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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

			Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
America PAC			
I			
	P.O. BOX 341027		
ADDRESS (number and stree			
Check if different			
than previously reported. (ACC)	AUSTIN		TX 78734 - -
2. FEC IDENTIFICATION	I NUMBER ▼ CI	TY ▲	STATE ▲ ZIP CODE ▲
C C00879510		S THIS NEW (N) OR	AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	o 20 (M2) May 20 (M:	(Non-Election Year Only)
(a) Quarterly Reports:	Mai	r 20 (M3) Jun 20 (M6	Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15		20 (M4) Jul 20 (M7)	Oct 20 (M10) Jan 31 (YE)
Quarterly Repo	rt (Q1) (c) 12-Day PRE-Election	Primary (12P)	General (12G) Runoff (12R)
Quarterly Repo	Report for the:	Convention (12C)	Special (12S)
Quarterly Repo	rt (Q3)	M M / D D /	Y Y Y Y in the
January 31 Year-End Repo	ort (YE) Election	on on	State of
July 31 Mid-Ye Report (Non-el- Year Only) (MY	ection (d) 30-Day	General (30G)	Runoff (30R) Special (30S)
Termination Re (TER)	port	on on	in the State of
5. Covering Period	04 / 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	through 06	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I certify that I have examine	ed this Report and to the best of	f my knowledge and belief it is	true, correct and complete.
Type or Print Name of Trea	Surer GOBER, CHRIS, , ,		
Signature of Treasurer	GOBER, CHRIS, , ,		Date 10 09 2024
NOTE: Submission of false, e	rroneous, or incomplete informatic	on may subject the person signing	this Report to the penalties of 52 U.S.C. § 30109
Office Use			FEC FORM 3X Rev. 05/2016

8.

Cash on Hand at Close of

Debts and Obligations Owed TO the Committee (Itemize all on

10. Debts and Obligations Owed BY the Committee (Itemize all on

(subtract Line 7 from Line 6(d)).....

Schedule C and/or Schedule D)

Schedule C and/or Schedule D)

Reporting Period

Image# 202410099684835302 **SUMMARY PAGE** OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name America PAC 2024 06 30 2024 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 0.00 January 1. 0 (b) Cash on Hand at 0.00 Beginning of Reporting Period..... 8750000.00 8750000.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 8750000.00 8750000.00 6(a) and 6(c) for Column B)..... 7782240.08 7782240.08 7. Total Disbursements (from Line 31)......

