditure		Category/	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
DIGITAL MEDIA		Type	
Name of Federal Candidate:		Support	Office Sought:
VARGAS, TONY, , ,		Oppose	President Senate State: NE
Calendar Year-To-Date		135649.68	Disbursement For: Primary General
Per Election for Office Sought	7 7	1000 10.00	2024 ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			29047.00
(b) SUBTOTAL of Unitemized Independent Expenditure	'es		<b>•</b>
(c) TOTAL Independent Expenditures			<b>•</b>
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized		
GOBER, CHRIS, , ,		_	M = M / D = D / Y = Y = Y
Signature		_ Date	9 16 2024

PAGE 99 OF 220 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ America PAC C00879510 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee FULL REACH MEDIA GROUP LLC 17 2024 Mailing Address PO BOX 101552 Amount City State Zip Code 31325.00 **ARLINGTON** VA 22210 Transaction ID: SE24.256 Date of Disbursement or Obligation Purpose of Expenditure Category/ **DIGITAL MEDIA** 2024 Type Name of Federal Candidate: 19 X Support X House Office Sought: District: MOLINARO, MARCUS, , , NY Oppose President State: Senate Primary X General Disbursement For: Calendar Year-To-Date 341218.21 2024 Per Election for Office Sought Other (specify) ▶ Date of Public Distribution/Dissemination Full Name of Payee Memo Item FULL REACH MEDIA GROUP LLC 2024 Mailing Address PO BOX 101552 Amount 31325.00 City State Zip Code **ARLINGTON** Transaction ID: SE24.257 V۸ 22210 Date of Disbursement or Obligation Purpose of Expenditure Category/ 2024 DIGITAL MEDIA Type Name of Federal Candidate: 19 Support X House Office Sought: District: RILEY, JOSH, , , NY Oppose President Senate State: X General Disbursement For: Primary Calendar Year-To-Date 341218.21 2024 Per Election for Office Sought Other (specify) ▶ 62650.00 (a) SUBTOTAL of Itemized Independent Expenditures ..... (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. GOBER, CHRIS, , , 2024 18 09 Date Signature

				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
7 11101100 1 7 10				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	n M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				M M / D D / Y Y Y
Mailing Address PO POY 101552				09 17 2024
PO BOX 101552				Amount
City	State	Zip Code		33867.50
ARLINGTON	VA	22210		Transaction ID : SE24.258
Purpose of Expenditure				Date of Disbursement or Obligation
DIGITAL MEDIA		Category/ Type		09 / 18 / 2024
Name of Federal Candidate:		Support	Office	Sought: X House District:17
LAWLER, MIKE, , ,		Oppose	F	President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	698935.53	Disburs 2024	sement For:  Primary  General  Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				09 / 17 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552				09 17 2024
1 0 BOX 101332				Amount
City	State	Zip Code		33867.50
ARLINGTON	VA	22210		Transaction ID : SE24.259
Purpose of Expenditure		Catanany		Date of Disbursement or Obligation
DIGITAL MEDIA		Category/ Type		09 18 2024
Name of Federal Candidate:		Support	Office	Sought:     House District:17
JONES, MONDAIRE, , ,		Oppose	F	President Senate State: NY
Calendar Year-To-Date		000005 50	Disburs	sement For: Primary X General
Per Election for Office Sought	7	698935.53	2024	Other (specify) ▶
<u> </u>				
(a) SUBTOTAL of Itemized Independent Expenditures.				67735.00
				1
(b) SUBTOTAL of Unitemized Independent Expenditure	es			
				, , , , , , , , , , , , , , , , , , , ,
(c) TOTAL Independent Expenditures			. •	
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidat party committee) any political party committee or its a	te or authorized			
COBER CUBIC			M = 1	W / D D / Y Y Y Y
GOBER, CHRIS, , , Signature		_ Date	9 09	18 2024

				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				M M / D D / Y Y Y Y
Mailing Address PO BOX 101552				09 17 2024
PO BOX 101552				Amount
City	State	Zip Code		29424.00
ARLINGTON	VA	22210		Transaction ID : SE24.260
Purpose of Expenditure				Date of Disbursement or Obligation
DIGITAL MEDIA		Category/ Type		09 / 18 / 2024
Name of Federal Candidate:		X Support	Office	Sought: House District: 00
BEGICH, NICK, , ,		Oppose		President Senate State: AK
Calendar Year-To-Date Per Election for Office Sought		58848.00	Disbu 2024	rsement For: Primary ⊠ General  Other (specify) ▶
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				M M / D D / Y Y Y
Mailing Address DO DOY 101553				09 17 2024
PO BOX 101552				Amount
City	State	Zip Code		29424.00
ARLINGTON	VA	22210		Transaction ID : SE24.261
Purpose of Expenditure				Date of Disbursement or Obligation
DIGITAL MEDIA		Category/ Type		09 / 18 / 2024
Name of Federal Candidate:		Support	Office	Sought:   House District: 00
PELTOLA, MARY, , ,		Oppose		President Senate State: AK
Calendar Year-To-Date		50040.00	Disbu	rsement For: Primary X General
Per Election for Office Sought	7 7	58848.00	2024	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			. •	58848.00
			r	
(b) SUBTOTAL of Unitemized Independent Expenditure	es		. •	
(c) TOTAL Independent Expenditures			. •	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its a	te or authorized			
GOBER, CHRIS, , ,			M	M / D D / Y Y Y Y Y
Signature		_ Date	e 09	2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 102 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				C coorser
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item Dat	te of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				M 09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552			Am	ount
City	State	Zip Code	— Г	34644.00
ARLINGTON	VA	22210		ansaction ID : SE24.273 te of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
DIGITAL MEDIA		Type	_	09 20 2024
Name of Federal Candidate:		X Support	Office Sou	ught: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pres	sident Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disbursen 2024	nent For:  Primary
Full Name of Payee		Memo	Item Dat	te of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC		_		09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552				
			Am	ount
City	State	Zip Code		34644.00
ARLINGTON	VA	22210		ansaction ID : SE24.274 te of Disbursement or Obligation
Purpose of Expenditure		Category/		09
DIGITAL MEDIA		Type		09 20 2024
Name of Federal Candidate:		Support	Office Sou	ught: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Pres	sident Senate State:
Calendar Year-To-Date	6	8481824.31	Disbursen	nent For: Primary X General
Per Election for Office Sought	7-1-1-7	0401024.31	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			· • _	69288.00
(b) SUBTOTAL of Unitemized Independent Expenditur	es		· • _	
(c) TOTAL Independent Expenditures				
				7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		5 .	M = M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	9 09	2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 103 OF 220 FOR LINE 24 OF FORM 3X		
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼		
America PAC				C C00879510		
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y		
Full Name of Payee FULL REACH MEDIA GROUP LLC		☐ Memo	Item Da	ate of Public Distribution/Dissemination		
Mailing Address				M 09		
Mailing Address PO BOX 101552			Ar	mount		
City	State	Zip Code	— I [	24810.50		
ARLINGTON	VA	22210	I	Transaction ID : SE24.294 Date of Disbursement or Obligation		
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		M M / D D / Y Y Y Y Y 2024		
Name of Federal Candidate:		X Support	Office So	ought: X House District: 02		
HERRELL, YVETTE, , ,		Oppose		esident Senate State: NM		
Calendar Year-To-Date		241484.43	Disburse	ment For: Primary X General		
Per Election for Office Sought	7 7	211101110	2024	Other (specify) ▶		
Full Name of Payee FULL REACH MEDIA GROUP LLC		☐ Memo	Item Da	ate of Public Distribution/Dissemination		
Mailing Address PO BOX 101552			Ar	mount		
City	State	Zip Code	— Г	24810.50		
ARLINGTON VA 22210			I	Transaction ID : SE24.295  Date of Disbursement or Obligation		
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y		
DIGITAL MEDIA		Туре				
Name of Federal Candidate:		Support	Office So	ought: House District: 02		
VASQUEZ, GABRIEL , , ,		Oppose	Pre	esident Senate State: NM		
Calendar Year-To-Date Per Election for Office Sought		241484.43	Disburse 2024	ment For: Primary General		
	7			Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			ьГ	49621.00		
``			_			
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•			
(c) TOTAL Independent Expenditures			•			
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized					
GOBER, CHRIS, , ,		5	M = M	23 2024		
Signature		_ Date	9 09	20 2024		

TEMIZED INDEFENDENT EXPENDITORES			<u> </u>	OR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				NTIFICATION NUMBER ▼
America PAC				C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on/	D = D / Y = Y = Y
Full Name of Payee FULL REACH MEDIA GROUP LLC		☐ Memo	Date of Public I	Distribution/Dissemination
Mailing Address PO BOX 101552			Amount	24 2024
City	State	Zip Code		21677.50
ARLINGTON	VA	22210	Transaction ID  Date of Disburs	
Purpose of Expenditure DIGITAL MEDIA		Category/ Type	M 09 /	23 / 2024
Name of Federal Candidate:		Support	Office Sought:	House District:08
EVANS, GABE, , ,		Oppose	President	Senate State: CO
Calendar Year-To-Date Per Election for Office Sought	<b>7</b>     <b>7</b>	214473.85	Disbursement For: 2024 Other (spec	Primary
Full Name of Payee		☐ Memo	tem Date of Public I	Distribution/Dissemination
FULL REACH MEDIA GROUP LLC			09	24 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552			Amount	
City	State	Zip Code		21677.50
ARLINGTON	VA	22210	Transaction ID  Date of Disburs	: <b>SE24.297</b> ement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type	M 09 /	23 / 2024
Name of Federal Candidate:		Support	Office Sought:	House District:08
CARAVEO, YADIRA, , ,		Oppose	President	Senate State: CO
Calendar Year-To-Date Per Election for Office Sought	7 7	214473.85	Disbursement For: 2024 Other (spec	Primary ⊠ General
(a) SUBTOTAL of Itemized Independent Expenditures			<b>•</b>	43355.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		<b>•</b>	.,
(c) TOTAL Independent Expenditures			<b>•</b>	7
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized	•	•	· ·
GOBER, CHRIS, , ,			M = M / D = D	/
Signature		_ Date	09 23	2024

TIENIZED INDEFENDENT EXPENDITORES			PAGE 105 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
America PAC			C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on M M / D D / Y Y Y Y Y
Full Name of Payee FULL REACH MEDIA GROUP LLC		☐ Memo	M M / D D / Y Y Y
Mailing Address PO BOX 101552			09 24 2024 Amount
City	State	Zip Code	29424.00
ARLINGTON	VA	22210	Transaction ID : SE24.298 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought: House District: 00
BEGICH, NICK, , ,		Oppose	President Senate State: AK
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	189606.18	Disbursement For: ☐ Primary ☐ General 2024 ☐ Other (specify) ▶
Full Name of Payee		☐ Memo	o Item Date of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC			09 24 7 2024
Mailing Address PO BOX 101552			Amount
City	State	Zip Code	29424.00
ARLINGTON	VA	22210	Transaction ID : SE24.299  Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought:  House District: 00
PELTOLA, MARY, , ,		Support Oppose	President Senate State: AK
Calendar Year-To-Date Per Election for Office Sought	7 7	189606.18	Disbursement For: ☐ Primary ☐ General 2024 ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			> 58848.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		· •
(c) TOTAL Independent Expenditures			-
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidar party committee) any political party committee or its	ate or authorized	•	
GOBER, CHRIS, , ,		5	te 09 23 2024
Signature		_ Date	te 09 23 2024

Signature

TEMIZED INDEPENDENT EXPENDITURES					106 OF 220
NAME OF COMMITTEE (In Full)				<del>                                     </del>	IE 24 OF FORM 3X
America PAC					ATION NUMBER ▼
America i Ac				C C00879	510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M M / D D	/ Y Y Y Y
Full Name of Payee  FULL REACH MEDIA GROUP LLC		☐ Memo	Item Date	of Public Distribu	tion/Dissemination
				M 09 / 24	2024
Mailing Address PO BOX 101552			Amo	unt	
City	State	Zip Code			33867.50
ARLINGTON	VA	22210		saction ID : SE24 of Disbursement	
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		09 / 23	2024
Name of Federal Candidate:		Support	Office Soug	ght: X House	District:17
LAWLER, MIKE, , ,		Oppose	Presid		NIX.
Calendar Year-To-Date		to back and	Disburseme	ent For: Prin	nary X General
Per Election for Office Sought	7	698935.53	2024	Other (specify)	
Full Name of Payee		☐ Memo	Item Date	of Public Distribu	tion/Dissemination
FULL REACH MEDIA GROUP LLC				M 09 / 24	/ Y Y Y Y Y Y 2024
Mailing Address PO BOX 101552			Amo	unt	
City	State	Zip Code	-		33867.50
ARLINGTON	VA	22210	Trar	nsaction ID : SE24 of Disbursement	
Purpose of Expenditure		Category/		M M / D D D 23	/ Y Y Y Y Y Y 2024
DIGITAL MEDIA		Type		03 23	2024
Name of Federal Candidate:		Support	Office Soug	ght: X House	District:17
JONES, MONDAIRE, , ,		Oppose	Presid	dent Senate	e State: NY
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	698935.53	Disburseme	ent For: Prin	nary X General
				Cirior (opcony)	
(a) SUBTOTAL of Itemized Independent Expenditures					67735.00
(a) 303131AE of hornizod independent Experianteres				7	7
(b) SUBTOTAL of Unitemized Independent Expenditure	es				
			_		
(c) TOTAL Independent Expenditures			•	7	y
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized				
GORER CHRIS			M = M /	D D / Y	Y
GOBER, CHRIS, , ,		_ Date	9 09	23	2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 107 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item Da	te of Public Distribution/Dissemination
FULL REACH MEDIÁ GROUP LLC		_		09 / 24 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552			Am	ount
City	State	Zip Code	— I	14523.50
ARLINGTON	VA	22210		ansaction ID : SE24.302 te of Disbursement or Obligation
Purpose of Expenditure	I	Category/		M M / D D / Y Y Y Y
DIGITAL MEDIA		Type	_	09 23 2024
Name of Federal Candidate:		X Support	Office So	ught: X House District: 02
BACON, DON, , ,		Oppose	Pre	sident Senate State: NE
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	135649.68	Disbursen 2024	nent For:
Full Name of Payee		☐ Memo	Item Da	te of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				09 / D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552				
			Am	ount
City	State	Zip Code		14523.50
ARLINGTON	VA	22210		ansaction ID : SE24.303 te of Disbursement or Obligation
Purpose of Expenditure		Category/		09 / 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
DIGITAL MEDIA		Type		09 23 2024
Name of Federal Candidate:		Support	Office So	ught: House District:02
VARGAS, TONY, , ,		Oppose	Pre	sident Senate State: NE
Calendar Year-To-Date		135649.68	Disbursen	nent For: Primary X General
Per Election for Office Sought	7 7	100040.00	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			•	29047.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res		. •	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		<b>.</b>	M = M	23 2024
Signature		_ Date	9 09	23 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 108 OF 220
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼
America FAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552			Amo	unt
City	State	Zip Code	<del></del>	31325.00
ARLINGTON	VA	22210		saction ID : SE24.304 of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		09 23 2024
Name of Fodoral Condidate.				white Village District, 19
Name of Federal Candidate:		Support	Office Soug	gnt. Nouse District.
MOLINARO, MARCUS, , ,		Oppose	Presi	dent Senate State: NY
Calendar Year-To-Date Per Election for Office Sought	<u>, , , , , , , , , , , , , , , , , , , </u>	341218.21	Disburseme 2024	ent For:  Primary
Full Name of Payee		Memo	1_	of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC		_ Weine		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552				00 21 2021
1 0 BOX 101332			Amo	unt
City	State	Zip Code		31325.00
ARLINGTON	VA	22210		nsaction ID : SE24.305 of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y
DIGITAL MEDIA		Туре		09 23 2024
Name of Federal Candidate:		Support	Office Soug	ght: House District: 19
RILEY, JOSH, , ,		Oppose	Presi	dent Senate State: NY
Calendar Year-To-Date		341218.21	Disburseme	ent For: Primary Kanada General
Per Election for Office Sought	7 7	341216.21	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	;		· • [	62650.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		· •	7 1 7 1 7
(c) TOTAL Independent Expenditures			· [	
				, ,
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		5	M	23 2024
Signature		_ Date	9 09	2024

PAGE 109 OF 220 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ America PAC C00879510 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee FULL REACH MEDIA GROUP LLC 24 2024 Mailing Address PO BOX 101552 Amount City State Zip Code 81294.50 **ARLINGTON** VA 22210 Transaction ID: SE24.306 Date of Disbursement or Obligation Purpose of Expenditure Category/ **DIGITAL MEDIA** 2024 Type Name of Federal Candidate: 00 X Support Office Sought: House District: TRUMP, DONALD, , , Oppose President Senate State: Primary Disbursement For: X General Calendar Year-To-Date 68481824.31 2024 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Memo Item FULL REACH MEDIA GROUP LLC 2024 24 Mailing Address PO BOX 101552 Amount 81294.50 City State Zip Code **ARLINGTON** Transaction ID: SE24.307 V۸ 22210 Date of Disbursement or Obligation Purpose of Expenditure Category/ 2024 23 DIGITAL MEDIA Type Name of Federal Candidate: Support Office Sought: House District: HARRIS, KAMALA, , , X President Oppose Senate State: X General Disbursement For: Primary Calendar Year-To-Date 68481824.31 2024 Per Election for Office Sought Other (specify) ▶ 162589.00 (a) SUBTOTAL of Itemized Independent Expenditures ..... (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. GOBER, CHRIS, , , 2024 23 09 Date Signature

TEMIZED INDEPENDENT EXPENDITURES			PAGE 110 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
America PAC			C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on Man / Dad / Yayayay
Full Name of Payee FULL REACH MEDIA GROUP LLC		☐ Memo	Item Date of Public Distribution/Dissemination
			M 09 / D 24 / Y 2024
Mailing Address PO BOX 101552			Amount
City	State	Zip Code	128257.00
ARLINGTON	VA	22210	Transaction ID : SE24.308 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type	09 23 2024
Name of Federal Candidate:			Office Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	President Senate State:
Calendar Year-To-Date			Disbursement For: Primary X Genera
Per Election for Office Sought	6	8481824.31	2024
Full Name of Payee		☐ Memo	Item Date of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC			09 / 24 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552			09 24 2024
1 0 BOX 101332			Amount
City	State	Zip Code	128257.00
ARLINGTON	VA	22210	Transaction ID : SE24.309  Date of Disbursement or Obligation
Purpose of Expenditure		Category/	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
DIGITAL MEDIA		Type	09 23 2024
Name of Federal Candidate:		Support	Office Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose	President Senate State:
Calendar Year-To-Date	6	8481824.31	Disbursement For: Primary X Genera
Per Election for Office Sought	7	0401024.31	2024 ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. ▶ 256514.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res		· •
(c) TOTAL Independent Expenditures			
(c) TOTAL independent Expenditures			
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized		
GOBER, CHRIS, , ,			M M / DD / Y Y Y Y
Signature		_ Date	9 09 23 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 111 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	n M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				09 / 24 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552				Amount
City	State	Zip Code		195759.00
ARLINGTON	VA	22210		Transaction ID : SE24.316
Purpose of Expenditure		-		Date of Disbursement or Obligation
DIGITAL MEDIA		Category/ Type	$\Box  $	09 / 24 / 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X F	President Senate State:
Calendar Year-To-Date			Disburs	sement For: Primary X General
Per Election for Office Sought	6	88481824.31	2024	Other (specify) ▶
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
GOLDFINCH PARTNERS LLC				M M / D D / Y Y Y Y
Mailing Address PO BOX 408				09 17 2024
FO BOX 408				Amount
City	State	Zip Code		2619.74
BAYVILLE	NJ	08721	I .	Transaction ID : SE24.246 Date of Disbursement or Obligation
Purpose of Expenditure	1	Category/		M M / D D / Y Y Y Y
PRINTING		Type		09 18 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 19
MOLINARO, MARCUS, , ,		Oppose	F	President Senate State: NY
Calendar Year-To-Date		341218.21	Disburs	sement For: Primary X General
Per Election for Office Sought	7 7		2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			· 🕨 📗	198378.74
(b) SUBTOTAL of Unitemized Independent Expenditure	es		• •	
(c) TOTAL Independent Expenditures			. [	
(b) 10 1AL maopondoni Expondidado				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		_	M	M / D D / Y Y Y Y Y
Signature		_ Date	e 09	25 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 112 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed o	on M M / D D / Y Y Y Y Y
Full Name of Payee GOLDFINCH PARTNERS LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address PO BOX 408				Amount
City	State	Zip Code		2619.74
BAYVILLE	NJ	08721		Transaction ID : SE24.247 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		09 18 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 19
RILEY, JOSH, , ,		Oppose		President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought	7 7	341218.21	Disbur 2024	sement For:
Full Name of Payee GOLDFINCH PARTNERS LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address PO BOX 408				Amount
City	State	Zip Code		3245.87
BAYVILLE	NJ	08721		Transaction ID : SE24.248 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		M 09 / D 18 / Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:  EVANS, GABE, , ,		Support Oppose		Sought: House District: 08  President Senate State: CO
Calendar Year-To-Date				sement For: Primary X General
Per Election for Office Sought	7	214473.85	2024	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures				5865.61
(b) SUBTOTAL of Unitemized Independent Expenditure	res		• •	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		_ Date	e 09	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

SCHEDULE E (FEC FORM 3X)				
TEMIZED INDEPENDENT EXPENDITURES				PAGE 113 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on May / Dad / Yayayay
Full Name of Payee  GOLDFINCH PARTNERS LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address BO BOY 408				09 / 16 / Y Y Y Y Y
PO BOX 408				Amount
City	State	Zip Code		3245.87
BAYVILLE	NJ	08721		Transaction ID : SE24.249 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	Sought: House District: 08
CARAVEO, YADIRA, , ,		Oppose		President Senate State: CO
Calendar Year-To-Date Per Election for Office Sought	7 1 7	214473.85	Disbur 2024	rsement For:  Primary
Full Name of Payee GOLDFINCH PARTNERS LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address BO BOY 400				09 / 17 / 2024
PO BOX 408				Amount
City	State	Zip Code		3171.61
BAYVILLE	NJ	08721		Transaction ID : SE24.250 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		M 09 / D 18 / Y Y 2024
Name of Federal Candidate: BACON, DON, , ,		Support Oppose		Sought: House District: 02  President Senate State: NE
Calendar Year-To-Date				rsement For: Primary X General
Per Election for Office Sought	7	135649.68	2024	Other (specify)
				24742
(a) SUBTOTAL of Itemized Independent Expenditures				6417.48
(b) SUBTOTAL of Unitemized Independent Expenditur	es		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		_ Date	e 09	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

