

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 9
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) AB PAC		FEC IDENTIFICATION NUMBER ▼ C C00492140
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee Amplify Media Non-Contribution Account		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2024	
Mailing Address 222 W Ontario St Ste 600		Amount 76843.00	
City Chicago	State IL	Zip Code 60654-3655	Transaction ID : 501205805
Purpose of Expenditure TV Advertising	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 08 / 2024	
Name of Federal Candidate TRUMP, DONALD, J., , ☐ Support ☒ Oppose		Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought 17833569.19		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	

Full Name of Payee Amplify Media Non-Contribution Account		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2024	
Mailing Address 222 W Ontario St Ste 600		Amount 56151.00	
City Chicago	State IL	Zip Code 60654-3655	Transaction ID : 501205806
Purpose of Expenditure TV Advertising	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 08 / 2024	
Name of Federal Candidate TRUMP, DONALD, J., , ☐ Support ☒ Oppose		Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: WI	
Calendar Year-To-Date Per Election for Office Sought 12650715.33		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	132994.00
(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.

Mollineau, Rodell, , ,

Signature

Date

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NAME OF COMMITTEE (In Full) AB PAC		FEC IDENTIFICATION NUMBER ▼ C C00492140
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Full Name of Payee Amplify Media Non-Contribution Account		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2024
Mailing Address 222 W Ontario St Ste 600		Amount 117006.00
City Chicago	State IL	Zip Code 60654-3655
Purpose of Expenditure TV Advertising	Category/ Type	Transaction ID : 501205823 Date of Disbursement or Obligation MM / DD / YYYY 10 / 08 / 2024
Name of Federal Candidate TRUMP, DONALD, J., , ☐ Support ☒ Oppose		Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 22023695.19		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee Berni Consulting LLC Non-Contribution Account		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2024
Mailing Address 900 Camp St Ste 346		Amount 71960.00
City New Orleans	State LA	Zip Code 70130-3987
Purpose of Expenditure Mail	Category/ Type	Transaction ID : 501205817 Date of Disbursement or Obligation MM / DD / YYYY 09 / 20 / 2024
Name of Federal Candidate TRUMP, DONALD, J., , ☐ Support ☒ Oppose		Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 12650715.33		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	188966.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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Full Name of Payee Berni Consulting LLC Non-Contribution Account		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2024	
Mailing Address 900 Camp St Ste 346		Amount 102550.00	
City New Orleans	State LA	Zip Code 70130-3987	Transaction ID : 501205818
Purpose of Expenditure Mail	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 09 / 20 / 2024	
Name of Federal Candidate TRUMP, DONALD, J., , ☐ Support ☒ Oppose		Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought 22023695.19		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	

Full Name of Payee Berni Consulting LLC Non-Contribution Account		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2024	
Mailing Address 900 Camp St Ste 346		Amount 113696.00	
City New Orleans	State LA	Zip Code 70130-3987	Transaction ID : 501205819
Purpose of Expenditure Mail	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 09 / 20 / 2024	
Name of Federal Candidate TRUMP, DONALD, J., , ☐ Support ☒ Oppose		Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought 22023695.19		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	216246.00
(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.

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Full Name of Payee Berni Consulting LLC Non-Contribution Account		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 11 / 2024	
Mailing Address 900 Camp St Ste 346		Amount 113696.00	
City New Orleans	State LA	Zip Code 70130-3987	Transaction ID : 501205815
Purpose of Expenditure Mail	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 01 / 2024	
Name of Federal Candidate TRUMP, DONALD, J., , ☐ Support ☒ Oppose		Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought 17833569.19		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	