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

967759.92

0.00

0.00

967759.92

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

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Report Covering the Period: From: 04	01 2024 To			
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
. Contributions (other than loans) From: (a) Individuals/Persons Other				
(a) Individuals/Persons Other Than Political Committees				
(i) Itemized (use Schedule A)	8750000.00	8750000.00		
(ii) Unitemized(iii) TOTAL (add	0.00	0.00		
Lines 11(a)(i) and (ii)	8750000.00	8750000.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees (such as PACs)	0.00	0.00		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry				
Totals to Line 33, page 5)▶	8750000.00	8750000.00		
Transfers From Affiliated/Other Party Committees	0.00	0.00		
3. All Loans Received	0.00	0.00		
1. Loan Repayments Received	0.00	0.00		
5. Offsets To Operating Expenditures	4 4	4 4		
(Refunds, Rebates, etc.)	0.00	0.00		
(Carry Totals to Line 37, page 5)	0.00	0.00		
to Federal Candidates and Other				
Political Committees	0.00	0.00		
7. Other Federal Receipts				
(Dividends, Interest, etc.)	0.00	0.00		
Transfers from Non-Federal and Levin Funds (a) Non-Federal Account				
(from Schedule H3)	0.00	0.00		
=		7 7 7 7 7		
(b) Levin Funds (from Schedule H5)	0.00	0.00		
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00		
9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	8750000.00	8750000.00		
D. Total Federal Receipts	0750000 00			
(subtract Line 18(c) from Line 19)▶	8750000.00	8750000.00		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
21. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	Total Tillo I Gilou	Galeridai Teat-to-Date		
(i) Federal Share	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating				
Expenditures(c) Total Operating Expenditures	33740.08	33740.08		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	33740.08	33740.08		
2. Transfers to Affiliated/Other Party Committees	0.00	0.00		
3. Contributions to Federal Candidates/Committees	0.00	0.00		
and Other Political Committees	0.00	0.00		
I. Independent Expenditures (use Schedule E)	7748500.00	7748500.00		
5. Coordinated Party Expenditures (52 U.S.C. § 30116(d))	4 1 4 1 4	4-14-14-14		
(use Schedule F)	0.00	0.00		
6. Loan Repayments Made	0.00	0.00		
7. Loans Made	0.00	0.00		
Refunds of Contributions To: (a) Individuals/Persons Other	0.00	5.00		
Than Political Committees	0.00	0.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees		1 1 1 1 1 1 1 1 1 1		
(such as PACs)(d) Total Contribution Refunds	0.00	0.00		
(add Lines 28(a), (b), and (c))	0.00	0.00		
. Other Disbursements (Including	,			
Non-Federal Donations)	0.00	0.00		
. Federal Election Activity (52 U.S.C. § 30101(2	0))			
(a) Allocated Federal Election Activity (from Schedule H6)				
(i) Federal Share	0.00	0.00		
(ii) III ovinii Chara		200		
(ii) "Levin" Share(b) Federal Election Activity Paid	0.00	0.00		
Entirely With Federal Funds	0.00	0.00		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00		
	0.00	0.00		
. Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	7782240.08	7782240.08		
2. Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	7702240.00			
	7782240.08	7782240.08		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5 **COLUMN A** COLUMN B III. Net Contributions/ **Total This Period** Calendar Year-to-Date **Operating Expenditures** 33. Total Contributions (other than loans) 8750000.00 8750000.00 (from Line 11(d), page 3) 34. Total Contribution Refunds 0.00 0.00 (from Line 28(d))..... 35. Net Contributions (other than loans) 8750000.00 8750000.00 (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures 33740.08 33740.08 (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures 0.00 0.00 (from Line 15, page 3)..... 38. Net Operating Expenditures 33740.08 33740.08 (subtract Line 37 from Line 36)

SCHEDULE A (FEC Form 3X)

21 FOR LINE NUMBER: **PAGE** 6 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

ITEMIZED RECEIPTS 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) America PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt LIAUTAUD, JAMES, J., , Mailing Address CAY HARBOR 2E 2024 06 City State Zip Code Transaction ID: SA11A.6 **KEY LARGO** FL 33037-Amount of Each Receipt this Period FEC ID number of contributing C 1000000.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) **RETIRED** RETIRED CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 1000000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. LONSDALE ENTERPRISES INC. Date of Receipt Mailing Address P.O. BOX 3188 06 07 2024 City State Zip Code Transaction ID: SA11A.5 LOS ALTOS CA 94024-0188 Amount of Each Receipt this Period FEC ID number of contributing 1000000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 1000000.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. CRAFT, JOE, , , Date of Receipt Mailing Address 1717 S BOULDER AVE 2024 06 10 SUITE 400 Zip Code City State Transaction ID: SA11A.1 OK **TULSA** 74119-4833 Amount of Each Receipt this Period FEC ID number of contributing C 1000000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) ALLIANCE RESOURCE PARTNERS, LP **EXECUTIVE** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 1000000.00 Other (specify) 3000000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: **PAGE** 7 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) America PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name WATERSHED CAPITAL LLC Date of Receipt Mailing Address 2700 E. SUNSET ROAD 2024 10 SUITE 16 City State Zip Code Transaction ID: SA11A.4 NV LAS VEGAS 89120-3508 Amount of Each Receipt this Period FEC ID number of contributing 500000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 500000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name WCM INVESTMENTS LLC Date of Receipt Mailing Address 265 S. FEDERAL HIGHWAY, STE 302 06 11 2024 City State Zip Code Transaction ID: SA11A.2 **DEERFIELD BEACH** FL 33441-4161 Amount of Each Receipt this Period FEC ID number of contributing 500000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General SEE ATTRIBUTION BELOW 500000,00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name LINK, TROY, , , Date of Receipt Mailing Address 265 S. FEDERAL HIGHWAY, STE 302 06 11 2024 City State Zip Code Transaction ID: SA11A.3 FL DEERFIELD BEACH 33441-4161 Amount of Each Receipt this Period FEC ID number of contributing C 500000.00 federal political committee. X Memo Item Name of Employer (for Individual) Occupation (for Individual) WCM INVESTMENTS, LLC **OWNER** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General PARTNERSHIP ATTRIBUTION 500000.00 Other (specify) 1000000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 8 OF Use separate schedule(s)