TEMIZED INDEPENDENT EXPENDITURES				PAGE 114 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on M = M / D = D / Y = Y = Y
Full Name of Payee GOLDFINCH PARTNERS LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address PO BOX 408				09 17 2024 Amount
0.11		7: 0 !		
City BAYVILLE	State NJ	Zip Code 08721		3171.60  Transaction ID : SE24.251  Date of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		09 18 2024
Name of Federal Candidate:		Support	Office	Sought: X House District: 02
VARGAS, TONY, , ,		Oppose		President Senate State: NE
Calendar Year-To-Date Per Election for Office Sought		135649.68	Disbur 2024	sement For: Primary X General
	7			Other (specify) ▶
Full Name of Payee  GOLDFINCH PARTNERS LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address PO BOX 408				Amount
City	State	Zip Code		3411.21
BAYVILLE	NJ	08721		Transaction ID : SE24.252 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		M 09 / D 18 / Y Y Y Y Y 2024
Name of Federal Candidate:		Support	Office	Sought: X House District: 02
HERRELL, YVETTE, , ,		Oppose	l —	President Senate State: NM
Calendar Year-To-Date Per Election for Office Sought	7	241484.43	Disbur 2024	sement For:
(a) SUBTOTAL of Itemized Independent Expenditures				6582.81
(1) OUDTOTAL (11 % )				
(b) SUBTOTAL of Unitemized Independent Expenditure	es		• •	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		_	M	M / D D / Y Y Y Y Y
Signature		_ Date	9 09	18 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 115 OF 220
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼
America i Ao				C C00879510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee GOLDFINCH PARTNERS LLC		☐ Memo	Item D	Date of Public Distribution/Dissemination
Mailing Address PO BOX 408			A	.mount 2024
City	State	Zip Code		3411.20
BAYVILLE	NJ	08721		ransaction ID : SE24.253 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office S	lought: X House District: 02
VASQUEZ, GABRIEL, , ,		Oppose		resident Senate State: NM
Calendar Year-To-Date Per Election for Office Sought	7	241484.43	Disburse 2024	ement For: ☐ Primary ☐ General  Other (specify) ▶
Full Name of Payee  GOLDFINCH PARTNERS LLC		☐ Memo	Item D	Pate of Public Distribution/Dissemination
Mailing Address				09 / 17 / 2024
PO BOX 408			A	mount
City BAYVILLE	State	Zip Code 08721		4310.86 Fransaction ID : SE24.254
	INJ	00721	□	ate of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		M 09 / 18 / Y 2024
Name of Federal Candidate:		Support	Office S	
LAWLER, MIKE, , ,		Oppose	l Pi	resident Senate State: NY
Calendar Year-To-Date Per Election for Office Sought	7 7	698935.53	Disburse 2024	ement For: ☐ Primary ☒ General  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. [	7722.06
			, F	
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		_ Date	e 09	18 2024

ITEMIZED INDEPENDENT EXPENDITURES				PAGE 116 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
America i Ae				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
GOLDFINCH PARTNERS LLC				09 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 408			Amo	unt
City	State	Zip Code		4310.86
BAYVILLE	NJ	08721		saction ID : SE24.255
Purpose of Expenditure		Category/	Date	of Disbursement or Obligation
PRINTING		Type		09 18 2024
Name of Federal Candidate:		Support	Office Soug	ght: X House District: 17
JONES, MONDAIRE, , ,		Oppose	Presi	dent Senate State: NY
Calendar Year-To-Date		'	Disburseme	ent For: Primary X General
Per Election for Office Sought	7	698935.53	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
GOLDFINCH PARTNERS LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 408				00 20 2021
			Amo	unt
City	State	Zip Code		21808.49
BAYVILLE	NJ	08721	Trai	nsaction ID : SE24.285 of Disbursement or Obligation
Purpose of Expenditure	1	Category/	Date	M M / D D / Y Y Y Y
PRINTING/POSTAGE		Type		09 23 2024
Name of Federal Candidate:		X Support	Office Soug	ht: House District:17
LAWLER, MIKE, , ,		Oppose	Presi	dent Senate State: NY
Calendar Year-To-Date		698935.53	Disburseme	ent For: Primary X General
Per Election for Office Sought	7 7	000000.00	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			· <b>•</b> [ ]	26119.35
(b) SUBTOTAL of Unitemized Independent Expenditure	es		· <b>-</b>	
(a) TOTAL lades and out Forest diverse				
(c) TOTAL Independent Expenditures			•	7 1 7 1 1 7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,			M = M /	DID / YIYIY
Signature		_ Date	9 09	18 2024

ITEMIZED INDEPENDENT EXPENDITURES				PAGE 117 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
7.111.61164 1 7.6				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	n M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
GOLDFINCH PARTNERS LLC				09 / D D / Y Y Y Y Y 2024
Mailing Address PO BOX 408				Amount
			,	Amount
City	State	Zip Code		21808.49
BAYVILLE	NJ	08721	I .	Transaction ID : SE24.286 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/		M M / D D / Y Y Y
PRINTING/POSTAGE		Type		09 23 2024
Name of Federal Candidate:		Support	Office	Sought:     House District:17
JONES, MONDAIRE, , ,		Oppose	F	President Senate State: NY
Calendar Year-To-Date			Disburs	sement For: Primary X General
Per Election for Office Sought	7 7	698935.53	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
GOLDFINCH PARTNERS LLC				09 / D D / Y Y Y Y Y Y 2024
Mailing Address PO BOX 408				09 23 2024
1 0 50% 400				Amount
City	State	Zip Code		18280.01
BAYVILLE	NJ	08721		Transaction ID : SE24.287
Purpose of Expenditure		Category/		Date of Disbursement or Obligation
PRINTING/POSTAGE		Type		09 23 2024
Name of Federal Candidate:		Support	Office	Sought: X House District: 02
HERRELL, YVETTE, , ,		Oppose		President Senate State: NM
Calendar Year-To-Date				sement For: Primary X General
Per Election for Office Sought	7	241484.43	2024	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			. [	40088.50
(a) SOBTOTAL OF NOTINESS INSOPORTION EXPONENTIAL				10000.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es			
			, I	
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
, , , ,, , , , , , , , , , , ,	<b>J</b> =			
GOBER, CHRIS, , ,			M = 1	M / D D / Y Y Y Y Y
O' A		_ Date	9 09	23 2024

TEMIZED INDEPENDENT EXPENDITURES				-	PAGE 11	8 OF 220 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				<del>                                     </del>		TION NUMBER ▼
America PAC				C	C0087951	
Check if 24-hour report 48-hour report	New repo	ort Amends repor	t filed on	M = M /	D D /	Y Y Y Y
Full Name of Payee GOLDFINCH PARTNERS LLC		☐ Memo I	tem Date	of Public	Distributio 23	n/Dissemination
Mailing Address PO BOX 408			Amo			
City	State	Zip Code	-			18280.01
BAYVILLE	NJ	08721			D: SE24.28 sement or	38
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		M M / 09	23	2024
Name of Federal Candidate:		Support	Office Sou	aht. \	House	District:02
VASQUEZ, GABRIEL , , ,		∑ Oppose	Presi		Senate	State: NM
Calendar Year-To-Date Per Election for Office Sought		241484.43	Disburseme 2024	ent For: Other (spe	Prima	ry X General
Full Name of Payee GOLDFINCH PARTNERS LLC		☐ Memo I	tem Date	M = M /	D D	n/Dissemination
Mailing Address PO BOX 408			Amo	09 unt	23	2024
City	State	Zip Code	<u> </u>			13414.66
BAYVILLE	NJ	08721			D: SE24.2 sement or	89
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		M M /	23	2024
Name of Federal Candidate:		Support	Office Sou	aht: 🔽	House	District:02
BACON, DON, , ,		Support Oppose	Presi		Senate	State: NE
Calendar Year-To-Date Per Election for Office Sought	7 7	135649.68	Disburseme 2024	ent For: Other (spe	Prima	ry X General
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditure			• [. • [.	1 7		31694.67
(c) TOTAL Independent Expenditures			· [	1 7	1 1 1	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized	•		•		
			M = M	D D	/ Y Y	YYY
GOBER, CHRIS, , ,		_ Date	09	23		)24

	PAGE 119 OF 220
	FOR LINE 24 OF FORM 3X
	FEC IDENTIFICATION NUMBER ▼
	C C00879510
t	on M M / D D / Y Y Y Y
	Date of Public Distribution/Dissemination
	09 23 Y 2024
	Amount
_	13414.66
	Transaction ID: SE24.290 Date of Disbursement or Obligation
	09 23 / 2024
CE	e Sought: X House District: 02
٦	President Senate State: NE
= )U	rrsement For: Primary X General
	Other (specify)
	Date of Public Distribution/Dissemination
	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Amount
-	21920.43
	Transaction ID : SE24.291 Date of Disbursement or Obligation
	09 23 7 2024
	e Sought: X House District: 19
7	President Senate State: NY
_ วบ	rrsement For: Primary X General
4	Other (specify) ▶
_	
	35335.09

NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼		
America PAC			C C00879510		
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on M M / D D / Y Y Y Y Y		
Full Name of Payee		☐ Memo	Item Date of Public Distribution/Dissemination		
GOLDFINCH PARTNERS LLC	GOLDFINCH PARTNERS LLC				
Mailing Address PO BOX 408			09 23 2024		
			Amount		
City	State	Zip Code	13414.66		
BAYVILLE	NJ	08721	Transaction ID : SE24.290  Date of Disbursement or Obligation		
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Name of Federal Candidate:		Support	Office Sought:  House District: 02		
VARGAS, TONY, , ,		∑ Oppose	President Senate State: NE		
Calendar Year-To-Date			Disbursement For: Primary General		
Per Election for Office Sought		135649.68	2024 Other (specify) ▶		
Full Name of Payee		☐ Memo	Item Date of Public Distribution/Dissemination		
GOLDFINCH PARTNERS LLC			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address PO BOX 408					
			Amount		
City	State	Zip Code	21920.43		
BAYVILLE	NJ	08721	Transaction ID : SE24.291  Date of Disbursement or Obligation		
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type	09 / 23 / Y 2024		
Name of Federal Candidate:		Support	Office Sought:  House District: 19		
MOLINARO, MARCUS, , ,		Oppose	President Senate State: NY		
Calendar Year-To-Date			Disbursement For: Primary X General		
Per Election for Office Sought	7-1-1-7-	341218.21	2024 Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures	·		35335.09		
(b) SUBTOTAL of Unitemized Independent Expenditu	res		· •		
(c) TOTAL Independent Expenditures			<b>•</b>		
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized				
GOBER, CHRIS, , ,		_	00 23 2024		
Signature		_ Date	9 23 2024		
			FEC Schedule E (Form 3X) Rev. 05/20		

TEMIZED INDEPENDENT EXPENDITURES				PAGE 120 OF 220
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y = Y
Full Name of Payee  GOLDFINCH PARTNERS LLC		☐ Memo		of Public Distribution/Dissemination
Mailing Address PO BOX 408			L	09 / 23 / 2024
1.00000			Amou	unt
City	State	Zip Code	шI.	21920.42
BAYVILLE	NJ	08721		saction ID : SE24.292 of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		M 09 / 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Soug	ht: X House District: 19
RILEY, JOSH, , ,		Oppose	Presid	NIV
Calendar Year-To-Date Per Election for Office Sought	7	341218.21	Disburseme	nt For:
Edit Name of Days	,		1_	
Full Name of Payee GOLDFINCH PARTNERS LLC		∐ Memo	_	of Public Distribution/Dissemination
Mailing Address PO BOX 408			Amou	
				45074.00
City BAYVILLE	State NJ	Zip Code 08721	Tran	15371.00 saction ID : SE24.333
Purpose of Expenditure		0		of Disbursement or Obligation
PRINTING/POSTAGE		Category/ Type		09 / 24 / 2024
Name of Federal Candidate:		X Support	Office Soug	ht: X House District: 02
HERRELL, YVETTE, , ,		Oppose	Presid	NIM
Calendar Year-To-Date Per Election for Office Sought		241484.43	Disburseme	nt For: Primary X General
Per Election for Office Sought	7		(	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures				37291.42
(b) SUBTOTAL of Unitemized Independent Expenditure	es			
(c) TOTAL Independent Expenditures			· •	
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidate party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		_	M M /	22 / 2024
Signature		_ Date	e 09	23 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 121 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	n M M / D D / Y Y Y Y
Full Name of Payee  GOLDFINCH PARTNERS LLC		☐ Memo	Item I	Date of Public Distribution/Dissemination
Mailing Address PO POY 409				09 26 2024
PO BOX 408			,	Amount
City	State	Zip Code		15371.00
BAYVILLE	NJ	08721		Transaction ID : SE24.334 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		09 / 24 / 2024
Name of Federal Candidate:		Support	Office 5	Sought: X House District: 02
VASQUEZ, GABRIEL , , ,		Oppose		President Senate State: NM
Calendar Year-To-Date Per Election for Office Sought	7	241484.43	Disburs 2024	sement For:  Primary
Full Name of Davis			11	Date of Public Distribution/Dissemination
Full Name of Payee GOLDFINCH PARTNERS LLC		∐ Memo	item	Date of Public Distribution/Dissernination  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 408				Amount
City	Ctata	Zin Codo		15371.00
City BAYVILLE	State NJ	Zip Code 08721		Transaction ID : SE24.335 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		
PRINTING/POSTAGE		Type		09 / 24 / 2024
Name of Federal Candidate:		X Support	Office \$	Sought: House District: 02
HERRELL, YVETTE, , ,		Oppose	F	President Senate State: NM
Calendar Year-To-Date Per Election for Office Sought		241484.43	Disburs 2024	Sement For: Primary General
	,		L	Other (specify)
			- 1	00710
(a) SUBTOTAL of Itemized Independent Expenditures			. •	30742.00
(b) SUBTOTAL of Unitemized Independent Expenditure	'es			
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		_	M	M / D D / Y Y Y Y Y Y
Signature		_ Date	9 09	25 2024

TEMIZED INDEPENDENT EXPENDITURES	ı			PAGE 122 OF 220
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼
Allielica i Ao				C C00879510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y = Y
Full Name of Payee GOLDFINCH PARTNERS LLC		☐ Memo	Item Da	te of Public Distribution/Dissemination
Mailing Address PO BOX 408			Am	nount
City	State	Zip Code		15371.00
BAYVILLE	NJ	08721	1	ansaction ID : SE24.336 te of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		09 / 24 / 2024
Name of Federal Candidate:		Support	Office So	ught: House District: 02
VASQUEZ, GABRIEL , , ,		Oppose		sident Senate State: NM
Calendar Year-To-Date Per Election for Office Sought	7 7	241484.43	Disbursen 2024	nent For:
Full Name of Payee GOLDFINCH PARTNERS LLC		☐ Memo	Item Da	te of Public Distribution/Dissemination
Mailing Address PO BOX 408			Am	nount
City	State	Zip Code		16234.42 ansaction ID : SE24.337
	NJ	08721		te of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		09 / 24 / 2024
Name of Federal Candidate:  EVANS, GABE, , ,		Support	Office So	
EVANS, GADE, , ,		Oppose	Pre	sident Senate State: CO
Calendar Year-To-Date Per Election for Office Sought	7 7	214473.85	Disbursen 2024	nent For:
(a) SUBTOTAL of Itemized Independent Expenditures	\$			31605.42
(b) SUBTOTAL of Unitemized Independent Expenditu	res		· •	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		_ Date	e 09	/ DDD / YDY YDY 2024

TEMIZED INDEPENDENT EXPENDITURES			PAGE 123 OF 2 FOR LINE 24 OF FORM	20 И 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBE	
America PAC			C C00879510	
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	Y
Full Name of Payee GOLDFINCH PARTNERS LLC		☐ Memo	Item Date of Public Distribution/Dissemination	Y
Mailing Address PO BOX 408			Amount	_
City	State	Zip Code	16234.4	1
BAYVILLE	NJ	08721	Transaction ID : SE24.338  Date of Disbursement or Obligation	
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type	09 / D D / Y Y 2024	
Name of Federal Candidate:		Support	Office Sought: X House District:	)8
CARAVEO, YADIRA, , ,		Oppose		0
Calendar Year-To-Date Per Election for Office Sought		214473.85	Disbursement For: ☐ Primary ☐ Ger 2024 ☐ Other (specify) ▶	neral
Full Name of Payee GOLDFINCH PARTNERS LLC		☐ Memo		
			09 Z6 Y Y 2024	_ '
Mailing Address PO BOX 408			Amount	
City	State	Zip Code	14065.20	0
BAYVILLE	NJ	08721	Transaction ID : SE24.339  Date of Disbursement or Obligation	
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type	09 / D24 / Y Y 2024	Y
Name of Federal Candidate: EVANS, GABE, , ,		Support Oppose	Office Godgitt. Trouse District.	08 CO
Calendar Year-To-Date Per Election for Office Sought	1 1	214473.85	Disbursement For:  Primary	nerai
(a) SUBTOTAL of Itemized Independent Expenditures			30299.61	
(b) SUBTOTAL of Unitemized Independent Expenditure	es		<b>•</b>	
(c) TOTAL Independent Expenditures			<b>•</b>	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
GOBER, CHRIS, , ,		_ Date	9 09 25 / Y 2024	

ITEMIZED INDEPENDENT EXPENDITURES				PAGE 124 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item Da	ate of Public Distribution/Dissemination
GOLDFINCH PARTNERS LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 408			Ar	mount
City	State	Zip Code	— Г	14065.19
BAYVILLE	NJ	08721		ransaction ID : SE24.340 ate of Disbursement or Obligation
Purpose of Expenditure		Category/		M = M / D = D / Y = Y = Y
PRINTING/POSTAGE		Туре		09 24 2024
Name of Federal Candidate:		Support	Office Sc	ought: X House District: 08
CARAVEO, YADIRA, , ,		Oppose	Pre	esident Senate State: CO
Calendar Year-To-Date		214473.85	Disburse	ment For: Primary X General
Per Election for Office Sought	7 7	214470.00	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination
GOLDFINCH PARTNERS LLC				09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 408				للنبا لتا لتا
			Ar	mount
City	State	Zip Code		14065.20
BAYVILLE	NJ	08721		ransaction ID : SE24.341 ate of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		09
Name of Federal Candidate:				Dught: V House District: 08
EVANS, GABE, , ,		Support	Office So	Jugiti. District.
EVANO, GADE, , ,		Oppose		State State.
Calendar Year-To-Date Per Election for Office Sought	A A	214473.85	Disburse 2024	ment For:
	, ,			Other (specify)
(a) SUPTOTAL of Itomized Independent Expanditures			. г	28130.39
(a) SUBTOTAL of Itemized Independent Expenditures			•	20130.39
(b) SUBTOTAL of Unitemized Independent Expenditure	res		. [	
(2,002.0				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
CORED CHDIS			M = M	/ D D / Y Y Y Y
GOBER, CHRIS, , , Signature		_ Date	e 09	25 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 125 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				0
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Dat	e of Public Distribution/Dissemination
GOLDFINCH PARTNERS LLC				09 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 408			Am	ount
City	State	Zip Code	— F	14065.19
BAYVILLE	NJ	08721		Insaction ID : SE24.342 e of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
PRINTING/POSTAGE		Type		09 24 2024
Name of Federal Candidate:		Support	Office Sou	ught: X House District: 08
CARAVEO, YADIRA, , ,		Oppose	Pres	sident Senate State: CO
Calendar Year-To-Date Per Election for Office Sought	, , ,	214473.85	Disbursem 2024	nent For:
Full Name of Payee		Memo	Item Dat	e of Public Distribution/Dissemination
GOLDFINCH PARTNERS LLC				09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 408				
			Am	ount
City	State	Zip Code		21793.03
BAYVILLE	NJ	08721		e of Disbursement or Obligation
Purpose of Expenditure		Category/		09 / 24 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
PRINTING/POSTAGE		Туре		00 24 2024
Name of Federal Candidate:		X Support	Office Sou	ught: House District:00
BEGICH, NICK, , ,		Oppose	Pres	sident Senate State: AK
Calendar Year-To-Date		189606.18	Disbursem 2024	nent For: Primary X General
Per Election for Office Sought	7 7		2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				35858.22
(b) SUBTOTAL of Unitemized Independent Expenditur	es		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,			M M	/ D D / Y Y Y Y Y Y Y 2024
Signature		_ Date	9 09	25 2024

TEMIZED INDEPENDENT EXPENDITURES					PAGE 12	26 OF 220 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FFC II		TION NUMBER ▼
America PAC				C	C0087951	
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M M /	D	YYYY
Full Name of Payee GOLDFINCH PARTNERS LLC		☐ Memo	Item Da	ate of Publi	c Distributio	n/Dissemination
Mailing Address PO BOX 408			Ar	nount		
City	State	Zip Code	<u> —</u> Г			21793.03
BAYVILLE	NJ	08721			ID : SE24.34 ursement or	14
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		M M M M M	24	2024
Name of Federal Candidate:		Support	Office So	onapt.	X House	District:00
PELTOLA, MARY, , ,		> Oppose		esident [	Senate	State: AK
Calendar Year-To-Date Per Election for Office Sought	7 1 7	189606.18	Disburse 2024	ment For:  Other (sp	Prima	ry X General
Full Name of Payee GOLDFINCH PARTNERS LLC		☐ Memo	Item Da	M = M	/ D D	n/Dissemination
Mailing Address PO BOX 408			Ar	09 mount	26	2024
City	State	Zip Code	— Г			21793.03
BAYVILLE	NJ	08721			ID : SE24.3 ursement or	45
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		09 09	25	2024
Name of Federal Candidate:		Support	Office So	mapt.	X House	District:00
BEGICH, NICK, , ,		Oppose		esident	Senate	State: AK
Calendar Year-To-Date Per Election for Office Sought		189606.18	Disburse 2024	ment For:  Other (sp	Prima	ry X General
(a) SUBTOTAL of Itemized Independent Expenditures  (b) SUBTOTAL of Unitemized Independent Expenditure			• [ • [		1 1 7	43586.06
(c) TOTAL Independent Expenditures			•			
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized					
g on the gypyg			M = M	/ D D	/ Y Y	YYY
GOBER, CHRIS, , ,		_ Date	09	25		)24

