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 ▼
Protect Freedom Political Action Committee	C C00657866
Check if X 24-hour report 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y
Full Name of Payee	Date of Dublic Distribution/Discomination
Engagement Strategies, Inc.	Date of Public Distribution/Dissemination 07 25 2024
Mailing Address 5382 N Highway 36	Amount
City State Zip Code	87341.50
Erda UT 84074	Transaction ID : SE.7500 Date of Disbursement or Obligation
Purpose of Expenditure Tele Town Hall Category/ Type 004	07 26 / 2024
Name of Federal Candidate Support Office	e Sought: House District: 00
AMASH, JUSTIN, , , Oppose	President State: MI
Calendar Year-To-Date Per Election for Office Sought Disbut 2024	orsement For:
Full Name of Payee	Date of Public Distribution/Dissemination
Mailing Address	Amount
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office Oppose	e Sought: House District:
	President Senate State: ursement For: Primary General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	87341.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	87341.50
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.	•
Buic	17 26 2024
Signature	