FOR LINE NUMBER:				PAGE	8	OF	21		
(check only one)									
	X	11a		11b		11c	12		
		13		14		15	16	;	17

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) America PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name LEONE, DOUGLAS, , , Date of Receipt Mailing Address 13385 ROBLEDA ROAD 2024 14 City State Zip Code Transaction ID: SA11A.7 CA 94022-3490 LOS ALTOS HILLS Amount of Each Receipt this Period FEC ID number of contributing 1000000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SEQUOIA CAPITAL **PARTNER** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 1000000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MAGUIRE, SHAUN, , , Date of Receipt Mailing Address 10551 WILSHIRE BLVD PH3 06 18 2024 City State Zip Code Transaction ID: SA11A.8 LOS ANGELES CA 90024-4572 Amount of Each Receipt this Period FEC ID number of contributing 500000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **INVESTOR** SEQUOIA CAPITAL CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 500000,00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. HERING, JOHN, , , Date of Receipt Mailing Address 548 MARKET STREET #80703 2024 06 20 City State Zip Code Transaction ID: SA11A.10 CA SAN FRANCISCO 94104-5401 Amount of Each Receipt this Period FEC ID number of contributing C 500000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) LOOKOUT **FOUNDER** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 500000.00 Other (specify) 2000000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

21 FOR LINE NUMBER: **PAGE** 9 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) America PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name HOWERY, KENNETH, , , Date of Receipt Mailing Address 455 N. CITYFRONT PLAZA DRIVE 2024 20 **SUITE 1730** City State Zip Code Transaction ID: SA11A.11 **CHICAGO** IL 60611-5314 Amount of Each Receipt this Period FEC ID number of contributing C 250000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SELF-EMPLOYED **INVESTOR** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 1000000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. THOMPSON, MICHAEL, , , Date of Receipt Mailing Address 7084 FISHER ISLAND DRIVE 06 20 2024 City State Zip Code Transaction ID: SA11A.9 FL MIAMI BEACH 33109-0791 Amount of Each Receipt this Period FEC ID number of contributing 200000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **INVESTOR** SELF-EMPLOYED CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 200000,00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name HOWERY, KENNETH, , , Date of Receipt Mailing Address 455 N. CITYFRONT PLAZA DRIVE 2024 06 21 **SUITE 1730** City State Zip Code Transaction ID: SA11A.12 IL**CHICAGO** 60611-5314 Amount of Each Receipt this Period FEC ID number of contributing 250000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SELF-EMPLOYED **INVESTOR** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 1000000.00 Other (specify) 700000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 10 OF 21				
ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)				
HEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12				
			13 14 15 16 17				
			person for the purpose of soliciting contributions ee to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)							
America PAC							
Full Name of Individual (Last, First, Middle	Initial) or Full C	Organization Name					
A. WINKLEVOSS, CAMERON, , ,			Date of Receipt				
Mailing Address 30 W 24TH STREET, 4TH	FLOOR		06 21 2024				
City	State	Zip Code	Transaction ID : SA11A.13				
NEW YORK	NY	10010-3558	Amount of Each Receipt this Period				
FEC ID number of contributing	С		250000.00				
federal political committee.			20000.00				
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item				
WINKLEVOSS CAPITAL MANAGEMENT		JNDER					
Receipt For:	Aggragata	Year-to-Date ▼	CONTRIBUTION				
Primary General	Aggregate	Teal-to-Date v	-				
Other (specify) ▼	11	250000.00					
			-				
Full Name of Individual (Last, First, Middle	Initial) or Full C	rganization Name					
B. WINKLEVOSS, TYLER, , ,			Date of Receipt				
Mailing Address 30 W 24TH STREET, 4TH		M M / D D / Y Y Y Y					
O:h.	Chaha	Zin Codo	06 21 2024				
City NEW YORK	State	Zip Code 10010-3558	Transaction ID : SA11A.14				
-	INI	10010-3336	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		250000.00				
rederar politicar committee.							
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item				
WINKLEVOSS CAPITAL MANAGEMENT	FO	UNDER	CONTRIBUTION				
Receipt For:	Aggregate	Year-to-Date ▼					
Primary General		250000.00	7				
Other (specify) ▼		250000.00					
E II N C I I' I I I I I I I I I I I I I I I I	1	N 1 0 N					
Full Name of Individual (Last, First, Middle HOWERY, KENNETH, , ,		organization Name	Date of Receipt				
Mailing Address 455 N. CITYFRONT PLAZ	A DRIVE		06 24 2024				
SUITE 1730 City	State	Zip Code					
CHICAGO	IL	60611-5314	Transaction ID : SA11A.15				
		00011 0011	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		250000.00				
rederal political committee.							
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item				
SELF-EMPLOYED	INV	ESTOR	CONTRIBUTION				
Receipt For:	Aggregate	Year-to-Date ▼					
Primary General	1	100000 00	7				
Other (specify)		1000000.00					