TEMIZED INDEPENDENT EXPENDITURES				PAGE 127 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	rt filed on	M
Full Name of Payee GOLDFINCH PARTNERS LLC		☐ Memo		of Public Distribution/Dissemination
Mailing Address PO BOX 408			L	09 / 26 / 2024
			Amou	ınt
City	State	Zip Code	─ I :	21793.03
BAYVILLE	NJ	08721		saction ID : SE24.346 of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		09 / 25 / 2024
Name of Federal Candidate:		Support	Office Sough	ht: X House District: 00
PELTOLA, MARY, , ,		Oppose	Presid	
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	189606.18	Disbursemer	
Full Name of Payee		Memo		of Public Distribution/Dissemination
GOLDFINCH PARTNERS LLC		IVIEITIO	item Bato	M M / D D / Y Y Y Y
Mailing Address PO POY 408			L	09 30 2024
PO BOX 408			Amou	ınt
City	State	Zip Code	— I	21793.03
BAYVILLE	NJ	08721	Tran	saction ID : SE24.347 of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		M 09 / D D / Y Y Y Y Y Y 2024
Name of Federal Candidate:		X Support	Office Sough	ht: X House District: 00
BEGICH, NICK, , ,		Oppose	Presid	lent Senate State: AK
Calendar Year-To-Date Per Election for Office Sought	A   A	189606.18	Disbursemer	nt For: Primary X General  Other (specify) ▶
	,			Julier (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures			· [	43586.06
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(c) TOTAL Independent Expenditures			<b>.</b>	.,,
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	M M /	25 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 128 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on M M M / D D / Y Y Y Y
Full Name of Payee  GOLDFINCH PARTNERS LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address BO BOY 408				09 7 30 7 2024
Mailing Address PO BOX 408				Amount
City	State	Zip Code		21793.03
BAYVILLE	NJ	08721	I .	Transaction ID : SE24.348 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	Sought: X House District: 00
PELTOLA, MARY, , ,		Oppose		President Senate State: AK
Calendar Year-To-Date			Disburs	sement For: Primary X General
Per Election for Office Sought	7 7	189606.18	2024	Other (specify) ►
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
GOLDFINCH PARTNERS LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 408				
				Amount
City	State	Zip Code		17757.32
BAYVILLE	NJ	08721		<b>Transaction ID : SE24.360</b> Date of Disbursement or Obligation
Purpose of Expenditure		Category/		09
PRINTING/POSTAGE		Type		00 20 2021
Name of Federal Candidate:		X Support	Office	Sought: House District: 19
MOLINARO, MARCUS, , ,		Oppose	F	President Senate State: NY
Calendar Year-To-Date		341218.21	I	sement For: Primary K General
Per Election for Office Sought	7 7	511213121	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. ▶	39550.35
42015554				
(b) SUBTOTAL of Unitemized Independent Expenditure	'es		•	7
(c) TOTAL Independent Expenditures				
, ,				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,			M =	M / D D / Y Y Y Y
Signature		_ Date	9 09	25 2024

Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 129 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee GOLDFINCH PARTNERS LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address PO BOX 408				Amount
City	State	Zip Code		17757.31
BAYVILLE	NJ	08721		Transaction ID : SE24.361 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		09 26 / Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	e Sought: X House District: 19
RILEY, JOSH, , ,		Oppose		President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought	2	341218.21	Disbu 2024	ursement For:
Full Name of Payee GOLDFINCH PARTNERS LLC		☐ Memo	Item	Date of Public Distribution/Dissemination  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 408				Amount
City	State	Zip Code		18073.42
BAYVILLE	NJ	08721		Transaction ID : SE24.362 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		09 / D 26 / Y Y Y Y Y
Name of Federal Candidate:  LAWLER, MIKE, , ,		Support Oppose	Office	e Sought:
Calendar Year-To-Date Per Election for Office Sought	7	698935.53	2024	ursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	·		. •	35830.73
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	e 0	9 26 2024

Date

TEMIZED INDEPENDENT EXPENDITURES				PAGE 130 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee GOLDFINCH PARTNERS LLC		☐ Memo	Item	Date of Public Distribution/Dissemination  M M O O O O O O O O O O O O O O O O O
Mailing Address PO BOX 408				Amount
City	State	Zip Code		18073.41
BAYVILLE	NJ	08721		Transaction ID : SE24.363 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		09 / 26 / Y Y Y Y Y 2024
Name of Federal Candidate:		Support	Office	e Sought: X House District: 17
JONES, MONDAIRE, , ,		Oppose		President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought	7	698935.53	Disbu 2024	rrsement For: ☐ Primary ☐ General ☐ Other (specify) ▶
Full Name of Payee GOLDFINCH PARTNERS LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address PO BOX 408				Amount
City	State	Zip Code		11263.35
BAYVILLE	NJ	08721		Transaction ID : SE24.364 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		M 09 / 26 / Y Y Y Y Y
Name of Federal Candidate: BACON, DON, , ,		Support Oppose	Office	President Senate State: NE
Calendar Year-To-Date Per Election for Office Sought	7 7	135649.68	Disbu 2024	rsement For: ☐ Primary ☐ General ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures  (b) SUBTOTAL of Unitemized Independent Expenditure				29336.76
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	e 0:	9 26 7 2024

Date

ITEMIZED INDEPENDENT EXPENDITURES				PAGE 131 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y = Y
Full Name of Payee  GOLDFINCH PARTNERS LLC		☐ Memo	Item Da	te of Public Distribution/Dissemination
Mailing Address				09 26 2024
Mailing Address PO BOX 408			Am	nount
City	State	Zip Code		11263.35
BAYVILLE	NJ	08721		ansaction ID : SE24.365 te of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		09 26 2024
Name of Federal Candidate:		Ourses	0450-	ught: V House District: 02
VARGAS, TONY, , ,		Support	Office So	ugit.
Villo, 1011,,,,		X Oppose	$\vdash$ $\vdash$	siderit Seriale State.
Calendar Year-To-Date Per Election for Office Sought	7	135649.68	Disburser 2024	nent For:
Full Name of Payee		☐ Memo	Item Da	te of Public Distribution/Dissemination
IMGE LLC				08 / 19 / 2024
Mailing Address 1401 H STREET NW STE 550			Am	nount
City	State	Zip Code	— I	68181.67
WASHINGTON	DC	20005		ransaction ID : SE24.68 te of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		08 19 2024
Name of Fodoral Condidates				
Name of Federal Candidate:		Support	Office So	<u> </u>
TRUMP, DONALD, , ,		Oppose	X Pre	
Calendar Year-To-Date Per Election for Office Sought	6	88481824.31	Disburser 2024	ment For:
(a) SUBTOTAL of Itemized Independent Expenditures				79445.02
(b) SUBTOTAL of Unitemized Independent Expenditure	res		• •	
(c) TOTAL Independent Expenditures			• •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,			M = M	/ D D / Y Y Y Y Y
Signature		_ Date	9 09	26 2024

33112322				
TEMIZED INDEPENDENT EXPENDITURES				PAGE 132 OF 220
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
` '				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Da	te of Public Distribution/Dissemination
				08 / 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550			Am	nount
City	State	Zip Code	— Г	68181.66
WASHINGTON	DC	20005	Tra	ansaction ID : SE24.69
		20000		tte of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		08 / 19 / 2024
Name of Federal Candidate:		Support	Office So	ught: House District: 00
HARRIS, KAMALA, , ,		Oppose		esident Senate State:
Colondor Voor To Doto			Disburser	
Calendar Year-To-Date Per Election for Office Sought	, 6	8481824.31	2024	Other (specify)
Full Name of Payee		☐ Memo	Item Da	te of Public Distribution/Dissemination
IMGE LLC				08
Mailing Address				08 21 2024
1401 H STREET NW STE 550			Am	nount
City	State	Zip Code	— Г	152294.34
WASHINGTON	DC	20005		ransaction ID : SE24.76 te of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
DIGITAL MEDIA		Type		08 21 2024
Name of Federal Candidate:		Support	Office So	ught: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pre	
Calendar Year-To-Date			Disburser	ment For: Primary X General
Per Election for Office Sought	6	8481824.31	2024	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			•	220476.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res		<b>.</b>	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Data	M = M	19 2024

SCHEDULE E (FEC Form 3X)			
TEMIZED INDEPENDENT EXPENDITURES			PAGE 133 OF 220
NAME OF COMMITTEE (In Full)			FOR LINE 24 OF FORM 3X
America PAC			FEC IDENTIFICATION NUMBER ▼
America i Ao			C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on
Full Name of Payee		☐ Memo	
			08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550			Amount
City	State	Zip Code	152294.34
WASHINGTON	DC	20005	Transaction ID : SE24.77  Date of Disbursement or Obligation
Purpose of Expenditure		Category/	M M / D D / Y Y Y Y
DIGITAL MEDIA		Type	08 21 2024
Name of Federal Candidate:		Support	Office Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose	President Senate State:
Calendar Year-To-Date		7	Disbursement For: Primary X General
Per Election for Office Sought	6	68481824.31	2024 ☐ Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date of Public Distribution/Dissemination
IMGE LLC			08 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550			
			Amount
City	State	Zip Code	14405.62
WASHINGTON	DC	20005	Transaction ID : SE24.91 Date of Disbursement or Obligation
Purpose of Expenditure		Category/	M M / D D / Y Y Y
TEXTING		Type	08 21 2024
Name of Federal Candidate:		Support	Office Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose	President Senate State:
Calendar Year-To-Date		20404004 04	Disbursement For: Primary X General
Per Election for Office Sought	-1	8481824.31	2024 Other (specify) ▶
·			
(a) SUBTOTAL of Itemized Independent Expenditures	3		166699.96
(b) SUBTOTAL of Unitemized Independent Expenditu	ıres		
(c) TOTAL Independent Expenditures			·
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized		
GOBER, CHRIS, , ,		Date	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

2024

21

08

Date

TEMIZED INDEPENDENT EXPENDITURES				PAGE 134 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item D	Pate of Public Distribution/Dissemination
IMGE LLC				08 / 23 / 2024
Mailing Address 1401 H STREET NW STE 550			A	mount
City	State	Zip Code		14405.63
WASHINGTON	DC	20005		ransaction ID : SE24.88 late of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y Y
TEXTING		Type		08 21 2024
Name of Federal Candidate:		X Support	Office S	lought: House District: 00
TRUMP, DONALD, , ,		Oppose	X PI	resident Senate State:
Calendar Year-To-Date		8481824.31	1	ement For: Primary X General
Per Election for Office Sought	, , ,	0401024.31	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item D	Pate of Public Distribution/Dissemination
IMGE LLC				08 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550				
			A	mount
City	State	Zip Code		26192.43
WASHINGTON	DC	20005		Fransaction ID : SE24.92 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		08 / D D / Y Y Y Y Y 2024
TEXTING		Type		
Name of Federal Candidate:		X Support	Office S	sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X PI	resident Senate State:
Calendar Year-To-Date	6	8481824.31	1	ement For: Primary Kanada General
Per Election for Office Sought	7-1-7	0401024.01	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. •	40598.06
			-	
(b) SUBTOTAL of Unitemized Independent Expenditur	es		· • L	
(a) TOTAL Independent Expenditures			Г	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe	nt expenditures	reported herein were	not made	e in cooperation, consultation, or concert
with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		_	M = M	21 2024
Signature		_ Date	9 08	21 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 135 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Da	te of Public Distribution/Dissemination
Mailing Address 1401 H STREET NW STE 550			Am	nount
City	State	Zip Code		26192.43
WASHINGTON	DC	20005		ansaction ID : SE24.93 te of Disbursement or Obligation
Purpose of Expenditure TEXTING		Category/ Type		08 / 08 / 22 / 2024
Name of Federal Candidate:		Support	Office So	ught: House District:00
HARRIS, KAMALA, , ,		Oppose	X Pre	
Calendar Year-To-Date Per Election for Office Sought	6	68481824.31	Disburser 2024	ment For:
Full Name of Payee		☐ Memo	Item Da	te of Public Distribution/Dissemination
IMGE LLC				08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550			An	nount
City	State	Zip Code		17667.35
WASHINGTON	DC	20005		ransaction ID : SE24.100 te of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
TEXTING		Type	_	08 23 2024
Name of Federal Candidate:		X Support	Office So	ught: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pre	sident Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disburser 2024	ment For: ☐ Primary X General  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			•	43859.78
(b) SUBTOTAL of Unitemized Independent Expenditure	'es		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		_ Date	e 08	/ DDD / YDYDY 2 22 2024

GOBER, CHRIS, , ,

Signature

SCHEDULE E (FEC Form 3X)				
TEMIZED INDEPENDENT EXPENDITURES				PAGE 136 OF 220
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
· · ·				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New rep	oort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Dat	te of Public Distribution/Dissemination
Mailing Address				08 27 2024
Mailing Address 1401 H STREET NW STE 550			Am	ount
City	State	Zip Code		17667.35
WASHINGTON	DC	20005		ansaction ID : SE24.101 te of Disbursement or Obligation
Purpose of Expenditure TEXTING		Category/ Type		08 / 23 / 2024
Name of Federal Candidate:		Support	Office Sou	ught: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Pres	
Calendar Year-To-Date Per Election for Office Sought	(	68481824.31	Disbursem 2024	nent For: ☐ Primary X General  Other (specify) ▶
Full Name of Payee		☐ Memo	Item Dat	te of Public Distribution/Dissemination
IMGE LLC				08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550			Am	ount
City	State	Zip Code		56974.60
WASHINGTON	DC	20005		ansaction ID : SE24.102 te of Disbursement or Obligation
Purpose of Expenditure TEXTING		Category/ Type		08 / 26 / 2024
Name of Federal Candidate:		Support	Office Sou	ught: House District: 00
TRUMP, DONALD, , ,		Oppose		
Only dee Very To Date			Disbursem	
Calendar Year-To-Date Per Election for Office Sought	(	68481824.31	2024	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	<b>3</b>		•	74641.95
(b) SUBTOTAL of Unitemized Independent Expenditu	res			7
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			

2024

23

08

Date

TEMIZED INDEPENDENT EXPENDITURES				PAGE 137 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed or	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item [	Date of Public Distribution/Dissemination
IMGE LLC				09
Mailing Address 1401 H STREET NW STE 550				Amount
City	State	Zip Code		68071.37
WASHINGTON	DC	20005		Fransaction ID : SE24.111
	DC	20000		Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		08 / 28 / 2024
Name of Federal Candidate:		Support	Office S	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose		resident Senate State:
0.1.1.1.1.7.7.0.1				ement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought	, 6	8481824.31	2024	Other (specify) >
Full Name of Payee		☐ Memo	Item [	Date of Public Distribution/Dissemination
IMGE LLC				M M / D D / Y Y Y Y
Mailing Address 1404 H STREET NW STE 550				09 02 2024
1401 H STREET NW STE 550			A	Amount
City	State	Zip Code		68071.37
WASHINGTON	DC	20005		Transaction ID : SE24.112
Purpose of Expenditure		Category/		Date of Disbursement or Obligation
DIGITAL MEDIA		Type		M 08 / D 28 / Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office S	Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose	X P	resident Senate State:
Calendar Year-To-Date			Disburs	ement For: Primary X General
Per Election for Office Sought	6	8481824.31	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. Γ	136142.74
(a) 302 10 112 or norm200 mappindoni Exportantico				7
(b) SUBTOTAL of Unitemized Independent Expenditure	res		[	
(a) 30310 M2 of officernized independent Experiation				
(c) TOTAL Independent Expenditures			. 🗸 Г	
()				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,			M = M	/ D D / Y Y Y Y
Signature		_ Date	9 08	28 2024

ITEMIZED INDEPENDENT EXPENDITURES				PAGE 138 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed or	n M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item [	Date of Public Distribution/Dissemination
IMGE LLC				09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550			,	Amount
City	State	Zip Code		11454.64
WASHINGTON	DC	20005		Transaction ID : SE24.115 Date of Disbursement or Obligation
Purpose of Expenditure TEXTING	I	Category/ Type		09 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		N	000	Sought Diotrict 00
TRUMP, DONALD, , ,		Support Oppose	Office S	Sought. House District.
, 2 0		Оррозе		President Senate State:
Calendar Year-To-Date Per Election for Office Sought		68481824.31	Disburs 2024	ement For: Primary General  Other (specify) ▶
Full Name of Payee		☐ Memo	Item [	Date of Public Distribution/Dissemination
IMGE LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550			,	Amount
City	State	Zip Code		11454.64
WASHINGTON	DC	20005	I	Transaction ID : SE24.116 Date of Disbursement or Obligation
Purpose of Expenditure TEXTING		Category/ Type		09 03 / 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
HARRIS, KAMALA, , ,		∑ Oppose		President Senate State:
				sement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought		68481824.31	2024	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures				22909.28
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
CORED CHDIC			M = N	/ / D D / Y Y Y Y Y
GOBER, CHRIS, , , Signature		_ Date	e 09	03 2024

TEMIZED INDEPENDENT EXPENDITURES			
TEMIZED INDEPENDENT EXPENDITURES			PAGE 139 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
America PAC			C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on M M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date of Public Distribution/Dissemination
Mailing Address 1401 H STREET NW STE 550			Amount
City	State	Zip Code	148106.19
WASHINGTON	DC	20005	Transaction ID : SE24.137 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type	09 / 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	, 6	68481824.31	Disbursement For: ☐ Primary ☐ General 2024 ☐ Other (specify) ▶
Full Name of Payee		Memo	
IMGE LLC			M M / D D / Y Y Y
Mailing Address 1401 H STREET NW STE 550			09 05 2024
			Amount
City	State	Zip Code	148106.19
WASHINGTON	DC	20005	Transaction ID : SE24.138  Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type	09 / 05 / Y Y 2024
Name of Federal Candidate:		Support	Office Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disbursement For: ☐ Primary ☐ General 2024 ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. 296212.38
(b) SUBTOTAL of Unitemized Independent Expenditure	'es		<b>•</b>
(c) TOTAL Independent Expenditures			<b>&gt;</b>
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	-	· · · · · · · · · · · · · · · · · · ·
CORER CHRIS			M M / D D / Y Y Y Y
GOBER, CHRIS, , ,		_ Date	9 09 05 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 140 OF 220
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee IMGE LLC		☐ Memo	Item Date	e of Public Distribution/Dissemination
Mailing Address 1401 H STREET NW STE 550			Amo	
City	State	Zip Code		20618.35
WASHINGTON	DC	20005		nsaction ID : SE24.143 e of Disbursement or Obligation
Purpose of Expenditure TEXTING		Category/ Type		09 06 7 2024
Name of Federal Candidate:		Support	Office Sou	ght: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pres	ident Senate State:
Calendar Year-To-Date Per Election for Office Sought		68481824.31	Disbursem 2024	ent For:
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
IMGE LLC				09 / D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550			Amo	ount
City	State	Zip Code	<u> —</u> Г	20618.35
WASHINGTON	DC	20005		Insaction ID : SE24.144 e of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
TEXTING		Type	_   _	09 06 2024
Name of Federal Candidate:		Support	Office Sou	ght: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Pres	ident Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	68481824.31	Disbursem 2024	ent For:
(a) SUBTOTAL of Itemized Independent Expenditures			· •	41236.70
(b) SUBTOTAL of Unitemized Independent Expenditure	res		<b>•</b>	
(c) TOTAL Independent Expenditures			•	7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		· · · · · · · · · · · · · · · · · · ·
GOBER, CHRIS, , ,		_ Date	e 09	06 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

TEMIZED INDEPENDENT EXPENDITURES				PAGE 141 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				C coorser
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item Da	te of Public Distribution/Dissemination
IMGE LLC				09 / 04 / 2024
Mailing Address 1401 H STREET NW STE 550			Am	nount
City	State	Zip Code	-	28232.53
WASHINGTON	DC	20005		ansaction ID : SE24.145 te of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
TEXTING		Type		09 06 2024
Name of Federal Candidate:		X Support	Office So	ught: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pre	sident Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disbursen 2024	1
				Other (specify) ▶
Full Name of Payee		Memo	Item Da	te of Public Distribution/Dissemination
Mailing Address				09 / 04 / 2024
1401 H STREET NW STE 550			Am	nount
City	State	Zip Code	— Г	28232.52
WASHINGTON	DC	20005	II.	ansaction ID : SE24.146 te of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
TEXTING		Type	_   _	09 06 2024
Name of Federal Candidate:		Support	Office So	ught: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Pre	sident Senate State:
Calendar Year-To-Date		0.404.00.4.04	Disburser	nent For: Primary X General
Per Election for Office Sought	0	8481824.31	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				56465.05
(b) SUBTOTAL of Unitemized Independent Expenditur	es		· • _	7
(c) TOTAL Independent Expenditures				
				7 7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		<b>.</b>	M = M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	9 09	06 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 142 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date of	of Public Distribution/Dissemination
IMGE LLC				09 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550				00 00 2021
			Amour	nt
City	State	Zip Code	— I :	15805.93
WASHINGTON	DC	20005		action ID : SE24.147
Purpose of Expenditure		Catanani		of Disbursement or Obligation
TEXTING		Category/ Type		09 06 2024
Name of Federal Candidate:		Support	Office Sough	t: House District:00
TRUMP, DONALD, , ,		Oppose	X Preside	
Calendar Year-To-Date			Disbursement	
Per Election for Office Sought	6	88481824.31	2024	ther (specify) ▶
Full Name of Payee		☐ Memo	1_	of Public Distribution/Dissemination
IMGE LLC		□ Memo	Item Date C	M / D D / Y Y Y Y
Maille et Andreas				09 2024
Mailing Address 1401 H STREET NW STE 550			Amour	nt
	To	I =		2450.05
City WASHINGTON	State	Zip Code		2456.85 action ID : SE24.159
	DC	20005		of Disbursement or Obligation
Purpose of Expenditure		Category/	М	09
TEXTING		Type	_	00 00 2021
Name of Federal Candidate:		X Support	Office Sough	t: House District:00
TRUMP, DONALD, , ,		Oppose	X Preside	ent Senate State:
Calendar Year-To-Date		alaska da da	Disbursemen	t For: Primary X General
Per Election for Office Sought	6	8481824.31	2024 O	ther (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	i			18262.78
(a) 00210112011011120111201112011120111201				
(b) SUBTOTAL of Unitemized Independent Expenditu	res			
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	M M / 09	06 / 2024

NAME OF COMMITTEE (In Full)

America PAC

#### SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

	DA OF 140 OF 200
	PAGE 143 OF 220 FOR LINE 24 OF FORM 3X
	FEC IDENTIFICATION NUMBER ▼
	C C00879510
ed	on M = M / D = D / Y = Y = Y = Y
	Date of Public Distribution/Dissemination
	09 / 09 / 2024
	Amount
	2456.85
	Transaction ID : SE24.160  Date of Disbursement or Obligation
	09 06 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
fice	e Sought: House District: 00
X	
_	
SDL	ursement For: Primary X General
4	Other (specify) ►  Date of Public Distribution/Dissemination
24	Other (specify)   Date of Public Distribution/Dissemination
24	Other (specify) ▶  Date of Public Distribution/Dissemination
24	Other (specify)   Date of Public Distribution/Dissemination
24	Other (specify) ►  Date of Public Distribution/Dissemination  M 09
24	Other (specify) Date of Public Distribution/Dissemination  M 09 16 2024  Amount  72469.33  Transaction ID: SE24.161
24	Other (specify) Date of Public Distribution/Dissemination  M M / D D / Y Y Y Y Y  Date of Public Distribution/Dissemination  72469.33  Transaction ID : SE24.161  Date of Disbursement or Obligation
24	Other (specify) Date of Public Distribution/Dissemination  M 09 16 2024  Amount  72469.33  Transaction ID: SE24.161
24	Other (specify) Date of Public Distribution/Dissemination  M 09
1	Other (specify) Date of Public Distribution/Dissemination  M 09
flice	Other (specify) Date of Public Distribution/Dissemination  M 09
flice	Other (specify)   Date of Public Distribution/Dissemination  M 09
flice	Other (specify) Date of Public Distribution/Dissemination  M 09
ffice sbu	Other (specify)   Date of Public Distribution/Dissemination  M 09
flice	Other (specify)   Date of Public Distribution/Dissemination  M 09
fice sbu	Other (specify)   Date of Public Distribution/Dissemination  M 09
flice	Other (specify)   Date of Public Distribution/Dissemination  M 09
ffice sbu	Other (specify)   Date of Public Distribution/Dissemination  M 09