Full Name of Payee Berni Consulting LLC Non-Contribution Account		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 11 / 2024	
Mailing Address 900 Camp St Ste 346		Amount 102550.00	
City New Orleans	State LA	Zip Code 70130-3987	Transaction ID : 501205816
Purpose of Expenditure Mail	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 01 / 2024	
Name of Federal Candidate TRUMP, DONALD, J., , ☐ Support ☒ Oppose		Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought 22023695.19		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	216246.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee Berni Consulting LLC Non-Contribution Account		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 11 / 2024
Mailing Address 900 Camp St Ste 346		Amount 71960.00
City New Orleans	State LA	Zip Code 70130-3987
Purpose of Expenditure Mail	Category/ Type	Transaction ID : 501205824 Date of Disbursement or Obligation MM / DD / YYYY 10 / 01 / 2024
Name of Federal Candidate TRUMP, DONALD, J., , ☐ Support ☒ Oppose		Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 12650715.33		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee Berni Consulting LLC Non-Contribution Account		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2024
Mailing Address 900 Camp St Ste 346		Amount 906000.00
City New Orleans	State LA	Zip Code 70130-3987
Purpose of Expenditure Digital Advertising	Category/ Type	Transaction ID : 501205807 Date of Disbursement or Obligation MM / DD / YYYY 10 / 08 / 2024
Name of Federal Candidate TRUMP, DONALD, J., , ☐ Support ☒ Oppose		Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: MI
Calendar Year-To-Date Per Election for Office Sought 17833569.19		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	977960.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Full Name of Payee Berni Consulting LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2024	
Non-Contribution Account		Amount 1016000.00	
Mailing Address 900 Camp St Ste 346		Transaction ID : 501205808	
City State Zip Code New Orleans LA 70130-3987		Date of Disbursement or Obligation MM / DD / YYYY 10 / 08 / 2024	
Purpose of Expenditure Digital Advertising	Category/ Type		
Name of Federal Candidate TRUMP, DONALD, J., ,		Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	
		22023695.19	

Full Name of Payee Berni Consulting LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2024	
Non-Contribution Account		Amount 484000.00	
Mailing Address 900 Camp St Ste 346		Transaction ID : 501205809	
City State Zip Code New Orleans LA 70130-3987		Date of Disbursement or Obligation MM / DD / YYYY 10 / 08 / 2024	
Purpose of Expenditure Digital Advertising	Category/ Type		
Name of Federal Candidate TRUMP, DONALD, J., ,		Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: WI	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	
		12650715.33	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1500000.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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Full Name of Payee Berni Consulting LLC Non-Contribution Account		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2024
Mailing Address 900 Camp St Ste 346		Amount 85000.00
City New Orleans	State LA	Zip Code 70130-3987
Purpose of Expenditure Digital Advertising	Category/ Type	Transaction ID : 501205810 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate TRUMP, DONALD, J., ,	☐ Support ☒ Oppose	Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought 85000.00		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee Berni Consulting LLC Non-Contribution Account		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2024
Mailing Address 900 Camp St Ste 346		Amount 85000.00
City New Orleans	State LA	Zip Code 70130-3987
Purpose of Expenditure Digital Advertising	Category/ Type	Transaction ID : 501205811 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate TRUMP, DONALD, J., ,	☐ Support ☒ Oppose	Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: GA
Calendar Year-To-Date Per Election for Office Sought 85000.00		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	170000.00
(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.

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Full Name of Payee Berni Consulting LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2024	
Non-Contribution Account		Amount 85000.00	
Mailing Address 900 Camp St Ste 346		Transaction ID : 501205812	
City New Orleans	State LA	Zip Code 70130-3987	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure Digital Advertising		Category/ Type	
Name of Federal Candidate TRUMP, DONALD, J., ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	

Full Name of Payee Berni Consulting LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2024	
Non-Contribution Account		Amount 85000.00	
Mailing Address 900 Camp St Ste 346		Transaction ID : 501205813	
City New Orleans	State LA	Zip Code 70130-3987	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure Digital Advertising		Category/ Type	
Name of Federal Candidate TRUMP, DONALD, J., ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: ME
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	170000.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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Full Name of Payee Berni Consulting LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2024	
Non-Contribution Account		Amount 85000.00	
Mailing Address 900 Camp St Ste 346		Transaction ID : 501205814	
City New Orleans	State LA	Zip Code 70130-3987	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure Digital Advertising		Category/ Type	
Name of Federal Candidate TRUMP, DONALD, J., ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: NE
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	

Full Name of Payee Berni Consulting LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2024	
Non-Contribution Account		Amount 85000.00	
Mailing Address 900 Camp St Ste 346		Transaction ID : 501205821	
City New Orleans	State LA	Zip Code 70130-3987	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure Digital Advertising		Category/ Type	
Name of Federal Candidate TRUMP, DONALD, J., ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	170000.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	3742412.00

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.

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