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the Detailed Summary Page	FOR	LINE	NU	MBER	PAGE	1	1 0	=	21	
	(che	(check only one)								
	×	11a		11b		11c		12		
		13		14		15		16		17
not be sold or used by any person for the purpose of soliciting contributions										

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) America PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name HOWERY, KENNETH, , , Date of Receipt Mailing Address 455 N. CITYFRONT PLAZA DRIVE 2024 25 **SUITE 1730** City State Zip Code Transaction ID: SA11A.16 **CHICAGO** IL 60611-5314 Amount of Each Receipt this Period FEC ID number of contributing C 250000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SELF-EMPLOYED **INVESTOR** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 1000000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BERDAKIN, DANIEL, G., , Date of Receipt Mailing Address 101 S. ROSSMORE AVENUE 06 2024 City State Zip Code Transaction ID: SA11A.17 LOS ANGELES CA 90004-3736 Amount of Each Receipt this Period FEC ID number of contributing 50000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **RETIRED RETIRED** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 50000,00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. GRACIAS, ANTONIO, , , Date of Receipt Mailing Address 3737 COLLINS AVE, UNIT PH-3 2024 06 28 City Zip Code State Transaction ID: SA11A.19 FL MIAMI BEACH 33140-4027 Amount of Each Receipt this Period FEC ID number of contributing C 1000000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) VALOR EQUITY PARTNERS CEO CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 1000000.00 Other (specify) 1300000.00 SUBTOTAL of Receipts This Page (optional)..... 8750000.00 TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	FOR LINE NUMBER: PAGE 12 OF (check only one) X 21b 22 23 26 27				
		Summary Page	210 28a	28b 28c 29 30b			
Any information copied from such Reports and Staten or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full)		, p					
America PAC							
Full Name (Last, First, Middle Initial)				Data of Dishusamant			
A. CHAIN BRIDGE BANK				Date of Disbursement			
Mailing Address 1390 CHAIN BRIDGE RD STE 515	j			06 12 2024			
City MCLEAN	State VA	Zip Code 22101		FEC Identification Number			
Purpose of Disbursement				C			
BANK FEE				Transaction ID : SB.1			
Candidate Name			Category/	Amount of Each Disbursement this Period			
Office Sought: House Disbursen	nent For		Туре	25.00			
	Primary	General		7 7 7			
President	Other (spec			Memo Item			
State: District:							
Full Name (Last, First, Middle Initial) 3. CLIAIN DDIDGE DANK				Date of Disbursement			
CHAIN BRIDGE BANK				M M / D D / Y Y Y Y			
Mailing Address 1390 CHAIN BRIDGE RD STE 519		06 12 2024					
,	State VA	Zip Code		FEC Identification Number			
MCLEAN Purpose of Disbursement	VA	22101		С			
BANK FEE							
Candidate Name			Category/ Type	Transaction ID: SB.2 Amount of Each Disbursement this Period			
Office Sought: House Disbursen	nent For:	_		25.00			
	Primary	General					
State: President State:	Other (spec	ity)		Memo Item			
Full Name (Last, First, Middle Initial)				D. ((())			
^{C.} INTUIT				Date of Disbursement			
Mailing Address 2700 COAST AVE				06 17 2024			
City	State	Zip Code		FEC Identification Number			
MOUNTAIN VIEW	CA	94043					
Purpose of Disbursement SUBSCRIPTION				C			
Candidate Name			Category/ Type	Transaction ID: SB.9 Amount of Each Disbursement this Period			
Office Sought: House Disbursen	nent For:		71	47.97			
Senate	Primary	General		7 7 7			
President	Other (spec	eify) 🔻		Memo Item			
State: District:				_			
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)			<u> </u>	97.97			