Check if 24-hour report 48-hour report New report Amends report Full Name of Payee IMGE LLC Mailing Address 1401 H STREET NW STE 550 City State Zip Code WASHINGTON DC 20005 Purpose of Expenditure Category/ **TEXTING** Type Name of Federal Candidate: Support HARRIS, KAMALA, , , Oppose С Calendar Year-To-Date 68481824.31 20 Per Election for Office Sought Full Name of Payee Memo Ite IMGE LLC Mailing Address 1401 H STREET NW STE 550 City State Zip Code WASHINGTON DC 20005 Purpose of Expenditure Category/ **DIGITAL MEDIA** Type Name of Federal Candidate: X Support ( TRUMP, DONALD, , , Oppose С Calendar Year-To-Date 68481824.31 2 Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures ..... (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures ..... Under penalty of perjury I certify that the independent expenditures reported herein were no 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. GOBER, CHRIS, , , 06 2024 09 Date Signature FEC Schedule E (Form 3X) Rev. 05/2016

TEMIZED INDEPENDENT EXPENDITURES			PAGE 144 OF 220
NAME OF COMMITTEE (In Full)			FOR LINE 24 OF FORM 33
America PAC			C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends report	rt filed on
Full Name of Payee  IMGE LLC  Mailing Address  1401 H STREET NW STE 550		☐ Memo It	Date of Public Distribution/Dissemination  M 09
City WASHINGTON	State DC	Zip Code 20005	72469.33  Transaction ID : SE24.162  Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type	09 / 06 / Y 2024
Name of Federal Candidate:  HARRIS, KAMALA, , ,  Calendar Year-To-Date Per Election for Office Sought	6	Support Oppose  8481824.31	Office Sought: House District: 00    President Senate State:   Disbursement For: Primary   General 2024   Gener
	7 7		U Other (specify) ►
Full Name of Payee IMGE LLC		☐ Memo It	Date of Public Distribution/Dissemination
Mailing Address 1401 H STREET NW STE 550			Amount
City WASHINGTON	State DC	Zip Code 20005	163225.17  Transaction ID : SE24.215  Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type	09 / 16 / Y Y 2024
Name of Federal Candidate: TRUMP, DONALD, , ,		Support Oppose	Office Sought: House District: 00    President   Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disbursement For: ☐ Primary ☐ General 2024 ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			235694.50
(b) SUBTOTAL of Unitemized Independent Expenditur	es		<b>&gt;</b>
(c) TOTAL Independent Expenditures			<b>•</b>
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized		
CORER CHRIS			M = M / D = D / Y = Y = Y
GOBER, CHRIS, , ,		_ Date	09 06 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 145 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
IMGE LLC			Г	09 / 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550				55 15 2021
			Amou	ınt
City	State	Zip Code	<u> П</u>	163225.17
WASHINGTON	DC	20005		saction ID : SE24.216
Purpose of Expenditure		Category/		of Disbursement or Obligation
DIGITAL MEDIA		Type		09 16 2024
Name of Federal Candidate:		Support	Office Sough	ht: House District: 00
HARRIS, KAMALA, , ,		> Oppose		
			Disbursemer	
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	2024	
	1		1_	Other (specify)
Full Name of Payee  IMGE LLC		☐ Memo	Item Date	of Public Distribution/Dissemination
				09 16 7 2024
Mailing Address 1401 H STREET NW STE 550			Amou	int
			741100	
City	State	Zip Code		41236.03
WASHINGTON	DC	20005		saction ID : SE24.217 of Disbursement or Obligation
Purpose of Expenditure		Category/		09 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
TEXTING		Type	_	09 10 2024
Name of Federal Candidate:		X Support	Office Sough	ht: House District:00
TRUMP, DONALD, , ,		Oppose	X Presid	lent Senate State:
Calendar Year-To-Date			Disbursemer	nt For: Primary X General
Per Election for Office Sought	6	8481824.31	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				204461.20
(a) 30210112 of Normacoa maoportaoni exportantareo				20.10.120
(b) SUBTOTAL of Unitemized Independent Expenditure	res			
, ,				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
	_			
GOBER, CHRIS, , ,		Date	M M /	16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

TEMIZED INDEPENDENT EXPENDITURES				PAGE 146 OF 220
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼ C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550				Amount
City	State	Zip Code		69750.40
WASHINGTON	DC	20005		Transaction ID : SE24.349 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		09 / 25 / Y Y Y Y Y 2024
Name of Federal Candidate:		Support	Office	e Sought: X House District: 22
VALADAO, DAVID, , ,		Oppose		President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	7	357773.40	Disbu 2024	ursement For:
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 1401 H STREET NW STE 550				M 09 / 25 / Y 2024 Y Amount
City	State	Zip Code		118049.21
WASHINGTON	DC	20005		Transaction ID : SE24.350  Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y
DIGITAL MEDIA		Type		09 25 2024
Name of Federal Candidate: CALVERT, KEN, , ,		Support Oppose	Office	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	7 1 7	557052.21	Disbu 2024	ursement For: Primary X General  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditu				187799.61
(c) TOTAL Independent Expenditures			. •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	e 0	9 25 2024

Date

#### SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES PAGE 147 OF 220 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ America PAC C00879510 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee IMGE LLC 25 2024 Mailing Address 1401 H STREET NW STE 550 Amount City State Zip Code 103480.17 WASHINGTON DC 20005 Transaction ID: SE24.351 Date of Disbursement or Obligation Purpose of Expenditure Category/ **DIGITAL MEDIA** 2024 Type Name of Federal Candidate: 45 Support X House Office Sought: District: STEEL, MICHELLE, , , CA Oppose President State: Senate Primary X General Disbursement For: Calendar Year-To-Date 472670.67 2024 Per Election for Office Sought Other (specify) ▶ Date of Public Distribution/Dissemination Full Name of Payee Memo Item IMGE LLC 2024 25 Mailing Address 1401 H STREET NW STE 550 Amount 58893.26 City State Zip Code WASHINGTON Transaction ID: SE24.352 DC 20005 Date of Disbursement or Obligation Purpose of Expenditure Category/ 2024 DIGITAL MEDIA Type Name of Federal Candidate: 03 X Support X House Office Sought: District: KENT, JOE, , , WA Oppose President Senate State: X General Disbursement For: Primary Calendar Year-To-Date 277161.26 2024 Per Election for Office Sought Other (specify) ▶ 162373.43 (a) SUBTOTAL of Itemized Independent Expenditures ..... (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. GOBER, CHRIS, , , 2024 25 09 Date

TEMIZED INDEDENDENT EVDENDITUDES				
TEMIZED INDEPENDENT EXPENDITURES				PAGE 148 OF 220
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
, ,				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed or	n M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item [	Date of Public Distribution/Dissemination
				M 09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550				Amount
City	State	Zip Code		92245.63
	DC	20005		Transaction ID : SE24.353
WASHINGTON	DC	20003		Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		09 / 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office S	Sought: X House District: 09
MERRIN, DERRICK, , ,		Oppose	l —	President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	358378.63	Disburs 2024	ement For:
Full Name of Payee		Memo	Item [	Date of Public Distribution/Dissemination
IMGE LLC		Wellie		
Mailing Address				09 / D25 / Y Y Y Y Y Y
1401 H STREET NW STE 550				Amount
0.4	04-4-	7: 0! -		09742.20
City	State	Zip Code		98712.30
WASHINGTON	DC	20005		Transaction ID : SE24.354 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y
DIGITAL MEDIA		Type		09 25 2024
Name of Federal Candidate:		X Support	Office S	Sought: X House District: 13
COUGHLIN, KEVIN, , ,		Oppose	P	President Senate State: OH
Calendar Year-To-Date			Disburs	ement For: Primary X General
Per Election for Office Sought	7-1-5-	453125.70	2024	Other (specify) ▶
			L	
(a) SUBTOTAL of Itemized Independent Expenditures			•	190957.93
(b) SUBTOTAL of Unitemized Independent Expenditure	res			
(c) TOTAL Independent Expenditures			•	, ,
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	M	25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

GOBER, CHRIS, , ,

Signature

SCHEDULE E (FEC Form 3X)				
TEMIZED INDEPENDENT EXPENDITURES				PAGE 149 OF 220
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼
Allielica FAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550				Amount
City	State	Zip Code		86306.36
WASHINGTON	DC	20005		Transaction ID : SE24.355 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		09 / D D / Y Y Y 2024
Name of Federal Candidate:		Support	Office	e Sought: X House District: 03
NUNN, ZACH, , ,		Oppose		President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	7 7	139588.07	Disbu 2024	ursement For:
Full Name of Payee IMGE LLC		☐ Memo	Item	Date of Public Distribution/Dissemination  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550				Amount
City	State	Zip Code		130437.30
WASHINGTON	DC	20005		Transaction ID : SE24.356  Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		09 / 25 / 2024
Name of Federal Candidate:		Support	Office	e Sought: X House District:07
KEAN, TOM, , ,		Oppose		President Senate State: NJ
Calendar Year-To-Date Per Election for Office Sought	7 7	254496.60	Disbu 2024	ursement For:  Primary
(a) SUBTOTAL of Itemized Independent Expenditures	i		•	216743.66
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			

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Date

SOMEDOLL L (LEG FORM OX)				
TEMIZED INDEPENDENT EXPENDITURES				PAGE 150 OF 220
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item D	Date of Public Distribution/Dissemination
				09 Z5 Z024
Mailing Address 1401 H STREET NW STE 550			А	mount
City	State	Zip Code		72521.83
WASHINGTON	DC	20005		ransaction ID : SE24.357 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		09 25 7 2024
Name of Federal Candidate:		Support	Office S	Sought: X House District: 02
THERIAULT, AUSTIN, , ,		Oppose		resident Senate State: ME
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	341906.83	Disburse 2024	ement For: Primary X General  Other (specify) ▶
Full Name of Payee		☐ Memo	Item D	Date of Public Distribution/Dissemination
IMGE LLC				09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550				09 27 2024
14011131KEE1 NW 31E 330			A	mount
City	State	Zip Code		41236.03
WASHINGTON	DC	20005		Transaction ID : SE24.369 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y
TEXTING		Type	_	09 26 2024
Name of Federal Candidate:		X Support	Office S	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pr	resident Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disburse 2024	ement For: Primary X General  Other (specify) ▶
	,			Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			•	113757.86
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	M = M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

TEMIZED INDEPENDENT EXPENDITURES			PAGE 151 OF 220
NAME OF COMMITTEE (In Full)			FOR LINE 24 OF FORM 3X
America PAC			C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repor	rt filed on M M / D D / Y Y Y Y
Full Name of Payee IMGE LLC  Mailing Address 1401 H STREET NW STE 550		☐ Memo I	Item Date of Public Distribution/Dissemination  M 09 / 26 / Y 2024  Amount
		T = 0 .	20000 70
City WASHINGTON	State DC	Zip Code 20005	29990.70 Transaction ID : SE24.370
Purpose of Expenditure TEXTING		Category/ Type	Date of Disbursement or Obligation  M 09
Name of Federal Candidate:  TRUMP, DONALD, , ,  Calendar Year-To-Date Per Election for Office Sought	6	Support Oppose	Office Sought: House District: 00  President Senate State: Frimary General
Tel Election for Office Sought	7 7		Other (specify) ▶
Full Name of Payee IN FIELD STRATEGIES INC		☐ Memo I	Item Date of Public Distribution/Dissemination
Mailing Address 333 H STREET STE 500			Amount
City CHULA VISTA	State CA	Zip Code 91910	1546875.03  Transaction ID : SE24.15  Date of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS	1	Category/ Type	07 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate: TRUMP, DONALD, , ,		Support Oppose	Office Sought: House District: 00    President   Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disbursement For: ☐ Primary ☐ General 2024 ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			1576865.73
(b) SUBTOTAL of Unitemized Independent Expenditure	es		<b>&gt;</b>
(c) TOTAL Independent Expenditures			<b>&gt;</b>
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized		
COPER CURY			M = M / D = D / Y = Y = Y
GOBER, CHRIS, , ,		_ Date	. 09 26 2024

 $GOBER,\ CHRIS,\ ,\ ,$ 

Signature

SCHEDULE E (FEC Form 3X)				
TEMIZED INDEPENDENT EXPENDITURES	j			PAGE 152 OF 220
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
, ,				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed o	on M = M / D = D / Y = Y = Y = Y
Full Name of Payee IN FIELD STRATEGIES INC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 333 H STREET				Amount
STE 500				
City	State	Zip Code		1546875.03
CHULA VISTA	CA	91910		Transaction ID : SE24.16 Date of Disbursement or Obligation
Purpose of Expenditure  CANVASSING/FIELD OPERATIONS		Category/ Type		07 05 7 2024
Name of Federal Candidate:		Support	Office	Sought: House District:00
BIDEN, JOE, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	(	68481824.31	Disburs 2024	sement For:
Full Name of Payee IN FIELD STRATEGIES INC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address				07 / 10 / Y Y Y Y Y
333 H STREET STE 500				Amount
City	State	Zip Code		1546875.03
CHULA VISTA	CA	91910		Transaction ID : SE24.23 Date of Disbursement or Obligation
Purpose of Expenditure  CANVASSING/FIELD OPERATIONS		Category/ Type		M 07 / 08 / Y Y 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose		President Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	68481824.31	Disburs 2024	sement For:
(a) SUBTOTAL of Itemized Independent Expenditure	S		•	3093750.06
(b) SUBTOTAL of Unitemized Independent Expenditu	ıres			
(c) TOTAL Independent Expenditures			• •	
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	late or authorized			

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Date

NAME OF COMMITTEE (In Full)

America PAC

		PAGE	153 OF 220			
		FOR LIN	E 24 OF FORM 3X			
FEC IDENTIFICATION NUMBER ▼						
	С	C008795				
on M	- M	/ D D	/ Y Y Y Y			
Date	of Pub	olic Distribut	ion/Dissemination			
P	07 <sup>M</sup>	/ 10	/ Y Y Y Y Y 2024			
Amou	nt					
Г			1546875.03			
Trans		n ID : SE24.	24			
	of Dis	bursement o	or Obligation			
Ľ	07	08	2024			
Sough	nt·	House	District: 00			
Sougi						
		Senate				
semer	nt For:	Prim	nary X General			
C	Other (	specify)  _				
Date	of Puk	olic Distribut	ion/Dissemination			
Date			ion/Dissemination			
Date	of Puk	Distribut	2024			
Date	of Puk	Distribut	/ Y Y Y Y			
Amou Trans	of Puk 07 nt	n ID : SE24	1546875.03			
Amou Trans	of Pub 07 nt sactio	n ID : SE24	1546875.03 29 or Obligation			
Amou Trans	of Pub 07 nt sactio	n ID : SE24	1546875.03 29 or Obligation			
Amou Trans	of Pub 07 nt sactio of Dis	n ID : SE24 bursement of	1546875.03 29 or Obligation			
Amou  Trans  Date  Sough	of Pub 07 nt sactio of Dis 07	n ID : SE24 bursement of	1546875.03 29 or Obligation / Y 2024 District: 00			
Amou Trans Date Sough	of Pub 07 nt sactio of Dis 07	n ID : SE24 bursement of House Senate	1546875.03  29 or Obligation  / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Amou Trans Date Sough Presid	of Pub 07 nt sactio of Dis 07 nt: ent	n ID : SE24 bursement of House Senate	1546875.03 29 or Obligation / Y 2024 District: 00			
Amou Trans Date Sough Presid	of Pub 07 nt sactio of Dis 07 nt: ent	n ID : SE24 bursement of House Senate	1546875.03  29 or Obligation  / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Amou Trans Date Sough Presid	of Puk 07 nt sactio of Dis 07 nt: ent nt For:	n ID : SE24 bursement of House Senate	1546875.03  .29 or Obligation / Y 2024  District:			
Amou Trans Date Sough Presid	of Puk 07 nt sactio of Dis 07 nt: ent nt For:	n ID : SE24 bursement of 19 House Senate Prim	1546875.03  .29 or Obligation  / Y 2024  District:			
Amou Trans Date Sough Presid	of Puk 07 nt sactio of Dis 07 nt: ent nt For:	n ID : SE24 bursement of House Senate Prim specify)	1546875.03  .29 or Obligation  / Y 2024  District:			
Amou Trans Date Sough Presid	of Puk 07 nt sactio of Dis 07 nt: ent nt For:	n ID : SE24 bursement of House Senate Prim specify)	1546875.03  .29 or Obligation  / Y 2024  District:			
Amou Trans Date Sough Presid	of Puk 07 nt sactio of Dis 07 nt: ent nt For:	n ID : SE24 bursement of House Senate Prim specify)	1546875.03  .29 or Obligation  / Y 2024  District:			

Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee IN FIELD STRATEGIES INC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address				07 / 10 / 2024
333 H 31REE1				Amount
STE 500	State	Zin Codo		1546875.03
City CHULA VISTA	CA	Zip Code 91910		Transaction ID : SE24.24
	CA	31310		Date of Disbursement or Obligation
Purpose of Expenditure  CANVASSING/FIELD OPERATIONS		Category/		07 08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
CANVAGGING/FIELD OF EIGHTONG		Type		0, 00 2021
Name of Federal Candidate:		Support	Office	e Sought: House District: 00
BIDEN, JOE, , ,		Oppose	$  \times$	President Senate State:
Calendar Year-To-Date			Disbu	ursement For: Primary X General
Per Election for Office Sought	(	58481824.31	2024	Other (specify)
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
IN FIELD STRATEGIES INC				07 17 2024
Mailing Address 333 H STREET				07 17 2024
STE 500				Amount
City	State	Zip Code		1546875.03
CHULA VISTA	CA	91910		Transaction ID : SE24.29
Purpose of Expenditure				Date of Disbursement or Obligation
CANVASSING/FIELD OPERATIONS		Category/ Type		07 19 / 2024
Name of Federal Candidate:		X Support	Office	e Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	$\times$	President Senate State:
Calendar Year-To-Date		2040400404	Disbu	ursement For: Primary X General
Per Election for Office Sought	1	8481824.31	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			•	3093750.06
(b) SUBTOTAL of Unitemized Independent Expenditure	es		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
CODER CHRIS			М	M / D D / Y Y Y Y Y
GOBER, CHRIS, , , Signature		_ Date	9 0	7 10 2024
- Signaturo				FFO Oak I I F /F
				FEC Schedule E (Form 3X) Rev. 05/2016

TEMIZED INDEPENDENT EXPENDITURES				PAGE 154 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				O
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
IN FIELD STRATEGIES INC			1	07 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 333 H STREET			A	
STE 500			Amou	unt
City	State	Zip Code		1546875.03
CHULA VISTA	CA	91910		saction ID : SE24.30 of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type	_     L	07 19 2024
Name of Federal Candidate:		Support	Office Soug	ht: House District:00
BIDEN, JOE, , ,		Oppose	X Presid	dent Senate State:
Calendar Year-To-Date		0.404.004.04	Disburseme	nt For: Primary X General
Per Election for Office Sought	6	8481824.31	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
OSCEOLA STRATEGIES LLC			l r	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 8 THE GREEN				08 12 2024
STE A			Amou	unt
City	State	Zip Code	— Г.	210433.50
DOVER	DE	19901		nsaction ID : SE24.32 of Disbursement or Obligation
Purpose of Expenditure	1	Category/	Date	08 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
PRINTING/POSTAGE		Type	_     L	08 12 2024
Name of Federal Candidate:		Support	Office Soug	ht: House District: 00
TRUMP, DONALD, , ,		Oppose	X Presid	dent Senate State:
Calendar Year-To-Date		8481824.31	Disburseme	ent For: Primary X General
Per Election for Office Sought	1	0461624.31	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			· •	1757308.53
			_ =	
(b) SUBTOTAL of Unitemized Independent Expenditur	es		· •	
(a) TOTAL lader and last Foregrafithms				
(c) TOTAL Independent Expenditures			· -	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,			M = M /	D D / Y Y Y Y Y Y
Signature		_ Date	9 07	19 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 155 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on M M M / D D / Y M Y M Y
Full Name of Payee OSCEOLA STRATEGIES LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address				08 12 2024
Mailing Address 8 THE GREEN				Amount
STE A City	State	Zip Code		210433.50
DOVER	DE	19901		Transaction ID : SE24.33
Purpose of Expenditure PRINTING/POSTAGE	I	Category/ Type		Date of Disbursement or Obligation  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose		President Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31		rsement For: Primary X General
	,			Other (specify) >
Full Name of Payee OSCEOLA STRATEGIES LLC		∐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 8 THE GREEN				Amount
STE A				
City DOVER	State	Zip Code 19901		94764.00  Transaction ID : SE24.34
Purpose of Expenditure		Category/		Date of Disbursement or Obligation
PRINTING/POSTAGE		Type	4	08 / 12 / 2024
Name of Federal Candidate:		X Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disbur 2024	sement For:
(a) SUBTOTAL of Itemized Independent Expenditures				305197.50
42015554				
(b) SUBTOTAL of Unitemized Independent Expenditure	res		• •	
(c) TOTAL Independent Expenditures			•	7 7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,			M	M / D D / Y Y Y Y
Signature		_ Date	9 08	14 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 156 OF 220
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee OSCEOLA STRATEGIES LLC		☐ Memo	Item Da	ate of Public Distribution/Dissemination
Mailing Address 8 THE GREEN				10 10 2024
STE A			Ar	nount
City	State	Zip Code		94764.00
DOVER	DE	19901	I .	ransaction ID : SE24.35 ate of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		08 / D D / Y Y Y Y Y Y Y 2024
Name of Federal Candidate:		Support	Office So	ought: House District:00
HARRIS, KAMALA, , ,		Oppose	X Pro	esident Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disburse 2024	ment For:
Full Name of Payee OSCEOLA STRATEGIES LLC		☐ Memo	Item Da	ate of Public Distribution/Dissemination
Mailing Address 8 THE GREEN				08 17 2024
STE A			Ar	mount
City	State	Zip Code		39250.00
DOVER	DE	19901		ransaction ID : SE24.36 ate of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		08
Name of Federal Candidate:		Support	Office So	ought: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pro	esident Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disburse 2024	ment For:
(a) SUBTOTAL of Itemized Independent Expenditures			. [	134014.00
,				
(b) SUBTOTAL of Unitemized Independent Expenditure	es		. •	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
GOBER, CHRIS, , ,		_ Date	e 08	14 2024

ITEMIZED INDEPENDENT EXPENDITURES				PAGE 157 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed or	M = M / D = D / Y = Y = Y
Full Name of Payee OSCEOLA STRATEGIES LLC		☐ Memo	Item [	Date of Public Distribution/Dissemination
Mailing Address 8 THE GREEN				08 17 2024
STE A			<i>P</i>	Amount
City	State	Zip Code		39250.00
DOVER	DE	19901		Transaction ID : SE24.37 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office S	Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose		resident Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disburs 2024	ement For:
Full Name of Payee		Memo	Itom   [	Date of Public Distribution/Dissemination
OSCEOLA STRATEGIES LLC		□ Memo	item	08 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 8 THE GREEN			Δ	Amount
STE A				
DOVER	State	Zip Code 19901		15750.00  Transaction ID : SE24.38
Purpose of Expenditure		Catagony		Date of Disbursement or Obligation
PRINTING		Category/ Type		08 12 2024
Name of Federal Candidate:		X Support	Office S	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X P	resident Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disburs 2024	ement For:
(a) SUBTOTAL of Itemized Independent Expenditures			• •	55000.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res		ιг	
(b) 66216 M2 or ormanized mappendont Expondition				
(c) TOTAL Independent Expenditures			• •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,			M = M	/ D D / Y Y Y Y
Signature		_ Date	9 08	14 2024

