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

S	chedule E)		PAGE 1 OF 3 FOR SE OF FORM 24/48		
	AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼		
I۷	Morning in America PAC		C C00562595		
Ch	Check if 24-hour report 48-hour report New report Amends report filed on				
	Full Name of Payee Nebo Media Inc.		Date of Public Distribution/Dissemination		
			08 23 2022		
	Mailing Address PO Box 9825		Amount		
	City State	Zip Code	87114.00		
	Arlington VA	22219	Transaction ID: E-17 Date of Disbursement or Obligation		
	Purpose of Expenditure Media Advertisement	Category/ Type 004	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:		
	Horsford, Steven, Alexzander, ,	X Oppose	President Senate State: NV		
	Calendar Year-To-Date Per Election for Office Sought	92317.50	Disbursement For: Primary		
	Full Name of Payee		Date of Public Distribution/Dissemination		
	Autumn Productions		08 23 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	Mailing Address PO Box 371553		Amount		
	City State	Zip Code	5203.50		
	Las Vegas NV	89137	Transaction ID : E-34 Date of Disbursement or Obligation		
	Purpose of Expenditure Cost of Production	Category/ Type 004	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: 04		
	Horsford, Steven, Alexzander, ,	X Oppose	President Senate State: NV		
	Calendar Year-To-Date Per Election for Office Sought	92317.50	Disbursement For: Primary Queen General Other (specify) ☐ Primary ☐ General		
	(a) SUBTOTAL of Itemized Independent Expenditures		92317.50		
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL ladanandari Evranditura					
	(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.					
	Hastie, Chrissie, , ,		M = M / D = D / Y = Y = Y		
	Signature [Electronic	ically Filed] Date	08 25 2022		
	party committee) any political party committee or its agent. *Hastie, Chrissie, , , *[Electronia]*	:II. E!I-II	M = M / D = D / Y = Y = Y		

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

	FOR SE OF FORM 24/48				
NAME OF COMMITTEE (In Full) Morning in America DAC					
Morning in America PAC	C C00562595				
Check if 24-hour report					
Full Name of Payee	Date of Public Distribution/Dissemination				
Autumn Productions	08 / 23 / Y Y Y Y Y Y Z Y Z Y Z Z Z Z Z Z Z Z Z				
Mailing Address PO Box 371553	Amount				
City State	Zip Code 5203.50				
Las Vegas NV	89137 Transaction ID : E-33 Date of Disbursement or Obligation				
Purpose of Expenditure Cost of Production	Category/ Type 004 08 / 25 / 2022				
Name of Federal Candidate	Support Office Sought: House District: 04				
Peters, Samuel, James, MR,	Oppose President Senate State: NV				
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary 92317.50 Other (specify) General				
Full Name of Payee Nebo Media Inc. Mailing Address PO Box 9825	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				
City State	Zip Code 87114.00				
Arlington VA	22219 Transaction ID : E-8 Date of Disbursement or Obligation				
Purpose of Expenditure Media Advertisement	Category/ Type 004 08 17 2022				
Name of Federal Candidate	Support Office Sought: M House District: 04				
Peters, Samuel, James, MR,	Oppose President Senate State: NV				
Calendar Year-To-Date Per Election for Office Sought	92317.50 Disbursement For: Primary Other (specify) Other (specify)				
(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.					
Hastie, Chrissie, , , [Eld Signature	ectronically Filed] Date 08 25 2022				

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OF

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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 3 OF 3 FOR SE OF FORM 24/48				
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼				
Morning in America PAC	C C00562595				
Check if 24-hour report					
	Date of Public Distribution/Dissemination				
Majority Strategies LLC	08				
Mailing Address PO Box 679219	Amount				
City State Zip Code	617690.92				
Dallas TX 75267 T	Fransaction ID: E-12 Date of Disbursement or Obligation				
Purpose of Expenditure Digital Advertisement Category/ Type 004	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: X House District: 03				
Recker April	resident Senate State: NV				
Calendar Year-To-Date Per Election for Office Sought Disburse 2022	ement For: Primary x General Other (specify) ▶				
Full Name of Payee	Date of Public Distribution/Dissemination				
Mailing Address					
	Amount				
City State Zip Code					
	Date of Disbursement or Obligation				
Purpose of Expenditure Category/ Type	M = M / D = D / Y = Y = Y				
Name of Federal Candidate Support Office S	Sought: House District:				
Oppose P	President Senate State:				
Calendar Year-To-Date Per Election for Office Sought	ement For: Primary General				
	Other (specify) -				
(a) SUBTOTAL of Itemized Independent Expenditures					
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures	802325.92				
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.					
Hastie, Chrissie, , , [Electronically Filed] Date 08	/ 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Signature					