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check only	FOR LINE NUMBER: PAGE 13 OF 21 (check only one)			
	Detailed S	Summary Page	X 21b 28a	22 23 26 27 28b 28c 29 30b			
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam-							
NAME OF COMMITTEE (In Full)		, 1-3					
America PAC							
Full Name (Last, First, Middle Initial) A. CANDI				Date of Disbursement			
A. CMDI				Date of Disbursement	7		
Mailing Address 1593 SPRING HILL RD STE 400				06 20 2024	_		
	State	Zip Code		FEC Identification Number			
TYSONS CORNER Purpose of Disbursement	VA	22182					
DATABASE MANAGEMENT SERVICES				C			
Candidate Name			Cata	Transaction ID : SB.7	vrio d		
			Category/ Type	Amount of Each Disbursement this Pe	FIIOQ		
Office Sought: House Disbursem	nent For:		750	500.00	. 1		
Senate	Primary	General		7 7 7			
	Other (speci	ify) ▼		Memo Item			
State: District:							
Full Name (Last, First, Middle Initial)				Data of Diskurs are and			
^{B.} CHAIN BRIDGE BANK				Date of Disbursement	_		
Mailing Address 1390 CHAIN BRIDGE RD STE 515	5			06 24 Y 2024			
City	State	Zip Code					
-	VA	22101		FEC Identification Number			
Purpose of Disbursement				C			
BANK FEE			[_,	Transaction ID : SB.3			
Candidate Name			Category/ Type	Amount of Each Disbursement this Per			
Office Sought: House Disbursem	nent For:		, y p c	25.00			
	Primary	General		7 7	_		
	Other (speci			Memo Item			
State: District:				Memo Item			
Full Name (Last, First, Middle Initial)							
^{C.} CHAIN BRIDGE BANK				Date of Disbursement			
Mailing Address 1390 CHAIN BRIDGE RD STE 515				06 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City	State	Zip Code		FEO. IV. 1977 11 11			
,	VA	22101		FEC Identification Number			
Purpose of Disbursement				C			
BANK FEE				Transaction ID : SB.4			
Candidate Name			Category/ Type	Amount of Each Disbursement this Pe	riod		
Office Sought: House Disbursem	nent For:		1,7,00	25.00			
	Primary	General		4 4			
	Other (speci			Memo Item			
State: District:				LI WOTTO TENT			
SURTOTAL of Dichurcomente This Dage (autisma)				550.00	,		
SUBTOTAL of Disbursements This Page (optional)			······	330.00			
TOTAL This Period (last page this line number only).							