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ITEMIZED INDEPENDENT EXPENDITURES				PAGE 158 OF 220
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
, ,				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee OSCEOLA STRATEGIES LLC		☐ Memo	Item Dat	e of Public Distribution/Dissemination
Mailing Address 8 THE GREEN				08 19 2024
STE A			Am	ount
City	State	Zip Code		15750.00
DOVER	DE	19901		insaction ID : SE24.39 e of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		08 / 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sou	ught: House District:00
HARRIS, KAMALA, , ,		X Oppose	X Pres	sident Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disbursem	nent For: ☐ Primary ☐ General  Other (specify) ▶
Full Name of Payee		☐ Memo	Item Dat	e of Public Distribution/Dissemination
OSCEOLA STRATEGIES LLC				08 / 23 / Y Y Y Y Y 2024
Mailing Address 8 THE GREEN			Am	ount
STE A	T-: :			<del> </del>
DOVER	State	Zip Code 19901	<b>I</b>	82606.50 ansaction ID : SE24.84
Purpose of Expenditure		Cotogony	Dat	e of Disbursement or Obligation
PRINTING/POSTAGE		Category/ Type		08 21 2024
Name of Federal Candidate:		X Support	Office Sou	ught: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pres	sident Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disbursem 2024	nent For:  Primary
(a) SUBTOTAL of Itemized Independent Expenditures			<b>•</b>	98356.50
(b) SUBTOTAL of Unitemized Independent Expenditure	'es		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Dota	M M M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

NAME OF COMMITTEE (In Full)

	PAGE 159 OF 220
	FOR LINE 24 OF FORM 3X
	FEC IDENTIFICATION NUMBER ▼
	C C00879510
s report filed	i on M M / D D / Y Y Y Y
lemo Item	Date of Public Distribution/Dissemination
	08 / 23 / 2024
	Amount
	82606.50
	Transaction ID : SE24.85
	Date of Disbursement or Obligation
	08 21 2024
port Offic	e Sought: House District: 00
ose	President Senate State:
	ursement For: Primary X General
2024	Other (specify) ▶
Memo Item	Date of Public Distribution/Dissemination
	08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Amount
	194079.50
	Transaction ID : SE24.96  Date of Disbursement or Obligation
	M M / D D / Y Y Y Y
	08 22 2024
port Offic	e Sought: House District: 00
port Offic	e Sought: House District: 00  President Senate State:
ose X	e Sought

TEMIZED INDEPENDENT EXPENDITURES				PAGE 160 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
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Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
OSCEOLA STRATEGIES LLC				08 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 8 THE GREEN				
STE A			Amou	unt
City	State	Zip Code		194079.50
DOVER	DE	19901		saction ID : SE24.97 of Disbursement or Obligation
Purpose of Expenditure		Category/	<b>—</b> [	M M / D D / Y Y Y Y
PRINTING/POSTAGE		Type	_	08 22 2024
Name of Federal Candidate:		Support	Office Soug	ht: House District:00
HARRIS, KAMALA, , ,		Oppose	X Presid	dent Senate State:
Calendar Year-To-Date		0.404.004.04	Disburseme	nt For: Primary X General
Per Election for Office Sought	, , ,	8481824.31	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
OSCEOLA STRATEGIES LLC			1	M M / D D / Y Y Y Y Y Y Y Y X Y X Y X Y X Y X Y X
Mailing Address 8 THE GREEN				00 30 2024
STE A			Amo	unt
City	State	Zip Code	— I [ ]	69832.50
DOVER	DE	19901		nsaction ID : SE24.103 of Disbursement or Obligation
Purpose of Expenditure	1	Category/	Date	M M / D D / Y Y Y Y
PRINTING/POSTAGE		Туре	_     L	08 27 2024
Name of Federal Candidate:		Support	Office Soug	ht: House District: 00
TRUMP, DONALD, , ,		Oppose	X Presid	dent Senate State:
Calendar Year-To-Date		8481824.31	Disburseme	ent For: Primary X General
Per Election for Office Sought	1	0401024.31	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			·   [	263912.00
			_ =	
(b) SUBTOTAL of Unitemized Independent Expenditur	es		<b>•</b>	
(a) TOTAL Independent Evpanditures				
(c) TOTAL Independent Expenditures			<b>•</b>	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		_	M = M /	D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	9 08	22 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 161 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	"M / D "D / Y "Y "Y "Y
Full Name of Payee OSCEOLA STRATEGIES LLC		☐ Memo	itom	of Public Distribution/Dissemination
Mailing Address 8 THE GREEN				08 30 2024
STE A			Amou	nt
City	State	Zip Code	<u> —</u> Г	69832.50
DOVER	DE	19901	<b>I</b>	saction ID : SE24.104
Purpose of Expenditure PRINTING/POSTAGE	<u> </u>	Category/ Type		of Disbursement or Obligation  08  27  2024
Name of Federal Candidate:		Support	Office Sough	nt: House District: 00
HARRIS, KAMALA, , ,		> Oppose		
			J	
Calendar Year-To-Date Per Election for Office Sought	, 6	8481824.31	Disbursemer 2024	nt For:
Full Name of Payee		Memo	1_	of Public Distribution/Dissemination
OSCEOLA STRATEGIES LLC		Wieme	1.011	M M / D D / Y Y Y Y
Mailing Address			L	09 03 2024
o The Green			Amou	nt
STE A	State	Zip Code		15750.00
DOVER	DE	19901	Trans	saction ID : SE24.120
Purpose of Expenditure		Catanani		of Disbursement or Obligation
PRINTING		Category/ Type		09 / D03 / Y 2024
Name of Federal Candidate:		Support	Office Sough	nt: House District:00
TRUMP, DONALD, , ,		Oppose	X Presid	
Calendar Year-To-Date		alaska da da	Disbursemer	nt For: Primary X General
Per Election for Office Sought	6	8481824.31	2024 c	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditu				85582.50
(.,				
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	M M /	27 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 162 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				O contract
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
OSCEOLA STRATEGIES LLC				09 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 8 THE GREEN				
STE A			Amo	unt
City	State	Zip Code		15750.00
DOVER	DE	19901		nsaction ID : SE24.121 of Disbursement or Obligation
Purpose of Expenditure		Category/		M = M / D = D / Y = Y = Y
PRINTING		Type	_	09 03 2024
Name of Federal Candidate:		Support	Office Sou	ght: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Presi	dent Senate State:
Calendar Year-To-Date		0.404.004.04	Disburseme	ent For: Primary X General
Per Election for Office Sought	, , ,	8481824.31	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
OSCEOLA STRATEGIES LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 8 THE GREEN				00 00 2021
STE A			Amo	unt
City	State	Zip Code		39250.00
DOVER	DE	19901	- I	nsaction ID : SE24.155 of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
PRINTING		Type	_	09 06 2024
Name of Federal Candidate:		X Support	Office Sou	ght: House District: 00
TRUMP, DONALD, , ,		Oppose	X Presi	dent Senate State:
Calendar Year-To-Date		8481824.31	Disburseme	ent For: Primary X General
Per Election for Office Sought	1	0461624.31	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. •	55000.00
			_ =	
(b) SUBTOTAL of Unitemized Independent Expenditur	es		· •	
(a) TOTAL land on an elect Form and different				
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,			M = M	/ D D / Y Y Y Y
Signature		_ Date	9 09	03 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 163 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M / D D / Y Y Y Y
Full Name of Payee OSCEOLA STRATEGIES LLC		☐ Memo	itom	of Public Distribution/Dissemination
Mailing Address 8 THE GREEN				09 06 2024
STE A			Amou	nt
City	State	Zip Code	— I	39250.00
DOVER	DE	19901	l l	saction ID : SE24.156
Purpose of Expenditure PRINTING		Category/ Type		of Disbursement or Obligation  09  06  2024
Name of Federal Candidate:		Support	Office Sough	nt: House District: 00
HARRIS, KAMALA, , ,		Support Oppose	Presid	
		Д оррозс	-	
Calendar Year-To-Date Per Election for Office Sought	, 6	8481824.31	Disbursemer 2024	nt For:
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
OSCEOLA STRATEGIES LLC				M M / D D / Y Y Y Y
Mailing Address 8 THE GREEN				09 18 2024
STE A			Amou	nt
City	State	Zip Code	<u> —</u> Г	69832.50
DOVER	DE	19901	Tran	saction ID : SE24.157 of Disbursement or Obligation
Purpose of Expenditure		Category/		
PRINTING/POSTAGE		Type	_  L	09 / 06 / 2024
Name of Federal Candidate:		Support	Office Sough	nt: House District:00
TRUMP, DONALD, , ,		Oppose	X Presid	
Calendar Year-To-Date			Disbursemer	nt For: Primary X General
Per Election for Office Sought	6	8481824.31	2024	Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures  (b) SUBTOTAL of Unitemized Independent Expenditure			· ;	109082.50
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	M M /	06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

TEMIZED INDEPENDENT EXPENDITURES				PAGE 164 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
7 tillollog i 7 to				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M / D D / Y Y Y Y
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
OSCEOLA STRATEGIES LLC			N	09 18 2024
Mailing Address 8 THE GREEN				
STE A			Amou	nt
City	State	Zip Code		69832.50
DOVER	DE	19901		action ID : SE24.158 of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		09 / 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sough	nt: House District: 00
HARRIS, KAMALA, , ,		> Oppose		
			Disbursemen	
Calendar Year-To-Date Per Election for Office Sought	, 6	8481824.31	2024	t For:  Primary  General  ther (specify) ►
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
OSCEOLA STRATEGIES LLC			N	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 8 THE GREEN				
STE A			Amou	nt
City	State	Zip Code		69832.50
DOVER	DE	19901	Trans	saction ID : SE24.141 of Disbursement or Obligation
Purpose of Expenditure		Category/	- N	09 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
PRINTING/POSTAGE		Type		00 2021
Name of Federal Candidate:		X Support	Office Sough	it: House District: 00
TRUMP, DONALD, , ,		Oppose	X Preside	ent Senate State:
Calendar Year-To-Date		0.404.004.04	Disbursemen	t For: Primary X General
Per Election for Office Sought	7	8481824.31	2024 🗌 c	ther (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures  (b) SUBTOTAL of Unitemized Independent Expenditure	es			139665.00
(c) TOTAL Independent Expenditures			<b>•</b>	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
CORED CHRIS			M = M /	D D / Y Y Y Y
GOBER, CHRIS, , ,		_ Date	9 09	06 2024

TEMIZED INDEPENDENT EXPENDITORES				PAGE 165 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed or	M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item C	Date of Public Distribution/Dissemination
OSCEOLA STRATEGIES LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 8 THE GREEN				mount
STE A				anount
City	State	Zip Code		69832.50
DOVER	DE	19901		Transaction ID : SE24.142 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		0	0450	Sought District 00
HARRIS, KAMALA, , ,		Support Oppose	Office S	Bought: House District:
		N oppose		resident Senate State:ement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought	, 6	8481824.31	2024	Other (specify)
Full Name of Payee		☐ Memo	Item C	Date of Public Distribution/Dissemination
OSCEOLA STRATEGIES LLC				09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 8 THE GREEN				and the second
STE A				mount
City	State	Zip Code		325982.00
DOVER	DE	19901		Transaction ID : SE24.172 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		V 0	0111	Paught House District 00
TRUMP, DONALD, , ,		Support Oppose	Office S	Bought. District.
		Оррозе		resident Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	2024 F	ement For: Primary General
, <u> </u>	1		L	Other (specify) ▶
(a) CURTOTAL of Itamizad Indonesiant Evacuality received			. г	205914 50
(a) SUBTOTAL of Itemized Independent Expenditures			•	395814.50
(b) SUBTOTAL of Unitemized Independent Expenditur	es		[	
.,				
(c) TOTAL Independent Expenditures			• •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
			8.6	/ D = D / Y = Y = Y
GOBER, CHRIS, , , Signature		_ Date	e 09	06 2024
Signature				

ITEMIZED INDEPENDENT EXPENDITURES				PAGE 166 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	n M = M / D = D / Y = Y = Y
Full Name of Payee OSCEOLA STRATEGIES LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 8 THE GREEN				09 25 2024
STE A				Amount
City	State	Zip Code		138665.00
DOVER	DE	19901		Transaction ID : SE24.267 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		09 18 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose		President Senate State:
Calendar Year-To-Date		29.404.924.24	Disburs	sement For: Primary X General
Per Election for Office Sought	7	8481824.31	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
OSCEOLA STRATEGIES LLC				10 11 2024
Mailing Address 8 THE GREEN				Amount
STE A				
City DOVER	State	Zip Code 19901		325982.00 Transaction ID : SE24.268
Purpose of Expenditure		0-1		Date of Disbursement or Obligation
PRINTING/POSTAGE		Category/ Type		09 / 18 / 2024
Name of Federal Candidate:		X Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X F	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disburs 2024	sement For: Primary X General
				Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			1	464647.00
(,,				7
(b) SUBTOTAL of Unitemized Independent Expenditure	res			
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		_	M	M / D D / Y Y Y Y Y
Signature		_ Date	e 09	18 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 167 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
			_	
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M - M / D - D / Y - Y - Y - Y
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
PATRIOT GRASSROOTS LLC				M 08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1256 N RANGE RIDER PLACE			Amo	ount
City	State	Zin Codo	— г	2280000.00
VAIL	AZ	Zip Code 85641	Tra	nsaction ID : SE24.107
Purpose of Expenditure	712			e of Disbursement or Obligation
CANVASSING/FIELD OPERATIONS		Category/ Type		08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sou	ght: House District:00
TRUMP, DONALD, , ,		Oppose	X Pres	ident Senate State:
Calendar Year-To-Date			Disbursem	ent For: Primary X General
Per Election for Office Sought	6	8481824.31	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
PATRIOT GRASSROOTS LLC				08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1256 N RANGE RIDER PLACE				08 25 2024
1230 N RANGE RIDER FLACE			Amo	ount
City	State	Zip Code		2280000.00
VAIL	AZ	85641		insaction ID : SE24.108 e of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type	_   _	08 27 2024
Name of Federal Candidate:		Support	Office Sou	ght: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Pres	ident Senate State:
Calendar Year-To-Date	6	8481824.31	Disbursem	ent For: Primary X General
Per Election for Office Sought	7	0401024.31	2024	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			· • [	4560000.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res		· • L	
(c) TOTAL Independent Expenditures			. $\Box$	
(b) TO TAL Independent Expenditures			• _	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		_	M M	/ D D / Y Y Y Y Y Y Y 2024
Signature		_ Date	9 08	27 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 168 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	n M " M / D " D / Y " Y " Y " Y
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
PUSH DIGITAL LLC				08 17 2024
Mailing Address 342 WEST BAY STREET				Amount
City	State	Zip Code		160680.00
CHARLESTON	sc	29401		Transaction ID : SE24.70 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y
DIGITAL MEDIA		Туре		08 19 2024
Name of Federal Candidate:		X Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disburs 2024	sement For:  Primary
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
PUSH DIGITAL LLC				08 / DTD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 342 WEST BAY STREET				A
				Amount
City	State	Zip Code		160680.00
CHARLESTON	SC	29401		Transaction ID : SE24.71 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		08 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
DIGITAL MEDIA		Туре		
Name of Federal Candidate:		Support	Office	Sought: House District:00
HARRIS, KAMALA, , ,		Oppose	X F	President Senate State:
Calendar Year-To-Date	6	8481824.31	1	sement For: Primary X General
Per Election for Office Sought	1	0.10.10.1	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				321360.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		. •	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		<b>.</b>	M	19 2024
Signature		_ Date	e 08	19 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 169 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				O
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination
PUSH DIGITAL LLC				08 21 2024
Mailing Address 342 WEST BAY STREET			Ar	nount
City	State	Zip Code	— г	147500.00
CHARLESTON	SC	29401	Tr	ransaction ID : SE24.86
Purpose of Expenditure			Da	ate of Disbursement or Obligation
DIGITAL MEDIA		Category/ Type		08 / 21 / 2024
Name of Federal Candidate:		X Support	Office So	ought: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pre	esident Senate State:
Calendar Year-To-Date	6	8481824.31	Disburse	ment For: Primary X General
Per Election for Office Sought	7	0.00.02.10.1	2024	Other (specify) ▶
Full Name of Payee PUSH DIGITAL LLC		☐ Memo	Item Da	ate of Public Distribution/Dissemination
POSH DIGITAL LLC				08 / 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 342 WEST BAY STREET			Ar	nount
				<del> </del>
CHARLESTON	State	Zip Code		147500.00 ransaction ID : SE24.87
	SC	29401		ate of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		08 / 21 / Y Y Y Y Y Y 2024
Name of Federal Candidate:		Support	Office So	ought: House District: 00
HARRIS, KAMALA, , ,		Oppose	Pre	esident Senate State:
Calendar Year-To-Date		alaska da da	Disburse	ment For: Primary X General
Per Election for Office Sought	6	8481824.31	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				295000.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es		. •	
(c) TOTAL Independent Expenditures			г	
(-,				7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,			M = M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	e 08	21 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 170 OF 220
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼  C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M = M / D = D / Y = Y = Y
Full Name of Payee PUSH DIGITAL LLC  Mailing Address 242 WEST BAY STREET		☐ Memo	Item Date	of Public Distribution/Dissemination  Op 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
342 WEST BAY STREET			Amo	
City CHARLESTON	State SC	Zip Code 29401		295000.00 nsaction ID : SE24.139
Purpose of Expenditure DIGITAL MEDIA		Category/ Type	Date	of Disbursement or Obligation  M M M O O O O O O O O O O O O O O O O
Name of Federal Candidate: HARRIS, KAMALA, , ,		Support Oppose	Office Soug	
Calendar Year-To-Date Per Election for Office Sought	6	58481824.31	Disburseme	ent For:
Full Name of Payee PUSH DIGITAL LLC  Mailing Address 342 WEST BAY STREET		☐ Memo	Item Date	of Public Distribution/Dissemination
City	State	Zip Code	Amo	unt 321360.00
CHARLESTON	SC	29401	I	nsaction ID : SE24.140 of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		M 09 / D 05 / Y 2024 Y
Name of Federal Candidate: HARRIS, KAMALA, , ,		Support Oppose	Office Soug	
Calendar Year-To-Date Per Election for Office Sought	6	68481824.31	Disburseme	ent For:
(a) SUBTOTAL of Itemized Independent Expenditures			• <u></u>	616360.00
(b) SUBTOTAL of Unitemized Independent Expenditure	'es		<b>•</b>	
(c) TOTAL Independent Expenditures			<u> </u>	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		_ Date	9 09	05 / 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 171 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				C Good Solid
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Da	te of Public Distribution/Dissemination
PUSH DIGITAL LLC				09 04 7 2024
Mailing Address 342 WEST BAY STREET			Am	nount
City	State	Zip Code	— Г	127000.00
CHARLESTON	SC	29401		ansaction ID : SE24.148 te of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
DIGITAL MEDIA		Type		09 06 2024
Name of Federal Candidate:		X Support	Office So	ught: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pre	
Calendar Year-To-Date Per Election for Office Sought	, 6	8481824.31	Disburser 2024	ment For: ☐ Primary ☐ General  Other (specify) ▶
Full Name of Payee		☐ Memo	Item Da	te of Public Distribution/Dissemination
PUSH DIGITAL LLC				09 / 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 342 WEST BAY STREET				
			Am	nount
City	State	Zip Code		317712.00
CHARLESTON	SC	29401		ransaction ID : SE24.263 te of Disbursement or Obligation
Purpose of Expenditure		Category/		09 18 2024
DIGITAL MEDIA		Туре		09 10 2024
Name of Federal Candidate:		Support	Office So	ught: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Pre	sident Senate State:
Calendar Year-To-Date	6	8481824.31	Disburser	ment For: Primary X General
Per Election for Office Sought	7	0401024.31	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			· • _	444712.00
(b) SUBTOTAL of Unitemized Independent Expenditur	es		• •	
(c) TOTAL Independent Expenditures				
				7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		5 .	M = M	06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	e 09	2024

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TEMIZED INDEPENDENT EXPENDITURES				PAGE 172 OF 220
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed or	1
Full Name of Payee		☐ Memo	Item [	Date of Public Distribution/Dissemination
PUSH DIGITAL LLC				09 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 342 WEST BAY STREET				Amount
			/	Amount
City	State	Zip Code		346000.00
CHARLESTON	sc	29401		Transaction ID : SE24.264 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		09 18 2024
Name of Federal Candidate:		Support	Office S	Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose		resident Senate State:
Calendar Year-To-Date			Disburs	ement For: Primary X General
Per Election for Office Sought	6	8481824.31	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item [	Date of Public Distribution/Dissemination
PUSH DIGITAL LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 342 WEST BAY STREET				
				Amount
City	State	Zip Code		63500.00
CHARLESTON	sc	29401		Transaction ID : SE24.265 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y
DIGITAL MEDIA		Type		09 18 2024
Name of Federal Candidate:		X Support	Office S	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X P	resident Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disburs 2024	ement For:
				, , ,
(a) SUBTOTAL of Itemized Independent Expenditures			•	409500.00
(b) SUBTOTAL of Unitemized Independent Expenditure	'es		•	
(c) TOTAL Independent Expenditures			• [	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	M = N	18 2024

Signature

SCHEDULE E (FEC FORM 3X) ITEMIZED INDEPENDENT EXPENDITURES				PAGE 173 OF 220
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on Man / Dad / Yayayay
Full Name of Payee PUSH DIGITAL LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 342 WEST BAY STREET				Amount
City	State	Zip Code		63500.00
CHARLESTON	SC	29401		Transaction ID : SE24.266 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	Sought: House District:00
HARRIS, KAMALA, , ,		Support Oppose		President Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disbui 2024	rsement For:  Primary
Full Name of Payee RACONTEUR MEDIA		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address PO BOX 26511				Amount
City AUSTIN	State TX	Zip Code 78755		140000.00  Transaction ID : SE24.17  Date of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		07 03 7 2024
Name of Federal Candidate: TRUMP, DONALD, , ,		Support Oppose		Sought: House District: 00  President Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31		rsement For: ☐ Primary ☐ General ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			• •	203500.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	e 09	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

