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

Schedule E)	PAGE 1 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
PEACHTREE PAC	C C00762377
	G coordan
Check if 24-hour report 48-hour report New report Amends report filed on	
Full Name of Payee	Date of Public Distribution/Dissemination
DMM MEDIA	12 22 2020
Mailing Address 1911 N FORT MYER DRIVE	Amount
STE 400	1000.00
City State Zip Code ARLINGTON VA 22209	1922.20 Transaction ID : SE.4166
Purpose of Expenditure MEDIA PRODUCTION Category/ Type	Date of Disbursement or Obligation 12 22 2020
Name of Federal Candidate	e Sought: House District: 00
OSSOFF, T. JONATHAN, , ,	President Senate State: GA
Calendar Year-To-Date Per Election for Office Sought Disbt 2021	ursement For: Primary General ✓ Other (specify) ► Runoff
Full Name of Payee	Date of Public Distribution/Dissemination
MAIN STREET MEDIA GROUP	12
Mailing Address PO BOX 25093	
	Amount
City State Zip Code	4812127.12
ALEXANDRIA VA 22313	Transaction ID : SE.4164 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA PLACEMENT Category/ Type	12 17 2020
	e Sought: House District: 00
OSSOFF, T. JONATHAN, , ,	President Senate State: GA
Calendar Year-To-Date Per Election for Office Sought Disb 2021	ursement For: Primary General X Other (specify) ► Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	4814049.32
(b) SUBTOTAL of Unitemized Independent Expenditures	
(b) COD TO THE OF COMMON EXPONENTIAL EXPON	7 7
(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.	
= 3.10	2 22 2020
Signature	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
PEACHTREE PAC	C C00762377
Check if X 24-hour report 48-hour report New report Amends report filed on	
Full Name of Payee MAIN STREET MEDIA GROUP	e of Public Distribution/Dissemination
Mailing Address PO BOX 25093	12 22 / 2020
Am	ount
City State Zip Code	463.17
Dat	insaction ID : SE.4165 te of Disbursement or Obligation
Purpose of Expenditure MEDIA PLACEMENT Category/ Type	12 / 21 / 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	ight: House District:00
OSSOEE T JONATHAN	sident Senate State: GA
Calendar Year-To-Date Per Election for Office Sought Disbursem 2021	
Full Name of Payee Dat	te of Public Distribution/Dissemination
Mailing Address	nount
City State Zip Code	
Dat	te of Disbursement or Obligation
Purpose of Expenditure Category/ Type	M = M / D = D / Y = Y = Y = Y
Name of Federal Candidate Support Office Sou	ught: House District:
Oppose Pres	sident Senate State:
Calendar Year-To-Date Per Election for Office Sought Disbursem	nent For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	463.17
(b) SUBTOTAL of Unitemized Independent Expenditures	1 1 7 1 1 7 1 1 7 1
(c) TOTAL Independent Expenditures	4814512.49
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.	
DOZIER, JULIE, , , [Electronically Filed] Date 12	22 2020
0.9.1.2.2.2	