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

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 300001314
Check if X 24-hour report 48-hour report New report Amends report filed	i on M M / D D / Y Y Y Y Y
Full Name of Payee Screen Strategies Media	Date of Public Distribution/Dissemination
Mailing Address 11150 Fairfax Blvd	07
Ste 500	Amount
City State Zip Code	100000.00
Fairfax VA 22030-5029	Transaction ID : 500259614 Date of Disbursement or Obligation
Purpose of Expenditure Ad Buy - TV Category/ Type	07 29 / Y Y 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: 13
HOLLIER, ADAM, , ,	President Senate State: MI
Calendar Year-To-Date Per Election for Office Sought Disbute 2022	ursement For: ✓ Primary General Other (specify) ✓
Full Name of Payee	Date of Public Distribution/Dissemination
	M M / D D / Y Y Y Y
Mailing Address	Amount
City State Zip Code	
	Date of Dishurasment or Obligation
Purpose of Expenditure Category/	Date of Disbursement or Obligation
Type	
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 for Office Sought	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	100000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	7, 7, 7, 70,
(c) TOTAL Independent Expenditures	100000.00
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	07 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	