Date

TEMIZED INDEPENDENT EXPENDITURES				PAGE 174 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
				07 D 03 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 26511				Amount
City	State	Zip Code		140000.00
AUSTIN	TX	78755		Transaction ID : SE24.18 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		07 03 7 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
BIDEN, JOE, , ,		Oppose		President Senate State:
Calendar Year-To-Date				rsement For: Primary X General
Per Election for Office Sought		68481824.31	2024	Other (specify)
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
RACONTEUR MEDIA		Weille	itom	M M / D D / Y Y Y Y
Mailing Address PO POV 26511				07 03 2024
PO BOX 26511				Amount
City	State	Zip Code		240000.00
AUSTIN	TX	78755		Transaction ID : SE24.19 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		07 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
TEXT SERVICE		Type		07 03 2024
Name of Federal Candidate:		X Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date		2040400404	Disbu	rsement For: Primary X General
Per Election for Office Sought	7	8481824.31	2024	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures				380000.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
CODED CHDIS			M	M / D D / Y Y Y Y Y
GOBER, CHRIS, , , Signature		_ Date	9 07	7 05 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 175 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				C
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M   M   / D   D   / Y   Y   Y   Y
Full Name of Payee		Memo	Item Date	e of Public Distribution/Dissemination
RACONTEUR MEDIA				07 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 26511			Amo	ount
City	State	Zip Code	$ \Gamma$	1241935.48
AUSTIN	TX	78755		nsaction ID : SE24.20 e of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
DIGITAL MEDIA		Type	_	07 05 2024
Name of Federal Candidate:		Support	Office Sou	ght: House District:00
TRUMP, DONALD, , ,		Oppose	X Presi	dent Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disburseme	
			<u> </u>	Other (specify) ▶
Full Name of Payee RACONTEUR MEDIA		☐ Memo	Item Date	e of Public Distribution/Dissemination
Mailing Address				07
PO BOX 26511			Amo	ount
City	State	Zip Code	— Г	62500.00
AUSTIN	TX	78755		nsaction ID : SE24.21 e of Disbursement or Obligation
Purpose of Expenditure	1	Category/		M M / D D / Y Y Y Y
MESSAGE PHONE CALLS		Type		07 05 2024
Name of Federal Candidate:		X Support	Office Sou	ght: House District:00
TRUMP, DONALD, , ,		Oppose	X Presi	dent Senate State:
Calendar Year-To-Date	6	8481824.31	Disburseme	ent For: Primary King General
Per Election for Office Sought	7	0401024.31	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			· <b>•</b> [ ]	1304435.48
(b) SUBTOTAL of Unitemized Independent Expenditur	es		· •	
(c) TOTAL Independent Expenditures				
(c) 10 112 masponasin Experiancies			• _	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		_	M = M	/ D D / Y Y Y Y Y
Signature		_ Date	9 07	05 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 176 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				C coorseit
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Da	te of Public Distribution/Dissemination
RACONTEUR MEDIA				07 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 26511			Am	nount
City	State	Zip Code	— Г	62500.00
AUSTIN	TX	78755		ansaction ID : SE24.22 te of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
MESSAGE PHONE CALLS		Type		07 05 2024
Name of Federal Candidate:		Support	Office So	ught: House District: 00
BIDEN, JOE, , ,		Oppose	X Pre	sident Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disburser 2024	ment For:
Full Name of Payee		Memo	Itom Da	te of Public Distribution/Dissemination
RACONTEUR MEDIA		□ Memo	item bu	M M / D D / Y Y Y Y
Mailing Address DO DOX 26544				07 15 2024
PO BOX 26511			Am	nount
City	State	Zip Code	— Г	1241935.48
AUSTIN	TX	78755		ransaction ID : SE24.25 te of Disbursement or Obligation
Purpose of Expenditure		Category/		07 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
DIGITAL MEDIA		Type		07 13 2024
Name of Federal Candidate:		X Support	Office So	ught: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pre	sident Senate State:
Calendar Year-To-Date	6	8481824.31	Disburser	ment For: Primary X General
Per Election for Office Sought	<u> </u>	0401024.51	2024	Other (specify) ▶
			_	
(a) SUBTOTAL of Itemized Independent Expenditures			· • _	1304435.48
(b) SUBTOTAL of Unitemized Independent Expenditur	es		• •	
(c) TOTAL Independent Expenditures				
(-,				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		<b>-</b> .	M M M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	9 07	05 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 177 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee RACONTEUR MEDIA		☐ Memo	Item D	Date of Public Distribution/Dissemination
Mailing Address PO BOX 26511			A	mount
City	State	Zip Code		157234.70
AUSTIN	TX	78755		ransaction ID : SE24.26 Date of Disbursement or Obligation
Purpose of Expenditure  MESSAGE PHONE CALLS		Category/ Type		07 15 / Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office S	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose		resident Senate State:
Calendar Year-To-Date Per Election for Office Sought		68481824.31	Disburse 2024	ement For: ☐ Primary ☐ General  Other (specify) ▶
Full Name of Payee RACONTEUR MEDIA		☐ Memo	Item D	Date of Public Distribution/Dissemination
Mailing Address PO BOX 26511			A	umount
City	State	Zip Code		157234.70
AUSTIN	TX	78755	I	Transaction ID : SE24.27 Date of Disbursement or Obligation
Purpose of Expenditure  MESSAGE PHONE CALLS		Category/ Type		07 15 7 2024
Name of Federal Candidate: BIDEN, JOE, , ,		Support Oppose	Office S	Sought: House District: 00 resident Senate State:
		N obbess		
Calendar Year-To-Date Per Election for Office Sought	(	68481824.31	Disburse 2024	ement For:  Primary
(a) SUBTOTAL of Itemized Independent Expenditures	;		• [	314469.40
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
COPED CUDIS			M = M	/ D D / Y Y Y Y Y
GOBER, CHRIS, , ,		_ Date	e 07	17 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 178 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	n M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item I	Date of Public Distribution/Dissemination
RACONTEUR MEDIA				07 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 26511			,	Amount
City	State	Zip Code		190292.68
AUSTIN	TX	78755		Transaction ID : SE24.28 Date of Disbursement or Obligation
Purpose of Expenditure	l	Category/		M M / D D / Y Y Y Y
COLLATERAL MATERIALS- SHIRTS/HATS/SIGNS	3	Type		07 15 2024
Name of Federal Candidate:		X Support	Office \$	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X F	President Senate State:
Calendar Year-To-Date			Disburs	sement For: Primary X General
Per Election for Office Sought	6	8481824.31	2024	Other (specify) ►
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
RACONTEUR MEDIA				07 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO POV 26511				07 17 2024
PO BOX 26511			,	Amount
City	State	Zip Code		344000.00
AUSTIN	TX	78755		Transaction ID : SE24.31 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		07 19 2024
DIGITAL MEDIA		Type		07 19 2024
Name of Federal Candidate:		Support	Office S	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	XF	President Senate State:
Calendar Year-To-Date		0.10.100.1.01	Disburs	sement For: Primary X General
Per Election for Office Sought	6	8481824.31	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				534292.68
				7
(b) SUBTOTAL of Unitemized Independent Expenditure	œs			
				, , , , , , , , , , , , , , , , , , , ,
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
CODED CHDIS			M = N	/ / D D / Y P Y P Y
GOBER, CHRIS, , , Signature		_ Date	e 07	17 2024

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ITEMIZED INDEPENDENT EXPENDITURES				PAGE 179 OF 220
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
, ,				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee RED MAVERICK MEDIA LLC		☐ Memo	Item D	Date of Public Distribution/Dissemination
Mailing Address 1426 N 3RD STREET				08 19 2024
STE 310			A	mount
City	State	Zip Code		205064.50
HARRISBURG	PA	17102		ransaction ID : SE24.50 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		08 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office S	Sought: House District:00
TRUMP, DONALD, , ,		Oppose		resident Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disburse 2024	ement For: ☐ Primary X General  Other (specify) ▶
Full Name of Payee RED MAVERICK MEDIA LLC		☐ Memo	Item D	Date of Public Distribution/Dissemination
				08 / DDD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1426 N 3RD STREET			A	mount
STE 310	Ctata	Zin Code		205064.50
City HARRISBURG	State PA	Zip Code 17102		205064.50  Transaction ID : SE24.51 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y Y
PRINTING/POSTAGE		Type		08 13 2024
Name of Federal Candidate:		Support	Office S	Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose	X PI	resident Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disburse 2024	ement For: Primary X General  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			•	410129.00
(b) SUBTOTAL of Unitemized Independent Expenditure	'es		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Dota	M = M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

TIEMIZED INDEFENDENT EXPENDITORES				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M / D D / Y Y Y Y
Full Name of Payee RED MAVERICK MEDIA LLC		☐ Memo	М	Public Distribution/Dissemination
Mailing Address 1426 N 3RD STREET			Amoun	لىنىا لىا لت
STE 310				
City HARRISBURG	State PA	Zip Code 17102		60566.00  Inction ID: SE24.52  If Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type	M	08 / 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought	: House District: 00
TRUMP, DONALD, , ,		Oppose	X Preside	nt Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disbursement 2024 Ott	For:
Full Name of Payee		☐ Memo	Item Date of	Public Distribution/Dissemination
RED MAVERICK MEDIA LLC				08 / 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1426 N 3RD STREET STE 310			Amoun	t
City HARRISBURG	State PA	Zip Code 17102		60566.00  action ID : SE24.53  f Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type	М	08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought	: House District:00
HARRIS, KAMALA, , ,		Oppose		
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disbursement 2024 Ott	For: Primary ⊠ General
(a) SUBTOTAL of Itemized Independent Expenditures			· [	121132.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		· [	
(c) TOTAL Independent Expenditures			· [	7
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized	•		•
GOBER, CHRIS, , ,		5 :	M M /	14 2024
Signature		_ Date	9 08	17 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 181 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item D	ate of Public Distribution/Dissemination
RED MAVERICK MEDIA LLC				08 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1426 N 3RD STREET				mount
STE 310				mount
City	State	Zip Code		205064.50
HARRISBURG	PA	17102	I .	ransaction ID : SE24.78 ate of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		08 21 Y 2024
		Турс		
Name of Federal Candidate:		X Support	Office Se	ought: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pr	esident Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disburse 2024	ement For: ☐ Primary ☐ General ☐ Other (specify) ▶
Full Name of Payee		☐ Memo	Item D	ate of Public Distribution/Dissemination
RED MAVERICK MEDIA LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1426 N 3RD STREET				
STE 310			A	mount
City	State	Zip Code		205064.50
HARRISBURG	PA	17102	<b>I</b>	ransaction ID : SE24.79 ate of Disbursement or Obligation
Purpose of Expenditure	•	Category/		M M / D D / Y Y Y Y
PRINTING/POSTAGE		Type		08 21 2024
Name of Federal Candidate:		Support	Office S	ought: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Pr	esident Senate State:
Calendar Year-To-Date	6	8481824.31		ement For: Primary General
Per Election for Office Sought	7	0401024.31	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				410129.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es		. •	
(c) TOTAL Independent Expenditures				
(c) TOTAL independent Expenditures				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
GOBER, CHRIS, , ,		D-1-	e 08	21 2024
Signature		_ Date	9 00	21 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 182 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed or	M = M / D = D / Y = Y = Y
Full Name of Payee RED MAVERICK MEDIA LLC		Memo	Item [	Date of Public Distribution/Dissemination
Mailian Adalasa				09 03 7 2024
Mailing Address 1426 N 3RD STREET			A	Amount
STE 310	State	Zip Code		205064.50
HARRISBURG	PA	17102		Fransaction ID : SE24.105 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		08 / 27 / 2024
Name of Federal Candidate:		Support	Office S	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose		resident Senate State:
Calendar Year-To-Date Per Election for Office Sought	Calendar Year-To-Date Disb			ement For: Primary X General
	,			Other (specify)
Full Name of Payee RED MAVERICK MEDIA LLC		∐ Memo	Item L	Date of Public Distribution/Dissemination  M M M / D J / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1426 N 3RD STREET				
STE 310			A	Amount
City	State	Zip Code		205064.50
HARRISBURG	PA	17102		Transaction ID : SE24.106 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		08 / 27 / Y 2024
Name of Federal Candidate:		Support	Office S	Sought: House District:00
HARRIS, KAMALA, , ,		Oppose		resident Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disburs	ement For: Primary X General
Tot Election for Office Godgitt	7 1 1			Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			• [	410129.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,			M - M	/ D D / Y Y Y Y
Signature		_ Date	9 08	27 2024

	PAGE 183 OF 220 FOR LINE 24 OF FORM 3X
	FEC IDENTIFICATION NUMBER ▼
	C C00879510
t filed	on M = M / D = D / Y = Y = Y
tem	Date of Public Distribution/Dissemination
	M 09
	Amount
	410128.98
	Transaction ID : SE24.122 Date of Disbursement or Obligation
	09 03 7 2024
Office	e Sought: House District: 00
X	President Senate State:
	ursement For: Primary X General
2024	Other (specify) ▶
tem	Date of Public Distribution/Dissemination
	09 / 13 / 2024
	Amount
	413026.00
	Transaction ID : SE24.163  Date of Disbursement or Obligation
	09
Office	e Sought: House District: 00
X	President Senate State:
Disbu 2024	ursement For: Primary X General
	Other (specify) -
	823154.98

NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee RED MAVERICK MEDIA LLC		☐ Memo	Item Da	te of Public Distribution/Dissemination
Mailing Address 1426 N 3RD STREET				09 / 09 / 2024
STE 310			All	ioun
City	State	Zip Code		410128.98
HARRISBURG	PA	17102		ansaction ID : SE24.122 te of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		09 / 03 / 2024
Name of Federal Candidate:		Support	Office So	ught: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pre	sident Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disburser	
Tot Elocion for Office Godgite	1			Other (specify) ►
Full Name of Payee  RED MAVERICK MEDIA LLC		☐ Memo	Item Da	te of Public Distribution/Dissemination
14.35				09 13 Y Y Y Y Y Y Y Y
Mailing Address 1426 N 3RD STREET			Am	nount
STE 310	10	T 0 1	— г	442026.00
City HARRISBURG	State PA	Zip Code 17102	I	413026.00  ansaction ID : SE24.163 te of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		09 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		V Support	Office Co	ught: Diotriot: 00
TRUMP, DONALD, , ,		Support Oppose	Office So	ugni. House District.
Onlandar Ware To Date			Disburser	
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	2024	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			<b>.</b>	823154.98
(b) SUBTOTAL of Unitemized Independent Expenditure	es		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		_ Date	e 09	03 / 2024
Signature				
				FEC Schedule E (Form 3Y) Rev. 05/2016

TIENIZED INDEFENDENT EXPENDITORES				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M / D D / Y Y Y Y
Full Name of Payee RED MAVERICK MEDIA LLC		☐ Memo	M	of Public Distribution/Dissemination
Mailing Address 1426 N 3RD STREET			Amour	10 01 2024
STE 310			Allioui	
City	State	Zip Code		181017.00
HARRISBURG	PA	17102		action ID : SE24.211  f Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type	M	09 / 16 / Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sough	t: House District:00
TRUMP, DONALD, , ,		Oppose	X Preside	
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disbursement 2024 O	t For: Primary X General ther (specify) ▶
Full Name of Payee		Memo	Item Date of	of Public Distribution/Dissemination
RED MAVERICK MEDIA LLC				10 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1426 N 3RD STREET				
STE 310			Amour	nt
City	State	Zip Code		181017.00
HARRISBURG	PA	17102		action ID : SE24.212 of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type	M	09 / 16 / Y Y Y Y
Name of Federal Candidate:		Current	045 0	t: Nausa Diatriat: 00
HARRIS, KAMALA, , ,		Support Oppose	Office Sough	t. House District.
		X Oppose	X Preside	
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disbursemen 2024 O	t For:
(a) SUBTOTAL of Itemized Independent Expenditures	i		<b>.</b>	362034.00
(h) CURTOTAL of United raised Index and art Fun and its				
(b) SUBTOTAL of Unitemized Independent Expenditu	165		<b>-</b>	
(c) TOTAL Independent Expenditures			<b>•</b>	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		• •
GOBER, CHRIS, , ,		Date	M M / / 09	16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	, 00	2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 185 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Dat	te of Public Distribution/Dissemination
RED MAVERICK MEDIA LLC				09 / 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1426 N 3RD STREET			Am	ount
STE 310				<del> </del>
City	State	Zip Code	Ļ	60566.00
HARRISBURG	PA	17102		ansaction ID : SE24.228 te of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y Y
PRINTING		Type		09 17 2024
Name of Federal Candidate:		X Support	Office Sou	ught: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pres	sident Senate State:
Calendar Year-To-Date		20.404.00.4.04	Disbursen	nent For: Primary X General
Per Election for Office Sought	, , ,	8481824.31	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Dat	te of Public Distribution/Dissemination
RED MAVERICK MEDIA LLC				09 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1426 N 3RD STREET				00 10 2024
STE 310			Am	ount
City	State	Zip Code		60566.00
HARRISBURG	PA	17102		ansaction ID : SE24.229 te of Disbursement or Obligation
Purpose of Expenditure	1	Category/		M M / D D / Y Y Y Y
PRINTING		Type	_   _	09 17 2024
Name of Federal Candidate:		Support	Office Sou	ught: House District:00
HARRIS, KAMALA, , ,		Oppose	X Pres	sident Senate State:
Calendar Year-To-Date		0.10.100.1.01	Disbursen	nent For: Primary X General
Per Election for Office Sought	6	8481824.31	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				121132.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es		. ▶	
(c) TOTAL Independent Expenditures			· • _	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		_	M = M	/ D D / Y Y Y Y Y
Signature		_ Date	9 09	17 2024

#### SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES PAGE 186 OF 220 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ America PAC C00879510 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee RED MAVERICK MEDIA LLC 09 2024 Mailing Address 1426 N 3RD STREET Amount STE 310 City State Zip Code 194981.00 **HARRISBURG** PΑ 17102 Transaction ID: SE24.366 Date of Disbursement or Obligation Purpose of Expenditure Category/ PRINTING/POSTAGE 09 2024 Type Name of Federal Candidate: 00 X Support Office Sought: House District: TRUMP, DONALD, , , Oppose President Senate State: Primary Disbursement For: X General Calendar Year-To-Date 68481824.31 2024 Per Election for Office Sought Other (specify) ▶ Date of Public Distribution/Dissemination Full Name of Payee Memo Item RED MAVERICK MEDIA LLC 2024 09 10 Mailing Address 1426 N 3RD STREET Amount **STE 310** 194981.00 City State Zip Code **HARRISBURG** Transaction ID: SE24.367 PΑ 17102 Date of Disbursement or Obligation Purpose of Expenditure Category/ 2024 26 PRINTING/POSTAGE Type Name of Federal Candidate: 00 Support Office Sought: House District: HARRIS, KAMALA, , , X President Oppose Senate State: X General Disbursement For: Primary Calendar Year-To-Date 68481824.31 2024 Per Election for Office Sought Other (specify) ▶ 389962.00 (a) SUBTOTAL of Itemized Independent Expenditures ..... (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. GOBER, CHRIS, , , 2024 26 09 Date Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 187 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M M / D D / Y Y Y Y
Full Name of Payee SEPTEMBER GROUP LLC		☐ Memo	Item Dat	e of Public Distribution/Dissemination
Mailing Address 5383 SOUTH 900 EAST			Amo	ount
STE 202	1 -			
City SALT LAKE CITY	State UT	Zip Code 84117		nsaction ID : SE24.64 e of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		08 / 05 / 2024
Name of Federal Candidate:			Office Sou	ight: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pres	
Calendar Year-To-Date Per Election for Office Sought	, 6	8481824.31	Disbursem	ent For:
Full Name of Payee SEPTEMBER GROUP LLC		☐ Memo	Item Dat	e of Public Distribution/Dissemination
Mailing Address 5383 SOUTH 900 EAST STE 202			Ame	punt
City SALT LAKE CITY	State	Zip Code 84117		1349719.42 ansaction ID : SE24.65 e of Disbursement or Obligation
Purpose of Expenditure  CANVASSING/FIELD OPERATIONS		Category/ Type	Date	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sou	ight: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Pres	sident Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disbursem	ent For:
(a) SUBTOTAL of Itemized Independent Expenditures			•	2699438.84
(b) SUBTOTAL of Unitemized Independent Expenditu	res		<b>•</b>	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	M = M   08	/ 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

TIENIZED INDEFENDENT EXFENDITORES				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M / D D / Y Y Y Y
Full Name of Payee THE BAKER GROUP LLC		Memo		of Public Distribution/Dissemination
Mailing Address 446 WILSON DIKE CIRCLE				08 / 14 / 2024
416 WILSON PIKE CIRCLE			Amou	nt
City	State	Zip Code		74925.00
BRENTWOOD	TN	37027		action ID : SE24.40  of Disbursement or Obligation
Purpose of Expenditure		Category/	N.	1 M / D D / Y Y Y
PRINTING		Туре	<u> </u>	08 12 2024
Name of Federal Candidate:		X Support	Office Sough	it: House District:00
TRUMP, DONALD, , ,		Oppose	X Preside	
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disbursemer 2024	t For:
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
THE BAKER GROUP LLC				08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 416 WILSON PIKE CIRCLE			-   -	
			Amou	nt
City	State	Zip Code	— I I .	74925.00
BRENTWOOD	TN	37027	I	saction ID : SE24.41 of Disbursement or Obligation
Purpose of Expenditure		Category/		M
PRINTING		Type	<u> </u>	08 12 2024
Name of Federal Candidate:		Support	Office Sough	it: House District:00
HARRIS, KAMALA, , ,		Oppose	X Preside	ent Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disbursemer 2024	
ů –	7		C	ther (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				149850.00
				7
(b) SUBTOTAL of Unitemized Independent Expenditu	res		· • [	
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized	•		•
GOBER, CHRIS, , ,		Data	e 08	14 2024
Signature		_ Date	, 00	2027

TEMIZED INDEPENDENT EXPENDITURES				PAGE 189 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M M / D D / Y Y Y Y
Full Name of Payee THE BAKER GROUP LLC		☐ Memo	Item Da	ate of Public Distribution/Dissemination
Mailing Address 416 WILSON PIKE CIRCLE			Ar	nount
City	State	Zip Code		268448.70
BRENTWOOD	TN	37027		ansaction ID : SE24.54 tte of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		08 / 13 / 2024
Name of Federal Candidate:		Support	Office Sc	pught: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pre	_
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disburse 2024	ment For:
Full Name of Payee THE BAKER GROUP LLC		☐ Memo	Item Da	ate of Public Distribution/Dissemination
Mailing Address 416 WILSON PIKE CIRCLE			Ar	08 15 2024 nount
City	State	Zip Code	— г	268448.70
BRENTWOOD	TN	37027		ransaction ID : SE24.55 ate of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
PRINTING/POSTAGE		Туре	$\perp$	08 13 2024
Name of Federal Candidate:		Support	Office Sc	ought: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Pre	esident Senate State:
Calendar Year-To-Date Per Election for Office Sought	, , 6	8481824.31	Disburse 2024	ment For:
(a) SUBTOTAL of Itemized Independent Expenditures				536897.40
(b) SUBTOTAL of Unitemized Independent Expenditur	'es		<b>•</b> _	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GODED GUDYS			M = M	/ D D / Y Y Y Y
GOBER, CHRIS, , ,		_ Date	. 08	14 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 190 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	/ M = M / D = D / Y = Y = Y
Full Name of Payee THE BAKER GROUP LLC		☐ Memo	Item Date	of Public Distribution/Dissemination
Mailing Address			L	M 08
416 WILSON PIKE CIRCLE			Amou	unt
City	State	Zip Code		15175.00
BRENTWOOD	TN	37027		saction ID : SE24.56 of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		08 / 14 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Soug	ht: House District: 00
TRUMP, DONALD, , ,		Oppose		
Calendar Year-To-Date			Disburseme	
Per Election for Office Sought	6	8481824.31	2024	Other (specify)
Full Name of Payee		Memo		of Public Distribution/Dissemination
THE BAKER GROUP LLC			r	M M / D D / Y Y Y
Mailing Address 416 WILSON PIKE CIRCLE				08 16 2024
416 WILSON PIRE CIRCLE			Amou	unt
City	State	Zip Code	$-\Gamma$	15175.00
BRENTWOOD	TN	37027	Tran	nsaction ID : SE24.57 of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
PRINTING		Type	_     L	08 14 2024
Name of Federal Candidate:		Support	Office Soug	ht: House District:00
HARRIS, KAMALA, , ,		Oppose	X Presid	
Calendar Year-To-Date		alaska skarin	Disburseme	nt For: Primary X General
Per Election for Office Sought	6	8481824.31	2024	Other (specify)
•				
(a) SUBTOTAL of Itemized Independent Expenditures			· • [	30350.00
(h) CURTOTAL of Unitermized Independent Expanditure	***			
(b) SUBTOTAL of Unitemized Independent Expenditur	es		•	
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
GOBER, CHRIS, , ,		Date		14 2024

