

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 Values 2024		FEC IDENTIFICATION NUMBER ▼ C C00821439
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee e-releases [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 25 / 2024	
Mailing Address 5024 Campbell Blvd Ste D		Amount 1149.00	
City Baltimore	State MD	Zip Code 21236-5974	Transaction ID : EF6E411170D9F492CA21
Purpose of Expenditure Noncontrib acct reimbursement to Lindsay Stevens Press release		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 25 / 2024
Name of Federal Candidate Trump, Donald, J, ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: <u>00</u> ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		1528033.77	Disbursement For: ☐ Primary ☒ General ☐ 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..... ▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	0.00

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.

Lyons, Tony, , ,
Signature

Date **10 / 26 / 2024**