

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 1
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) AMERICAN PACT			FEC IDENTIFICATION NUMBER ▼ C C00837443	
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on			MM / DD / YYYY	
Full Name of Payee Public Concepts		Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 26 / 2026		
Mailing Address 5155 Corporate Way D2		Amount 3500.00		
City Jupiter	State FL	Zip Code 33458	Transaction ID : SE.4285	
Purpose of Expenditure Text Message		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 07 / 27 / 2026	
Name of Federal Candidate KEISER, BELINDA, ,		☐ Support ☒ Oppose	Office Sought: ☒ House District: 22 ☐ President ☐ Senate State: FL	
Calendar Year-To-Date Per Election for Office Sought		194000.00	Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶	
Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY		
Mailing Address		Amount		
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY	
Purpose of Expenditure		Category/ Type		
Name of Federal Candidate		☐ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☐ Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....		3500.00		
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures.....		3500.00		
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.				
Signature Jones, William, S, ,		Date MM / DD / YYYY 07 / 27 / 2026		