PAGE 191 OF 220 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ America PAC C00879510 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee THE BAKER GROUP LLC 23 2024 Mailing Address 416 WILSON PIKE CIRCLE Amount City State Zip Code 268448.70 **BRENTWOOD** TN 37027 Transaction ID: SE24.82 Date of Disbursement or Obligation Purpose of Expenditure Category/ PRINTING/POSTAGE 08 2024 Type Name of Federal Candidate: 00 X Support Office Sought: House District: TRUMP, DONALD, , , Oppose President Senate State: Primary Disbursement For: X General Calendar Year-To-Date 68481824.31 2024 Per Election for Office Sought Other (specify) ▶ Date of Public Distribution/Dissemination Full Name of Payee Memo Item THE BAKER GROUP LLC 2024 23 08 Mailing Address 416 WILSON PIKE CIRCLE Amount 268448.70 City State Zip Code **BRENTWOOD** Transaction ID: SE24.83 TN 37027 Date of Disbursement or Obligation Purpose of Expenditure Category/ 2024 PRINTING/POSTAGE Type Name of Federal Candidate: Support Office Sought: House District: HARRIS, KAMALA, , , X President Oppose Senate State: X General Disbursement For: Primary Calendar Year-To-Date 68481824.31 2024 Per Election for Office Sought Other (specify) ▶ 536897.40 (a) SUBTOTAL of Itemized Independent Expenditures ..... (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. GOBER, CHRIS, , , 2024 21 80 Date Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 192 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee THE BAKER GROUP LLC		☐ Memo	Item Date	of Public Distribution/Dissemination
Mailing Address 416 WILSON PIKE CIRCLE				08 / 29 / 2024
			Amo	unt
City	State	Zip Code		443077.70
BRENTWOOD	TN	37027	<b>I</b>	nsaction ID : SE24.113 of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		08 / 28 / 2024
Name of Federal Candidate:		Support	Office Soug	ght: House District: 00
TRUMP, DONALD, , ,		Oppose	X Presi	
Calendar Year-To-Date			Disburseme	
Per Election for Office Sought	6	88481824.31	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	1_	of Public Distribution/Dissemination
THE BAKER GROUP LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 416 WILSON PIKE CIRCLE				06 29 2024
THE WILDOW INC DINOLE			Amo	unt
City	State	Zip Code		443077.70
BRENTWOOD	TN	37027	Tra	nsaction ID : SE24.114 of Disbursement or Obligation
Purpose of Expenditure		Category/	Date	M M / D D / Y Y Y Y
PRINTING/POSTAGE		Type	_	08 28 2024
Name of Federal Candidate:		Support	Office Soug	ght: House District:00
HARRIS, KAMALA, , ,		Oppose	X Presi	dent Senate State:
Calendar Year-To-Date		212122121	Disburseme	ent For: Primary X General
Per Election for Office Sought	7	8481824.31	2024	Other (specify) ▶
•				
(a) SUBTOTAL of Itemized Independent Expenditures			<b>→</b> []	886155.40
(b) SUBTOTAL of Unitemized Independent Expenditur	es		· <b>-</b>	
(a) TOTAL lader and early Furner disturbs				
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
GOBER, CHRIS, , ,		Date	M M M	28 2024

 $GOBER,\ CHRIS,\ ,\ ,$ 

Signature

SCHEDULE E (FEC Form 3X) TEMIZED INDEPENDENT EXPENDITURES				PAGE 193 OF 220
NAME OF COMMITTEE (I. F. II)				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee THE BAKER GROUP LLC		☐ Memo	Item D	mate of Public Distribution/Dissemination
Mailing Address 416 WILSON PIKE CIRCLE			A	09 16 2024 mount
City	State	Zip Code	r	268448.70
BRENTWOOD	TN	37027		ransaction ID : SE24.149 late of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office S	ought: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pr	resident Senate State:
Calendar Year-To-Date Per Election for Office Sought		68481824.31	Disburse	ement For: Primary General
Full Marsa of Davis				Other (specify)
Full Name of Payee THE BAKER GROUP LLC		Memo	item D	late of Public Distribution/Dissemination
Mailing Address 416 WILSON PIKE CIRCLE			A	mount
City	State	Zip Code		268448.70
BRENTWOOD	TN	37027		Transaction ID : SE24.150 late of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		09
Name of Federal Candidate:		Support	Office S	ought: House District: 00
HARRIS, KAMALA, , ,		X Oppose	X Pr	resident Senate State:
Calendar Year-To-Date Per Election for Office Sought	7	68481824.31	Disburse 2024	ement For:
(a) SUBTOTAL of Itemized Independent Expenditures			•	536897.40
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			

2024

06

09

Date

PAGE 194 OF 220 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ America PAC C00879510 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee THE BAKER GROUP LLC 23 2024 Mailing Address 416 WILSON PIKE CIRCLE Amount City State Zip Code 268448.70 **BRENTWOOD** TN 37027 Transaction ID: SE24.151 Date of Disbursement or Obligation Purpose of Expenditure Category/ PRINTING/POSTAGE 06 2024 Type Name of Federal Candidate: 00 X Support Office Sought: House District: TRUMP, DONALD, , , Oppose President Senate State: Primary Disbursement For: X General Calendar Year-To-Date 68481824.31 2024 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Memo Item THE BAKER GROUP LLC 2024 23 Mailing Address 416 WILSON PIKE CIRCLE Amount 268448.70 City State Zip Code **BRENTWOOD** Transaction ID: SE24.152 TN 37027 Date of Disbursement or Obligation Purpose of Expenditure Category/ 2024 PRINTING/POSTAGE Type Name of Federal Candidate: Support Office Sought: House District: HARRIS, KAMALA, , , X President Oppose Senate State: X General Disbursement For: Primary Calendar Year-To-Date 68481824.31 2024 Per Election for Office Sought Other (specify) ▶ 536897.40 (a) SUBTOTAL of Itemized Independent Expenditures ..... (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. GOBER, CHRIS, , , 2024 06 09 Date Signature

SOUTH OF THE STATE				
TEMIZED INDEPENDENT EXPENDITURES				PAGE 195 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y = Y
Full Name of Payee		☐ Memo	Item Da	te of Public Distribution/Dissemination
THE BAKER GROUP LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 416 WILSON PIKE CIRCLE				
			Am	nount
City	State	Zip Code		147853.50
BRENTWOOD	TN	37027	<b>I</b>	ansaction ID : SE24.168 te of Disbursement or Obligation
Purpose of Expenditure		Category/		M = M / D = D / Y = Y = Y
PRINTING/POSTAGE		Type		09 11 2024
Name of Federal Candidate:		Support	Office So	ught: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pre	esident Senate State:
Calendar Year-To-Date			Disbursen	
Per Election for Office Sought	6	88481824.31	2024	Other (specify) ▶
Full Name of Payee		Memo	Item Da	tte of Public Distribution/Dissemination
THE BAKER GROUP LLC				09 16 7 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
Mailing Address 440 W/II CON DIVE CIPCLE				09 16 2024
416 WILSON PIKE CIRCLE			Am	nount
City	State	Zip Code	-	147853.50
BRENTWOOD	TN	37027	<b>I</b>	ansaction ID : SE24.169
Purpose of Expenditure		Category/	Da	te of Disbursement or Obligation
PRINTING/POSTAGE		Type		09 11 2024
Name of Federal Candidate:		Support	Office So	ught: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Pre	
Calendar Year-To-Date			Disbursen	
Per Election for Office Sought	6	88481824.31	2024	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	i		[	295707.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res			
(c) TOTAL Independent Expenditures			. •	
				, , , , , , , , , , , , , , , , , , , ,
Under penalty of perjury I certify that the independe	ent expenditures	reported herein were	not made	in cooperation, consultation, or concert
with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
party committee of its	agon.			
GOBER, CHRIS, , ,			M = M	/ D D / Y Y Y Y Y
OUDLIN, CHIND, , ,		_ Date	e 09	11 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 196 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M M / D D / Y Y Y Y Y
Full Name of Payee THE BAKER GROUP LLC  Mailing Address 446 WILLSON DIKE CIPCLE		☐ Memo	Item Date	of Public Distribution/Dissemination
416 WILSON PIKE CIRCLE			Amou	unt
City	State	Zip Code		147853.50
BRENTWOOD	TN	37027		saction ID : SE24.170 of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Soug	ht: House District: 00
TRUMP, DONALD, , ,		Oppose	X Presid	
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disburseme 2024	nt For:
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
THE BAKER GROUP LLC		_		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 416 WILSON PIKE CIRCLE			Amou	unt
City	State	Zip Code	$-\Gamma$	147853.50
BRENTWOOD	TN	37027		saction ID : SE24.171 of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		M 09 / D 11 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Soug	ht: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Presid	
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disburseme 2024	nt For:
(a) SUBTOTAL of Itemized Independent Expenditures			. [	295707.00
(b) SUBTOTAL of Unitemized Independent Expenditur	es		<b>•</b>	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		_ Date	M M /	11 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 197 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed or	M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item C	Date of Public Distribution/Dissemination
THE BAKER GROUP LLC				09 17 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 416 WILSON PIKE CIRCLE			Α	mount
City	State	Zip Code		80533.33
BRENTWOOD	TN	37027		Transaction ID : SE24.173 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		09 / 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:			Office S	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose		resident Senate State:
Calendar Year-To-Date				ement For: Primary X General
Per Election for Office Sought	, 6	88481824.31	2024	Other (specify) >
Full Name of Payee		☐ Memo	Item C	Date of Public Distribution/Dissemination
THE BAKER GROUP LLC				09 14 2024
Mailing Address 416 WILSON PIKE CIRCLE			Д	mount
City	State	Zip Code		15175.00
BRENTWOOD	TN	37027		Transaction ID : SE24.176 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
PRINTING		Type		09 13 2024
Name of Federal Candidate:		X Support	Office S	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X P	resident Senate State:
Calendar Year-To-Date		20404004 04		ement For: Primary X General
Per Election for Office Sought		8481824.31	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. 🕨	95708.33
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		<b>.</b>	M = M	12 2024
Signature		_ Date	e 09	12 2024

TIENNIZED INDEFENDENT EXPENDITORES			PAGE 19	24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICAT	
America PAC			C C0087951	
Check if 24-hour report 48-hour report	New repo	ort Amends repo	t filed on M M / D D /	Y Y Y Y
Full Name of Payee THE BAKER GROUP LLC		☐ Memo	M M / D D	/ Y Y Y Y Y
Mailing Address 416 WILSON PIKE CIRCLE			09 14 Amount	2024
City	Ctata	Zin Cada		15175.00
City BRENTWOOD	State TN	Zip Code 37027	Transaction ID : SE24.17 Date of Disbursement or	
Purpose of Expenditure PRINTING		Category/ Type	09 / 13	2024
Name of Federal Candidate:		Support	Office Sought: House	District:00
HARRIS, KAMALA, , ,		Oppose	President Senate	State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disbursement For:  Prima 2024  Other (specify) ▶	ry X General
Full Name of Payee		☐ Memo	tem Date of Public Distributio	n/Dissemination
THE BAKER GROUP LLC			M 09 / D 17 D	2024
Mailing Address 416 WILSON PIKE CIRCLE			Amount	
City	State	Zip Code		1000.00
BRENTWOOD	TN	37027	Transaction ID : SE24.2  Date of Disbursement or	
Purpose of Expenditure PRINTING		Category/ Type	M 09 / D 18	2024
Name of Federal Candidate:		Support	Office Sought: House	District: 00
TRUMP, DONALD, , ,		Oppose	President Senate	State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disbursement For: ☐ Prima 2024 ☐ Other (specify) ▶	ry X General
(a) SUBTOTAL of Itemized Independent Expenditures	·		<b>&gt;</b>	16175.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		·	
(a) TOTAL leaders and set Foreste ditures				
(c) TOTAL Independent Expenditures			<b>&gt;</b>	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		
GOBER, CHRIS, , ,		5 .		)24
Signature		_ Date	09 13 20	/2-1

TEMIZED INDEPENDENT EXPENDITURES				PAGE 199 OF 220
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	/ M M / D D / Y Y Y Y Y
Full Name of Payee THE BAKER GROUP LLC		☐ Memo	Item Date	of Public Distribution/Dissemination
			[	M 09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 416 WILSON PIKE CIRCLE			Amou	unt
City	State	Zip Code	— F	30200.00
BRENTWOOD	TN	37027		saction ID : SE24.275 of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		09 / 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		N Commont	Office Court	ht. Diotriot. 00
TRUMP, DONALD, , ,		Support Oppose	Office Soug	
,		Oppose	X Presid	
Calendar Year-To-Date Per Election for Office Sought	, 6	68481824.31	Disburseme 2024	nt For:
Full Name of Payee		Memo	1_	of Public Distribution/Dissemination
THE BAKER GROUP LLC		INICINO	_	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 416 WILSON PIKE CIRCLE			A may	
			Amou	unt
City	State	Zip Code		30200.00
BRENTWOOD	TN	37027		of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Fodorsk Constitute				
Name of Federal Candidate:		Support	Office Soug	
HARRIS, KAMALA, , ,		X Oppose	X Presid	dent Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disburseme	nt For: Primary X General
1 of Elocitori for Office Godgitt	1			Other (specify)
			_	
(a) SUBTOTAL of Itemized Independent Expenditures			· • [	60400.00
(b) SUBTOTAL of Unitemized Independent Expenditur	es		· • [	
(c) TOTAL Independent Expenditures				
(,				7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
GOBER, CHRIS, , ,			M = M /	DED / YEYEY
Signature		_ Date	e 09	20 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 200 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				0
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Da	te of Public Distribution/Dissemination
THE BAKER GROUP LLC				10 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 416 WILSON PIKE CIRCLE			An	nount
City	State	Zip Code	— F	147853.50
BRENTWOOD	TN	37027		ansaction ID : SE24.277
Purpose of Expenditure		Category/	Da	te of Disbursement or Obligation
PRINTING/POSTAGE		Type		09 20 2024
Name of Federal Candidate:		X Support	Office So	ught: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pre	sident Senate State:
Calendar Year-To-Date		8481824.31	Disburser	ment For: Primary X General
Per Election for Office Sought	7	10401024.31	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Da	te of Public Distribution/Dissemination
THE BAKER GROUP LLC				10 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 416 WILSON PIKE CIRCLE				للنبا لتا لتا
			An	nount
City	State	Zip Code		147853.50
BRENTWOOD	TN	37027	<b>I</b>	tansaction ID: SE24.278 te of Disbursement or Obligation
Purpose of Expenditure		Category/		09 20 / 2024
PRINTING/POSTAGE		Type		00 20 2024
Name of Federal Candidate:		Support	Office So	ught: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Pre	sident Senate State:
Calendar Year-To-Date	6	8481824.31	Disburser	ment For: Primary X General
Per Election for Office Sought	7 7		2024	Other (specify) ▶
			_	
(a) SUBTOTAL of Itemized Independent Expenditures			· • _	295707.00
(I) CURTOTAL of Unitersity of Index and on Franchist				
(b) SUBTOTAL of Unitemized Independent Expenditure	es		•	
(c) TOTAL Independent Expenditures			Г	
.,				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		-	M = M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	e 09	20 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 201 OF 220
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y = Y
Full Name of Payee THE BAKER GROUP LLC		☐ Memo	Item Da	ate of Public Distribution/Dissemination
Mailing Address 416 WILSON PIKE CIRCLE			An	09 27 2024 mount
City	State	Zip Code		147853.50
BRENTWOOD	TN	37027		ansaction ID : SE24.279 ate of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		09 / DDD / Y Y Y Y Y Y Z024
Name of Federal Candidate:		Support	Office So	ought: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pre	
Calendar Year-To-Date Per Election for Office Sought		68481824.31	Disburser 2024	ment For:  Primary
Full Name of Payee THE BAKER GROUP LLC		☐ Memo	Item Da	ate of Public Distribution/Dissemination
				M 09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 416 WILSON PIKE CIRCLE			An	nount
City BRENTWOOD	State	Zip Code 37027	Ti	147853.50 ransaction ID : SE24.280
Purpose of Expenditure			Da	ate of Disbursement or Obligation
PRINTING/POSTAGE		Category/ Type		M 09 / 20 / Y 2024 Y
Name of Federal Candidate:		Support	Office So	ought: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Pre	esident Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	68481824.31	Disburser 2024	ment For:
(a) SUBTOTAL of Itemized Independent Expenditures	3		•	295707.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		• [	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		· · · · · · · · · · · · · · · · · · ·
GOBER, CHRIS, , ,		_ Date	e 09	20 2024

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TEMIZED INDEPENDENT EXPENDITURES				PAGE 202 OF 220
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼
America FAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
THE BAKER GROUP LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 416 WILSON PIKE CIRCLE				Amount
		1		
City	State	Zip Code		90600.00
BRENTWOOD	TN	37027		Transaction ID : SE24.315 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		09 / 24 / 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose		President Senate State:
Calendar Year-To-Date			Disburs	sement For: Primary X General
Per Election for Office Sought	6	58481824.31	2024	Other (specify)
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
THE BAKER GROUP LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 416 WILSON PIKE CIRCLE				
				Amount
City	State	Zip Code		262370.00
BRENTWOOD	TN	37027		<b>Transaction ID : SE24.371</b> Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
PRINTING/POSTAGE		Туре	_	09 27 2024
Name of Federal Candidate:		X Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disburs 2024	sement For: Primary X General
Tel Election for enior edugiti	7			Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			.	352970.00
(a) GOD TO TAE OF REMIZED INDEPENDENT EXPENDITURES				002370.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es		. •	
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Doto	M 100	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

GOBER, CHRIS, , ,

Signature

SCHEDULE E (FEC Form 3X)				
TEMIZED INDEPENDENT EXPENDITURES				PAGE 203 OF 220
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼
				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y = Y
Full Name of Payee THE BAKER GROUP LLC		☐ Memo	Item Dat	te of Public Distribution/Dissemination
Mailing Address 416 WILSON PIKE CIRCLE				09 30 2024
			Am	nount
City	State	Zip Code		262370.00
BRENTWOOD	TN	37027		ansaction ID : SE24.372 te of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		09 / 27 / 2024
Name of Federal Candidate:		Support	Office Sou	ught: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Pres	
Calendar Year-To-Date Per Election for Office Sought	(	68481824.31	Disbursen 2024	nent For:
Full Name of Payee		☐ Memo	Item Dat	te of Public Distribution/Dissemination
THE LUKENS COMPANY				08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD			Am	nount
STE 900	Totata	Zin Codo	— Г	40000.00
City ARLINGTON	State VA	Zip Code 22206		ansaction ID : SE24.58 te of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		08 / 14 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		∑ Support	Office Sou	ught: House District:00
TRUMP, DONALD, , ,		Oppose	X Pres	<u> </u>
Calendar Year-To-Date Per Election for Office Sought	(	68481824.31	Disbursem 2024	nent For:
(a) SUBTOTAL of Itemized Independent Expenditures	í		•	302370.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		· • [	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			

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09

Date

ITEMIZED INDEPENDENT EXPENDITURES				PAGE 204 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on M = M / D = D / Y = Y = Y
Full Name of Payee THE LUKENS COMPANY		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address				08 17 2024
Mailing Address 2800 SHIRLINGTON ROAD STE 900				Amount
City	State	Zip Code		40000.00
ARLINGTON	VA	22206		Transaction ID : SE24.59 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		08 / 14 / 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose		President Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	\$8481824.31		sement For: Primary General
Per Election for Office Sought	7 7			Other (specify) ▶
Full Name of Payee THE LUKENS COMPANY		☐ Memo	Item	Date of Public Distribution/Dissemination
				08 / 19 / 2024
Mailing Address 2800 SHIRLINGTON ROAD				Amount
STE 900 City	State	Zip Code		133530.00
ARLINGTON	VA	22206		Transaction ID : SE24.89 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		Туре	$\perp$	
Name of Federal Candidate:		Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	8481824.31	Disbur 2024	sement For:
(a) SUBTOTAL of Itemized Independent Expenditures				173530.00
				, , , , , ,
(b) SUBTOTAL of Unitemized Independent Expenditure	es		• •	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,			M	M / D D / Y Y Y Y
Signature		_ Date	e 08	14 2024

#### SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES PAGE 205 OF 220 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ America PAC C00879510 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee THE LUKENS COMPANY 19 2024 Mailing Address 2800 SHIRLINGTON ROAD Amount **STE 900** City State Zip Code 133530.00 **ARLINGTON** VA 22206 Transaction ID: SE24.90 Date of Disbursement or Obligation Purpose of Expenditure Category/ PRINTING/POSTAGE 08 2024 Type Name of Federal Candidate: 00 Office Sought: Support House District: HARRIS, KAMALA, , , Oppose President Senate State: Primary Disbursement For: X General Calendar Year-To-Date 68481824.31 2024 Per Election for Office Sought Other (specify) ▶ Date of Public Distribution/Dissemination Full Name of Payee Memo Item THE LUKENS COMPANY 2024 26 08 Mailing Address 2800 SHIRLINGTON ROAD Amount **STE 900** 133530.00 City State Zip Code **ARLINGTON** Transaction ID: SE24.94 V۸ 22206 Date of Disbursement or Obligation Purpose of Expenditure Category/ 2024 PRINTING/POSTAGE Type Name of Federal Candidate: X Support Office Sought: House District: TRUMP, DONALD, , , X President Oppose Senate State: X General Disbursement For: Primary Calendar Year-To-Date 68481824.31 2024 Per Election for Office Sought Other (specify) ▶ 267060.00 (a) SUBTOTAL of Itemized Independent Expenditures ...... (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. GOBER, CHRIS, , , 2024 21 80 Date

