

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) American Hospital Association PAC
FEC IDENTIFICATION NUMBER C C00106146
Check if [x] 24-hour report [ ] 48-hour report [x] New report [ ] Amends report filed on

Full Name of Payee BettyandSmith LLC
Mailing Address 1818 N Street, NW, Suite 515
City Washington State DC Zip Code 20036
Purpose of Expenditure TV Ads & Production - Estimate Category/Type 004
Name of Federal Candidate Neal, Richard, E., Rep. [x] Support [ ] Oppose
Calendar Year-To-Date Per Election for Office Sought 496676.00

Date of Public Distribution/Dissemination 08 / 18 / 2020
Amount 273885.67
Transaction ID : 25711462
Date of Disbursement or Obligation 08 / 11 / 2020
Office Sought: [x] House District: 01 [ ] President [ ] Senate State: MA
Disbursement For: [x] Primary [ ] General 2020 [ ] Other (specify)

Full Name of Payee
Mailing Address
City State Zip Code
Purpose of Expenditure Category/Type
Name of Federal Candidate [ ] Support [ ] Oppose
Calendar Year-To-Date Per Election for Office Sought

Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation
Office Sought: [ ] House District: [ ] [ ] President [ ] Senate State: [ ]
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 273885.67, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures 273885.67

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.
Hatton, Melinda, Ms., [Electronically Filed] Date 08 / 18 / 2020
Signature