17

SCHEDULE B (FEC Form 3X)	lles	water ask a skylet ()	FOR LINE	NUMBER:	PAGE 14 OF 21		
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check only one) X 21b 22 23 2			00	
		Summary Page	X 21b 28a	22 28b	26 27 29 30b		
[A . (L .				28c		
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan							
NAME OF COMMITTEE (In Full)		y p = 300					
America PAC							
/							
Full Name (Last, First, Middle Initial)		Data of D	isbursemen	+			
A. CHAIN BRIDGE BANK							
Mailing Address 1390 CHAIN BRIDGE RD STE 515	5			06	26	2024	
City	State	Zip Code		FFO	tet xt		
MCLEAN	VA	22101		FEC Ident	ification Nu	mper	
Purpose of Disbursement		<u> </u>		C]	
BANK FEE					action ID:	SB.5	
Candidate Name			Category/	Amount of	Each Disb	oursement this Period	
Office Sought: House Disburser	ment For:		Туре			25.00	
Senate Disburser	Primary	General			7	7 7	
President	Other (spec			Memo	Itom		
State: District:				iviemo	item		
Full Name (Last, First, Middle Initial)							
B. CHAIN BRIDGE BANK				Date of D	isbursemen	t	
				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 1390 CHAIN BRIDGE RD STE 51				06	28	2024	
,	State VA	Zip Code		FEC Ident	ification Nu	mber	
MCLEAN Purpose of Disbursement	VA	22101					
BANK FEE				C_		20.0	
Candidate Name			Category/		action ID :	SB.6 oursement this Period	
			Type	/ infodite of	Edon Bloc	varioniti tino i choa	
Office Sought: House Disburser	ment For:			L	4P	25.00	
Senate	Primary	General			,	,	
President District:	Other (spec	city)		Memo	Item		
State: District:							
Full Name (Last, First, Middle Initial)				Date of D	isbursemen	t	
MAVEN ADVOCACY PARTNERS	LLC			M M	DDD	/ Y Y Y Y Y	
Mailing Address PO BOX 341016				06	30	2024	
City	State	Zip Code		FFC Ident	ification Nu	mher	
AUSTIN	TX	78734			modifier INU		
Purpose of Disbursement				C			
POLITICAL STRATEGY CONSULTING/TRAVEL Candidate Name			action ID:				
Candidate Hairie			Category/ Type	Amount of	teach Disb	oursement this Period	
Office Sought: House Disburser	ment For:		. , , , ,			33042.11	
Senate	General			7	4 4		
President	cify) 🔻		Memo Item				
State: District:				LI MONTO			
			<u> </u>			22002.44	
SUBTOTAL of Disbursements This Page (optional)			·····•		7	33092.11	
TOTAL This Period (last page this line number only)						33740.08	
I IOIAE THIS LEHOU (last page this line humber only)					4 1 1 1		

TEMIZED INDEPENDENT EXPENDITURES				PAGE 15 OF 21 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				<u> </u>
America PAC				FEC IDENTIFICATION NUMBER ▼
America i Ae				C C00879510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
IN FIELD STRATEGIES INC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 333 H STREET			Amo	unt
STE 500	State	Zip Code		1487500.00
CHULA VISTA	CA	91910		saction ID : SE24.5
Purpose of Expenditure		2	Date	of Disbursement or Obligation
CANVASSING/FIELD OPERATIONS		Category/ Type		06 12 2024
Name of Federal Candidate:		Support	Office Soug	ght: House District:00
TRUMP, DONALD, , ,		Oppose	X Presi	dent Senate State:
Calendar Year-To-Date			Disburseme	ent For: Primary X General
Per Election for Office Sought	7	7748500.00	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
IN FIELD STRATEGIES INC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 333 H STREET				06 10 2024
STE 500			Amo	unt
City	State	Zip Code		1487500.00
CHULA VISTA	CA	91910		nsaction ID : SE24.6 of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type	_	00 12 2024
Name of Federal Candidate:		Support	Office Soug	ght: House District: 00
BIDEN, JOE, , ,		Oppose	X Presid	dent Senate State:
Calendar Year-To-Date		7749500 00	Disburseme	ent For: Primary X General
Per Election for Office Sought	7 7	7748500.00	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			• []	2975000.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es		· • [
(c) TOTAL Independent Expenditures			· •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
GOBER, CHRIS, , ,		_	M = M /	10 / Y Y Y Y
Signature		_ Date	9 06	12 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 16 OF 21 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
IN FIELD STRATEGIES INC				M 06 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 333 H STREET			Amo	unt
STE 500		1		
City	State	Zip Code		1487500.00
CHULA VISTA	CA	91910		nsaction ID : SE24.7 e of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/		06 24 2024
CANVASSING/FIELD OPERATIONS		Type	_	00 24 2024
Name of Federal Candidate:		X Support	Office Sou	ght: House District: 00
TRUMP, DONALD, , ,		Oppose	X Presi	dent Senate State:
Calendar Year-To-Date			Disburseme	ent For: Primary X General
Per Election for Office Sought	7-1-1-7-	7748500.00	2024	Other (specify) ▶
Full Name of Payee		Memo	·	e of Public Distribution/Dissemination
IN FIELD STRATEGIES INC				M M / D D / Y Y Y
Mailing Address				06 17 2024
333 H STREET STE 500			Amo	unt
City	State	Zip Code	— I	1487500.00
CHULA VISTA	CA	91910		nsaction ID : SE24.8 of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type		
Name of Federal Candidate:		Support	Office Sou	
BIDEN, JOE, , ,		Oppose	X Presi	
Calendar Year-To-Date		7748500.00	Disburseme	ent For: Primary X General
Per Election for Office Sought	7 7		2024	Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures				2975000.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(c) TOTAL Independent Expenditures			•	7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		•
GOBER, CHRIS, , , Signature		_ Date	e 06	19 / 2024