TEMIZED INDEPENDENT EXPENDITURES				PAGE 206 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
THE LUKENS COMPANY			N	08 / 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD			Amou	ot
STE 900			Alliou	
City	State	Zip Code		133530.00
ARLINGTON	VA	22206		action ID : SE24.95 of Disbursement or Obligation
Purpose of Expenditure		Category/		1 M / D D / Y Y Y
PRINTING/POSTAGE		Type	니   ㄴ	08 22 2024
Name of Federal Candidate:		Support	Office Sough	t: House District:00
HARRIS, KAMALA, , ,		Oppose	X Preside	ent Senate State:
Calendar Year-To-Date			Disbursemen	t For: Primary X General
Per Election for Office Sought		88481824.31	2024 O	ther (specify) ▶
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
THE LUKENS COMPANY			N	
Mailing Address			L	09 06 2024
2800 SHIRLINGTON ROAD STE 900			Amou	nt
City	State	Zip Code	— I	267064.08
ARLINGTON	VA	22206		saction ID : SE24.131 of Disbursement or Obligation
Purpose of Expenditure		Category/	N	09 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
PRINTING/POSTAGE		Type		00 00 2021
Name of Federal Candidate:		Support	Office Sough	it: District: 00
HARRIS, KAMALA, , ,		Oppose	X Preside	ent Senate State:
Calendar Year-To-Date		88481824.31	Disbursemen	t For: Primary X General
Per Election for Office Sought	7	00401024.31	2024 c	ther (specify) ▶
<u> </u>				
(a) SUBTOTAL of Itemized Independent Expenditures				400594.08
(b) SUBTOTAL of Unitemized Independent Expenditure	es			
(c) TOTAL Independent Expenditures			· •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
GOBER, CHRIS, , ,			M = M /	D D / Y Y Y Y
Signature		_ Date	9 08	22 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 207 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
America i Ae				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date of	f Public Distribution/Dissemination
THE LUKENS COMPANY				09 / 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD			Amour	t
STE 900			Allioui	
City	State	Zip Code		8692.50
ARLINGTON	VA	22206		action ID : SE24.153 f Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		09 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		Туре		
Name of Federal Candidate:		X Support	Office Sough	t: X House District:02
THERIAULT, AUSTIN, , ,		Oppose	Preside	nt Senate State: ME
Calendar Year-To-Date		044000.00	Disbursement	For: Primary X General
Per Election for Office Sought	7	341906.83	2024 O	ther (specify) ▶
Full Name of Payee		☐ Memo	Item Date of	f Public Distribution/Dissemination
THE LUKENS COMPANY			М	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD				10 2021
STE 900			Amour	t
City	State	Zip Code		8692.50
ARLINGTON	VA	22206	Trans	action ID : SE24.154  f Disbursement or Obligation
Purpose of Expenditure	1	Category/		
PRINTING		Type	IJ   L	09 / 06 / 2024
Name of Federal Candidate:		Support	Office Sough	t: X House District:02
GOLDEN, JARED, , ,		Oppose	Preside	
Calendar Year-To-Date		341906.83	Disbursement	For: Primary X General
Per Election for Office Sought	7 7	341906.63	2024 O	ther (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			<b>.</b>	17385.00
(h) SUBTOTAL of Uniterpized Independent Expanditure				
(b) SUBTOTAL of Unitemized Independent Expenditur	es		•	7 7
(c) TOTAL Independent Expenditures			<b>•</b>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,			M = M /	00 / Y Y Y Y
Signature		_ Date	9 09	06 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 208 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	n M M / D D / Y Y Y Y
Full Name of Payee THE LUKENS COMPANY		Memo	Item I	Date of Public Distribution/Dissemination
A4.33				09 17 2024
Mailing Address 2800 SHIRLINGTON ROAD STE 900			,	Amount
City	State	Zip Code		133530.00
ARLINGTON	VA	22206	I .	Transaction ID : SE24.213 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		09 16 2024
Name of Federal Candidate:		Support	Office S	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose		President Senate State:
Colondor Veer To Date				sement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought  68481824.31  Disc. 2024				Other (specify)
Full Name of Payee		☐ Memo	Item I	Date of Public Distribution/Dissemination
THE LUKENS COMPANY				09 / DDD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD		Amount		
STE 900			'	Amount
City	State	Zip Code		133530.00
ARLINGTON	VA	22206		Transaction ID : SE24.214 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
PRINTING/POSTAGE		Type		09 16 2024
Name of Federal Candidate:		Support	Office \$	Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose	X F	President Senate State:
Calendar Year-To-Date	6	8481824.31	1	sement For: Primary X General
Per Election for Office Sought	1 1	0401024.31	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. •	267060.00
(b) SUBTOTAL of Unitemized Independent Expenditur	es		· • [	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,			M = N	M / D D / Y Y Y Y Y
Signature		_ Date	9 09	16 2024

GOBER, CHRIS, , ,

Signature

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				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	n M = M / D = D / Y = Y = Y
Full Name of Payee THE LUKENS COMPANY		☐ Memo	Item I	Date of Public Distribution/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD				
STE 900			1	Amount
City	State	Zip Code		7641.50
ARLINGTON	VA	22206	I .	Transaction ID : SE24.230 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	Sought: X House District: 41
CALVERT, KEN, , ,		Oppose		President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	7 1 7	557052.21	Disburs 2024	sement For:
Full Name of Payee		☐ Memo	Item I	Date of Public Distribution/Dissemination
THE LUKENS COMPANY				09 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD STE 900			,	Amount
City	State	Zip Code		7641.50
ARLINGTON	VA	22206	I .	Transaction ID : SE24.231 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		09 17 2024
Name of Federal Candidate:				Sought: V House District: 41
ROLLINS, WILL, , ,		Support	l	Sought
ROLLINS, WILL, , ,		Oppose	F	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	7	557052.21	Disburs 2024	sement For:  Primary
(a) SUBTOTAL of Itemized Independent Expenditures	S		•	15283.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidates.	ent expenditures	reported herein were		

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Date

_	31123322 2 (1 23 1 31111 3X)				
TE	EMIZED INDEPENDENT EXPENDITURES	<b>;</b>			PAGE 210 OF 220
N/	AME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X  FEC IDENTIFICATION NUMBER ▼
	America PAC				
					C C00879510
Cł	heck if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	1 M M / D D / Y Y Y Y
	Full Name of Payee THE LUKENS COMPANY		☐ Memo	Item D	Date of Public Distribution/Dissemination
	Mailing Address 2800 SHIRLINGTON ROAD				09 16 2024
	STE 900			A	Amount
	City	State	Zip Code		4714.16
	ARLINGTON	VA	22206		Transaction ID : SE24.232 Date of Disbursement or Obligation
	Purpose of Expenditure PRINTING		Category/ Type		09 17 / 2024
	Name of Federal Candidate:		X Support	Office S	Sought: X House District: 03
	NUNN, ZACH, , ,		Oppose		resident Senate State: IA
	Calendar Year-To-Date Per Election for Office Sought	7 1 7	139588.07	Disburse 2024	ement For: ☐ Primary ☐ General  Other (specify) ▶
	Full Name of Payee THE LUKENS COMPANY		☐ Memo	Item D	Date of Public Distribution/Dissemination
	Mailing Address 2800 SHIRLINGTON ROAD				09 16 2024
	STE 900			A	Amount
	City	State	Zip Code		4714.15
	ARLINGTON	VA	22206	I	Transaction ID : SE24.233 Date of Disbursement or Obligation
	Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
	PRINTING		Туре		09 17 2024
	Name of Federal Candidate:		Support	Office S	- <u>-</u>
	BACCAM, LANON, , ,		Noppose Oppose	Pr	resident Senate State: IA
	Calendar Year-To-Date Per Election for Office Sought	1	139588.07	Disburse 2024	ement For: ☐ Primary ☒ General  Other (specify) ▶
_	(a) SUBTOTAL of Itemized Independent Expenditure	·S		• [	9428.31
	(b) SUBTOTAL of Unitemized Independent Expenditu	ures			
	(c) TOTAL Independent Expenditures			•	
	Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	date or authorized			
	GOBER, CHRIS, , ,		Dot	M = M	17 2024

NAME OF COMMITTEE (In Full)

	PAGE 211 OF 220 FOR LINE 24 OF FORM 3X
	FEC IDENTIFICATION NUMBER ▼
	C C00879510
mends report	filed on M M / D D / Y Y Y Y Y
☐ Memo Ite	em Date of Public Distribution/Dissemination
	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Amount
le S	7091.50 Transaction ID : SE24.234
'	Date of Disbursement or Obligation
y/ pe	09 / 17 / Y 2024
Support	Office Sought:
Oppose	President Senate State: CA
_	Disbursement For: Primary X General 2024 Other (specify) ▶
☐ Memo It	1
	09 / 16 / Y Y 2024
	Amount
le	7091.50
206	Transaction ID : SE24.235
v/	Date of Disbursement or Obligation  09 17 2024
' I	09 17 2024
e	Office Sought: X House District: 45
	Dragidant Canata State CA
Support Oppose	President Senate State: CA
Support Oppose	Disbursement For: Primary X General
Support Oppose	President Senate State.
Support Oppose	Disbursement For: Primary K General
Support Oppose	Disbursement For: Primary K General
Support Oppose	Disbursement For: Primary X General  2024 Other (specify) ▶
Support Oppose	Disbursement For: Primary X General  2024 Other (specify) ▶
Support Oppose	Disbursement For: Primary X General  2024 Other (specify) ▶

TEMIZED INDEPENDENT EXPENDITURES				PAGE 212 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	t filed on	M M / D D / Y Y Y Y
Full Name of Payee THE LUKENS COMPANY		☐ Memo	tem Date	e of Public Distribution/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD			Amo	punt
STE 900		1		
City ARLINGTON	State VA	Zip Code 22206		5981.50  nsaction ID : SE24.236  of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate: VALADAO, DAVID, , ,		Support Oppose	Office Soug	
Calendar Year-To-Date Per Election for Office Sought	7	357773.40	Disburseme	
Full Name of Payee THE LUKENS COMPANY		☐ Memo	tem Date	of Public Distribution/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD STE 900			Amo	
City ARLINGTON	State	Zip Code 22206		5981.50  nsaction ID : SE24.237  of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate: SALAS, RUDY, , ,		Support Oppose	Office Soug	
Calendar Year-To-Date Per Election for Office Sought	, , ,	357773.40	Disburseme 2024	ent For:
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditure			• [. • [.	11963.00
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,			M = M /	/ D D / Y Y Y Y Y
GODER, CHRIS, , ,		_ Date	09	17 2024

GOBER, CHRIS, , ,

Signature

SCHEDULE E (FEC Form 3X)				
TEMIZED INDEPENDENT EXPENDITURES				PAGE 213 OF 220 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New rep	port Amends repo	ort filed	I on Man / Dad / Yayayay
Full Name of Payee THE LUKENS COMPANY		☐ Memo	Item	Date of Public Distribution/Dissemination  Date of Public Distribution/Dissemination  16 / Y - Y - Y - Y - Y - Y - Y - Y - Y - Y
Mailing Address 2800 SHIRLINGTON ROAD STE 900				Amount
City	State	Zip Code		7556.70
ARLINGTON	VA	22206		Transaction ID : SE24.238  Date of Disbursement or Obligation
Purpose of Expenditure PRINTING	1	Category/ Type		09 / 17 / 2024
Name of Federal Candidate:		X Support	Offic	e Sought: X House District: 13
COUGHLIN, KEVIN, , ,		Oppose		President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		453125.70	Disbu 2024	ursement For: ☐ Primary ☐ General ☐ Other (specify) ▶
Full Name of Payee THE LUKENS COMPANY		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD				09 16 2024
STE 900				Amount
City	State	Zip Code		7556.70
ARLINGTON	VA	22206		Transaction ID : SE24.239  Date of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		09 / 17 / 2024
Name of Federal Candidate: SYKES, EMILIA, , ,		Support Oppose	Office	e Sought: House District: 13  President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	1 1	453125.70	Disbu 2024	ursement For: Primary X General
				Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	·		•	15113.40
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(c) TOTAL Independent Expenditures			• •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			

2024

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Date

#### SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES PAGE 214 OF 220 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ America PAC C00879510 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee THE LUKENS COMPANY 16 2024 Mailing Address 2800 SHIRLINGTON ROAD Amount **STE 900** City State Zip Code 4966.50 **ARLINGTON** VA 22206 Transaction ID: SE24.240 Date of Disbursement or Obligation Purpose of Expenditure Category/ **PRINTING** 17 2024 Type 09 Name of Federal Candidate: X Support Office Sought: X House District: MERRIN, DERRICK, , , OH Oppose President State: Senate Primary X General Disbursement For: Calendar Year-To-Date 358378.63 2024 Per Election for Office Sought Other (specify) ▶ Date of Public Distribution/Dissemination Full Name of Payee Memo Item THE LUKENS COMPANY 16 2024 Mailing Address 2800 SHIRLINGTON ROAD Amount **STE 900** 4966.50 City State Zip Code Transaction ID: SE24.241 **ARLINGTON** V۸ 22206 Date of Disbursement or Obligation Purpose of Expenditure Category/ 2024 **PRINTING** Type Name of Federal Candidate: 09 Support X House Office Sought: District: KAPTUR, MARCY, , , ОН Oppose President Senate State: X General Disbursement For: Primary Calendar Year-To-Date 358378.63 2024 Per Election for Office Sought Other (specify) ▶ 9933.00 (a) SUBTOTAL of Itemized Independent Expenditures ..... (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. GOBER, CHRIS, , , 2024 17 09 Date

TEMIZED INDEPENDENT EXPENDITURES				PAGE	215 OF 220 LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				<del>-</del>	FICATION NUMBER ▼
America PAC				1 2 2 2	379510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	t filed on	M = M / D =	D / Y = Y = Y
Full Name of Payee THE LUKENS COMPANY		☐ Memo	tem Date	M M / D	ibution/Dissemination  6
Mailing Address 2800 SHIRLINGTON ROAD			Amo	ount	
STE 900					<del> </del>
City ARLINGTON	State VA	Zip Code 22206		nsaction ID : SE	
Purpose of Expenditure PRINTING		Category/ Type	Date	M M / D	ent or Obligation 7 2024
Name of Federal Candidate: KENT, JOE, , ,		Support Oppose	Office Sou		use District: 03 nate State: WA
Calendar Year-To-Date Per Election for Office Sought	7	277161.26	Disbursem 2024	ent For:	Primary ⊠ General
Full Name of Payee THE LUKENS COMPANY		☐ Memo	tem Date	M M / D	ibution/Dissemination  6 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD STE 900			Amo		2024
City ARLINGTON	State VA	Zip Code 22206	<b>I</b>	nsaction ID : Sl	4734.00 <b>E24.243</b> ent or Obligation
Purpose of Expenditure PRINTING		Category/ Type		M M / D	7 / 2024
Name of Federal Candidate: GLUESENKAMP PEREZ, MARIE, , ,		Support Oppose	Office Sou	-	use District: 03 nate State: WA
Calendar Year-To-Date Per Election for Office Sought	, , ,	277161.26	Disbursem 2024	ent For: U	Primary X General
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditure			• [	1 7 1	9468.00
(c) TOTAL Independent Expenditures			· [		7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized				
GOBER, CHRIS, , ,		Date	M - M 09	/ 17 /	2024
Cianatura		_ Date	33	ا لينا ا	

TEMIZED INDEPENDENT EXPENDITURES			PAGE 216 OF 220	
NAME OF COMMITTEE (In Full)			FOR LINE 24 OF FORM	
America PAC			C C00879510	
Check if 24-hour report 48-hour report	New repo	ort Amends repor	rt filed on	r
Full Name of Payee THE LUKENS COMPANY		☐ Memo I	Date of Public Distribution/Dissemination	
Mailing Address 2800 SHIRLINGTON ROAD			Amount	
STE 900	State	Zin Codo	7178.60	
ARLINGTON	VA	Zip Code 22206	Transaction ID : SE24.244 Date of Disbursement or Obligation	
Purpose of Expenditure PRINTING		Category/ Type	09 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Υ
Name of Federal Candidate: KEAN, TOM, , ,		Support Oppose	Office Sought: House District: 07  President Senate State: NJ	
Calendar Year-To-Date Per Election for Office Sought	· · · · ·	254496.60	Disbursement For: Primary	ral
Full Name of Payee THE LUKENS COMPANY		☐ Memo I		Y
Mailing Address 2800 SHIRLINGTON ROAD STE 900			Amount	_
City ARLINGTON	State VA	Zip Code 22206	7178.60  Transaction ID : SE24.245  Date of Disbursement or Obligation	
Purpose of Expenditure PRINTING		Category/ Type	09 17 Y 2024	Y
Name of Federal Candidate: ALTMAN, SUE, , ,		Support Oppose	Office Sought: House District: 07  President Senate State: NJ	
Calendar Year-To-Date Per Election for Office Sought	7 1 7	254496.60	Disbursement For: ☐ Primary ☐ Gene 2024 ☐ Other (specify) ▶	ral
(a) SUBTOTAL of Itemized Independent Expenditures  (b) SUBTOTAL of Unitemized Independent Expenditure				]
(c) TOTAL Independent Expenditures			<b>•</b>	]
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GODED GUDYS			M = M / D = D / Y = Y = Y	
GOBER, CHRIS, , ,		_ Date	09 17 2024	

GOBER, CHRIS, , ,

Signature

SCHEDULE E (FEC Form 3X)				
TEMIZED INDEPENDENT EXPENDITURES				PAGE 217 OF 220
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼
America i Ao				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	n M = M / D = D / Y = Y = Y
Full Name of Payee THE LUKENS COMPANY		☐ Memo	Item [	Date of Public Distribution/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD				09 24 2024
STE 900			'	Amount
City	State	Zip Code		308975.10
ARLINGTON	VA	22206		Transaction ID : SE24.293 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		09 / 23 / 2024
Name of Federal Candidate:		Support	Office :	Sought: House District:00
TRUMP, DONALD, , ,		Oppose		President Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	68481824.31	Disburs 2024	sement For:  Primary
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
THE SYNAPSE GROUP LLC				08 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1309 COFFEEN AVE				Amount
STE 1200				
City	State	Zip Code		467500.00
SHERIDAN  Burnage of Evpanditure	WY	82801	I .	Transaction ID : SE24.60 Date of Disbursement or Obligation
Purpose of Expenditure  CANVASSING/FIELD OPERATIONS		Category/ Type		08 / 14 / 2024
Name of Federal Candidate:		Support	Office	Sought: House District:00
TRUMP, DONALD, , ,		Oppose		President Senate State:
Calendar Year-To-Date Per Election for Office Sought	6	68481824.31	Disburs 2024	sement For: ☐ Primary ☐ General  Other (specify) ▶
·				
(a) SUBTOTAL of Itemized Independent Expenditures	· <u></u>		[	776475.10
(b) SUBTOTAL of Unitemized Independent Expenditure	res			
(c) TOTAL Independent Expenditures			• [	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			

2024

23

09

Date

NAME OF COMMITTEE (In Full)

24-hour report

America PAC

Full Name of Payee THE SYNAPSE GROUP LLC

Mailing Address

SHERIDAN

Purpose of Expenditure

Full Name of Payee THE SYNAPSE GROUP LLC

Mailing Address

**SHERIDAN** 

Purpose of Expenditure

TRUMP, DONALD, , ,

Name of Federal Candidate:

Calendar Year-To-Date

Per Election for Office Sought

City

Name of Federal Candidate: HARRIS, KAMALA, , ,

Calendar Year-To-Date

Check if

City

#### SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

1309 COFFEEN AVE

1309 COFFEEN AVE

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

STE 1200

CANVASSING/FIELD OPERATIONS

STE 1200

CANVASSING/FIELD OPERATIONS

Per Election for Office Sought

48-hour report

New report

State

State

WY

WY

		PAGE 218 OF 220 FOR LINE 24 OF FORM 3X
		FEC IDENTIFICATION NUMBER ▼
		C C00879510
ort Amends repo	rt filed	on M M / D D / Y Y Y Y Y
☐ Memo	Item	Date of Public Distribution/Dissemination
		M 08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		Amount
Zip Code 82801		467500.00 Transaction ID : SE24.61
Category/ Type		Date of Disbursement or Obligation  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Support	Office	e Sought: House District: 00
Oppose	X	President Senate State:
8481824.31	Disbu 2024	ursement For: Primary ⊠ General  Other (specify) ▶
Memo	Item	Date of Public Distribution/Dissemination
		09 / 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		Amount
Zip Code		467500.00
82801		Transaction ID : SE24.269  Date of Disbursement or Obligation
Category/ Type		09 / 18 / 2024
Support	Office	e Sought: House District: 00
Oppose	X	President Senate State:
8481824.31	Disbu 2024	ursement For:  Primary
	•	935000.00
	•	

(b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures ..... Under penalty of perjury I certify that the independent expenditures reported he with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent. GOBER, CHRIS, , , 2024 14 80 Date Signature

GOBER, CHRIS, , ,

Signature

#### SC ITE

SCHEDULE E (FEC Form 3X) TEMIZED INDEPENDENT EXPENDITURES				PAGE 219 OF 220
				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee THE SYNAPSE GROUP LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
				M 09
Mailing Address 1309 COFFEEN AVE				Amount
STE 1200				, mount
City	State	Zip Code		467500.00
SHERIDAN	WY	82801		Transaction ID : SE24.270 Date of Disbursement or Obligation
Purpose of Expenditure  CANVASSING/FIELD OPERATIONS		Category/ Type		09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	Sought: House District:00
HARRIS, KAMALA, , ,		Oppose		President Senate State:
Calendar Year-To-Date Per Election for Office Sought	, , ,	68481824.31	Disbu 2024	rsement For: ☐ Primary ☐ General ☐ Other (specify) ▶
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
THE SYNAPSE GROUP LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1309 COFFEEN AVE STE 1200				Amount
City	State	Zip Code		467500.00
SHERIDAN	WY	82801		Transaction ID : SE24.358 Date of Disbursement or Obligation
Purpose of Expenditure  CANVASSING/FIELD OPERATIONS		Category/ Type		09 / D D / Y Y Y Y Y Y Y Z 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose		
			-	
Calendar Year-To-Date Per Election for Office Sought	7	68481824.31	Disbu 2024	rsement For:  Primary
(a) SUBTOTAL of Itemized Independent Expenditures	3		•	935000.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized			

2024

18

09

Date

TEMIZED INDEPENDENT EXPENDITURES				PAGE 220 OF 220
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
,				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M = M / D = D / Y = Y = Y
Full Name of Payee THE SYNAPSE GROUP LLC		☐ Memo	Item Date	of Public Distribution/Dissemination
Mailing Address 1309 COFFEEN AVE			-	
STE 1200			Amo	unt
City	State	Zip Code		467500.00
SHERIDAN	WY	82801		saction ID : SE24.359 of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		M M 7 D D 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Soug	ght: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Presid	
Calendar Year-To-Date Per Election for Office Sought	, 6	8481824.31	Disburseme	ent For:
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Mailing Address			[	M M / D D / Y Y Y Y
Mailing Address			Amo	unt
City	State	Zip Code		
Diverses of Evenediture			Date	of Disbursement or Obligation
Purpose of Expenditure		Category/ Type	$\Box \mid \Box$	M = M / D = D / Y = Y = Y
Name of Federal Candidate:		Support Oppose	Office Soug	
2			Disburseme	
Calendar Year-To-Date Per Election for Office Sought				Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			· [	467500.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es		· [	
(c) TOTAL Independent Expenditures			<b>•</b>	65825693.56
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidat party committee) any political party committee or its a	te or authorized			
GOBER, CHRIS, , ,		_ Date	M = M /	25 / 2024