24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
OORAH! POLITICAL ACTION COMMITTEE	
	C C00551853
Check if 24-hour report 48-hour report Mew report Amends report filed on	
Full Name of Payee	Date of Public Distribution/Dissemination
FACEBOOK	M M / D D / Y Y Y Y
Mailing Address 1 HACKER WAY	04 28 2022
	Amount
City State Zip Code	391.15
MENLO PARK CA 94025	Transaction ID: 1 Date of Disbursement or Obligation
Purpose of Expenditure INTERNET MEDIA Category/ Type	04 / 28 / Y Y Y Y Y Y
Name of Federal Candidate Support Offic	ee Sought: House District:
HALL, DAVE, , ,	President Senate State: IN
Calendar Year-To-Date Per Election for Office Sought Disb 2022	oursement For: Primary General Other (specify)
Full Name of Payee FACEBOOK	Date of Public Distribution/Dissemination
Mailing Address	04 28 2022
Mailing Address 1 HACKER WAY	Amount
City State Zip Code	508.85
MENLO PARK CA 94025	Transaction ID: 3 Date of Disbursement or Obligation
Purpose of Expenditure INTERNET MEDIA Category/ Type	04 / 28 / 2022
Name of Federal Candidate Support Office	ce Sought: House District:
HAGGARD, CRAIG, , , Oppose	President Senate State: IN
Calendar Year-To-Date Per Election for Office Sought Disb 2022	oursement For: X Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	900.00
	300.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	900.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
24.0	04 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	