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

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Protect Our Future PAC	C C00801514
	C 000001314
Check if X 24-hour report 48-hour report New report X Amends report filed	on 05 / 13 / 2022
Full Name of Payee	Date of Public Distribution/Dissemination
Chism Strategies	05 13 2022
Mailing Address 305 Green Oak Ln	Amount
City State Zip Code	4661.61
Madison MS 39110-8214	Transaction ID : 500131148  Date of Disbursement or Obligation
Purpose of Expenditure GOTV calls  Category/ Type	05 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: X House District: 06
Flynn, Carrick, , ,	President Senate State: OR
Calendar Year-To-Date Per Election for Office Sought  Disbut 2022	ursement For:   ✓ Primary General  Other (specify)  ✓
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	Amount
City State Zip Code	
Durance of Curanditure	Date of Disbursement or Obligation
Purpose of Expenditure  Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	e Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	ursement For: Primary General
Tel Election of Office Cought	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	4661.61
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	4661.61
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.	
2 410	06 16 2022
Signature	