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 ▼
Priorities USA Action	
	C C00495861
Check if X 24-hour report 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
Magnus Pearson Media	06 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 311 Wolfe St	Amount
City State Zip Code Alexandria VA 22314-3725	6275.16
	Transaction ID: VNTYHA0W009 Date of Disbursement or Obligation
Purpose of Expenditure Ad Production (Estimate) Category/ Type	06 03 / 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, J., ,	President Senate State: 00
Calendar Year-To-Date Per Election for Office Sought Disbut 2020	Other (checkft)
Full Name of Payee	Other (specify) ► Date of Public Distribution/Dissemination
Magnus Pearson Media	M = M / D = D / Y = Y = Y
Mailing Address 311 Wolfe St	06 03 2020
5 STI Wolle St	Amount
City State Zip Code	1255.03
Alexandria VA 22314-3725	Transaction ID: VNTYHA0W017 Date of Disbursement or Obligation
Purpose of Expenditure Ad Production (Estimate) Category/	M M / D D / Y Y Y Y
Type	06 03 2020
Name of Federal Candidate Support Office	e Sought: House District: 00
TRUMP, DONALD J, , ,	President Senate State: WV
Calcidat Teat to Bate	ursement For: 🗶 Primary General
Per Election for Office Sought 94405.15 2020	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	7530.19
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
•	7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of eithe party committee) any political party committee or its agent.	
Speed, Greg, , ,	M / D D / Y Y Y Y Y
	6 03 2020

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	LIVI EXPEND	TIONES		PAGE 2 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FFC I	DENTIFICATION NUMBER ▼
Priorities USA Action			C	C00495861
Check if 24-hour report 48-hour report	X New re	port Amends repo	ort filed on	/ D = D / Y = Y = Y = Y
Full Name of Payee Targeted Platform Media LLC			M = M	lic Distribution/Dissemination
Mailing Address 651 Maid Marion Rd			06 Amount	03 2020
City	State	Zip Code		164298.33
Annapolis	MD	21405-2027		ID: VNTYHA0W025 pursement or Obligation
Purpose of Expenditure Ad Buy (Estimate)		Category/ Type	06	03 2020
Name of Federal Candidate		Support	Office Sought:	House District:00
TRUMP, DONALD, J., ,		X Oppose	✗ President	Senate State: 00
Calendar Year-To-Date Per Election for Office Sought	, , ,	17490759.20	Disbursement For: 2020 Other (s	Primary X General pecify) ▶
Full Name of Payee			Date of Pub	lic Distribution/Dissemination
Targeted Platform Media LLC			06	03 2020
Mailing Address 651 Maid Marion Rd			Amount	
City	State	Zip Code		1001.17
Annapolis Purpose of Expenditure	MD 21405-2027 Transaction ID : VNTYHA0W040 Date of Disbursement or Obligation			
Ad Buy (Estimate)		Category/ Type	06	03 / 2020
Name of Federal Candidate		Support	Office Sought:	House District:00
TRUMP, DONALD J, , ,		X Oppose	✗ President	Senate State: WV
Calendar Year-To-Date Per Election for Office Sought		94405.15	Disbursement For: 2020 Other (s	★ Primary General specify)
(a) SUBTOTAL of Itemized Independent Expendent	ditures		.	165299.50
(b) SUBTOTAL of Unitemized Independent Exp	enditures			
			,	7 7
(c) TOTAL Independent Expenditures			>	172829.69
Under penalty of perjury I certify that the indep with, or at the request or suggestion of, any car party committee) any political party committee or	ndidate or authorize			
Speed, Greg, , ,	[Electro	nically Filed] Date	06 03	2020
Signature				