PAGE 17 OF 21 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ America PAC C00879510 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee IN FIELD STRATEGIES INC 24 2024 Mailing Address 333 H STREET Amount **STE 500** City State Zip Code 500000.00 CHULA VISTA CA 91910 Transaction ID: SE24.9 Date of Disbursement or Obligation Purpose of Expenditure Category/ CANVASSING/FIELD OPERATIONS 06 2024 Type Name of Federal Candidate: 00 Support Office Sought: House District: TRUMP, DONALD, , , Oppose President Senate State: Primary Disbursement For: X General Calendar Year-To-Date 7748500.00 2024 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Memo Item IN FIELD STRATEGIES INC 2024 24 06 Mailing Address 333 H STREET Amount STE 500 500000.00 City State Zip Code CHULA VISTA Transaction ID: SE24.10 CA 91910 Date of Disbursement or Obligation Purpose of Expenditure Category/ 2024 26 CANVASSING/FIELD OPERATIONS Type Name of Federal Candidate: 00 Support Office Sought: House District: BIDEN, JOE, , , X President Oppose Senate State: X General Disbursement For: Primary Calendar Year-To-Date 7748500.00 2024 Per Election for Office Sought Other (specify) ▶ 1000000.00 (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. GOBER, CHRIS, , , 2024 26 06 Date Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 18 OF 21
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				O state of
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed or	1
Full Name of Payee		☐ Memo	Item [Date of Public Distribution/Dissemination
RACONTEUR MEDIA				M 06
Mailing Address PO BOX 26511				Amount
City	Ctoto	Zin Codo		200000.00
City	State	Zip Code 78755	.	Transaction ID : SE24.1
Purpose of Expenditure				Date of Disbursement or Obligation
PRINTING		Category/ Type		06 / 12 / 2024
Name of Federal Candidate:		Support	Office S	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X F	resident Senate State:
Calendar Year-To-Date		7740500 00		ement For: Primary X General
Per Election for Office Sought	7 7	7748500.00	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item [Date of Public Distribution/Dissemination
RACONTEUR MEDIA				06 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 26511				
			/	Amount
City	State	Zip Code		200000.00
AUSTIN	TX	78755		Transaction ID : SE24.2 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/		06 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		Type		
Name of Federal Candidate:		Support	Office S	Sought: House District: 00
BDEN, JOE, , ,		Oppose	X F	resident Senate State:
Calendar Year-To-Date		7748500.00	Disburs	ement For: Primary X General
Per Election for Office Sought	7 7		ZUZ	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	·		•	400000.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		. [
(b) 00010 TAE of Officering 200 macportations Exportation				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GORER CHRIS			M = N	/ D D / Y Y Y Y Y Y
GOBER, CHRIS, , , Signature		_ Date	e 06	12 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 19 OF 21
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				C 500073310
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	n M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
RACONTEUR MEDIA				06 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 26511				Amount
		1		
City	State	Zip Code		124250.00 Transaction ID : SE24.3
AUSTIN	TX	78755		Date of Disbursement or Obligation
Purpose of Expenditure TEXT SERVICE		Category/ Type		06 12 / 2024
Name of Federal Candidate:			Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose		President Senate State:
Calendar Year-To-Date		industry in	Disburs	sement For: Primary X General
Per Election for Office Sought	7-1-1-7	7748500.00	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
RACONTEUR MEDIA				06 10 / Y Y Y Y Y
Mailing Address PO BOX 26511				
			4	Amount
City	State	Zip Code		124250.00
AUSTIN	TX	78755		Transaction ID : SE24.4 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		06 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
TEXT SERVICE		Type		00 12 2021
Name of Federal Candidate:		Support	Office	Sought: House District: 00
BIDEN, JOE, , ,		Oppose	X F	President Senate State:
Calendar Year-To-Date		7748500.00	Disburs	sement For: Primary X General
Per Election for Office Sought	7 7		2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	i		· •	248500.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		. [
(b) 00010 TAE of Officering 200 macportations Exportation				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,			M	M / D D / Y Y Y Y Y
Signature		_ Date	e 06	12 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 20 OF 21 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item D	Pate of Public Distribution/Dissemination
RACONTEUR MEDIA				M M / D D / Y Y Y Y
Mailing Address PO BOX 26511				06 27 2024 mount
City	Ctoto	Zin Codo		50000.00
City	State TX	Zip Code 78755		ransaction ID : SE24.11
	17	70700		Pate of Disbursement or Obligation
Purpose of Expenditure TEXT SERVICE		Category/ Type		06 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:			Office S	ought: House District: 00
TRUMP, DONALD, , ,		Oppose		resident Senate State:
Calendar Year-To-Date				ement For: Primary X General
Per Election for Office Sought	77	7748500.00	2024	Other (specify) ►
Full Name of Payee		☐ Memo	Item D	Pate of Public Distribution/Dissemination
RACONTEUR MEDIA				06 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 26511				
			A	mount
City	State	Zip Code		50000.00
AUSTIN	ТХ	78755		Fransaction ID : SE24.12 Pate of Disbursement or Obligation
Purpose of Expenditure TEXT SERVICE		Category/ Type		06 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		Турс		
Name of Federal Candidate:		Support	Office S	ought: House District: 00
BIDEN, JOE, , ,		Oppose	X PI	resident Senate State:
Calendar Year-To-Date		7748500.00		ement For: Primary X General
Per Election for Office Sought	7 - 1 - 7 -	774000.00	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				100000.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es			
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
GORER CHRIS			M = M	/ D D / Y Y Y Y
GOBER, CHRIS, , , Signature		_ Date	9 06	26 2024

