

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) ROCKY MOUNTAIN VALUES PAC		FEC IDENTIFICATION NUMBER ▼ C C00872150
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee Canal Partners Media		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 12 / 2024
Mailing Address 900 Circle 75 Parkway Suite 1650		Amount 32912.50
City Atlanta	State GA	Zip Code 30339
Purpose of Expenditure Radio Advertising Buy (Estimate)	Category/ Type 004	Transaction ID : SE.4221 Date of Disbursement or Obligation MM / DD / YYYY 06 / 10 / 2024
Name of Federal Candidate HANKS, RON, , , ☐ Support ☒ Oppose		Office Sought: ☒ House District: 03 ☐ President ☐ Senate State: CO
Calendar Year-To-Date Per Election for Office Sought 290545.55		Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶

Full Name of Payee Canal Partners Media		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 12 / 2024
Mailing Address 900 Circle 75 Parkway Suite 1650		Amount 32912.50
City Atlanta	State GA	Zip Code 30339
Purpose of Expenditure Radio Advertising Buy (Estimate)	Category/ Type 004	Transaction ID : SE.4223 Date of Disbursement or Obligation MM / DD / YYYY 06 / 10 / 2024
Name of Federal Candidate TRUMP, DONALD J., , , ☐ Support ☒ Oppose		Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 212550.39		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	65825.00
(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.

LAMORTE, JUSTIN, , ,

Signature

Date

MM / DD / YYYY
06 / 13 / 2024

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(Schedule E)PAGE 2 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) ROCKY MOUNTAIN VALUES PAC		FEC IDENTIFICATION NUMBER ▼ C C00872150
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee Canal Partners Media		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 12 / 2024
Mailing Address 900 Circle 75 Parkway Suite 1650		Amount 42150.00
City Atlanta	State GA	Zip Code 30339
Purpose of Expenditure Television Advertising Buy (Estimate)	Category/ Type 004	Transaction ID : SE.4225 Date of Disbursement or Obligation MM / DD / YYYY 06 / 10 / 2024
Name of Federal Candidate HANKS, RON, , , ☐ Support ☒ Oppose		Office Sought: ☒ House District: 03 ☐ President ☐ Senate State: CO
Calendar Year-To-Date Per Election for Office Sought 332695.55		Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶

Full Name of Payee Canal Partners Media		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 12 / 2024
Mailing Address 900 Circle 75 Parkway Suite 1650		Amount 42150.00
City Atlanta	State GA	Zip Code 30339
Purpose of Expenditure Television Advertising Buy (Estimate)	Category/ Type 004	Transaction ID : SE.4227 Date of Disbursement or Obligation MM / DD / YYYY 06 / 10 / 2024
Name of Federal Candidate TRUMP, DONALD J., , , ☐ Support ☒ Oppose		Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 254700.39		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	84300.00
(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.

LAMORTE, JUSTIN, , ,

Signature

Date

MM / DD / YYYY
06 / 13 / 2024

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 3 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) ROCKY MOUNTAIN VALUES PAC			FEC IDENTIFICATION NUMBER ▼ C C00872150		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee Wavelength Strategy LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 06 / 12 / 2024		
Mailing Address 712 H Street NE Unit 526			Amount 15250.00		
City Washington State DC Zip Code 20002		Transaction ID : SE.4219 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 06 / 12 / 2024			
Purpose of Expenditure Digital Advertising Buy (Estimate)		Category/ Type 004			
Name of Federal Candidate HANKS, RON, , ,		☐ Support ☒ Oppose		Office Sought: ☒ House District: 03 ☐ President ☐ Senate State: CO	
Calendar Year-To-Date Per Election for Office Sought		381440.71		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y		
Mailing Address			Amount 		
City State Zip Code		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y			
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..... ▶			15250.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶			165375.00		
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 LAMORTE, JUSTIN, , ,			Date M M / D D / Y Y Y Y Y Y 06 / 13 / 2024		