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NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
, ,				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
RACONTEUR MEDIA				M M / D D / Y Y Y Y
Mailing Address PO BOX 26511				06 27 2024
PO BOX 26511				Amount
City	State	Zip Code		25000.00
AUSTIN	TX	78755		Transaction ID : SE24.13
				Date of Disbursement or Obligation
Purpose of Expenditure TEXT SERVICE		Category/ Type		06 28 / Y Y Y Y Y Y
Name of Federal Candidate:			Office	e Sought: House District:00
TRUMP, DONALD, , ,		Oppose		President Senate State:
				ursement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought		7748500.00	2024	Other (specify) >
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
RACONTEUR MEDIA				06 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 26511				00 27 2024
FO BOX 20311				Amount
City	State	Zip Code		25000.00
AUSTIN	TX	78755		Transaction ID : SE24.14
Purpose of Expenditure				Date of Disbursement or Obligation
TEXT SERVICE		Category/ Type		M 06
Name of Federal Candidate:		Support	Office	Sought: House District: 00
BIDEN, JOE, , ,		Oppose		President Senate State:
Calendar Year-To-Date				ursement For: Primary X General
Per Election for Office Sought	/h /h	7748500.00	2024	Other (specify)
				Other (specify)
(a) SUPTOTAL of Itemized Independent Evpanditures				50000 00
(a) SUBTOTAL of Itemized Independent Expenditures			. •	50000.00
(b) SUBTOTAL of Unitemized Independent Expenditure	* 00			
(b) SOBTOTAL of Officernized independent Experiation	es		▶	
(c) TOTAL Independent Expenditures				7740500.00
(c) TO TAE macpendent Experiantares			▶	7748500.00
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,			M	M / D D / Y Y Y Y
Signature		_ Date	e 0	6 28 2024