24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Protect Our Future PAC	C C00801514
	C 300001314
Check if X 24-hour report 48-hour report New report Amends report filed	i on M M / D D / Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
Screen Strategies Media	08
Mailing Address 11150 Fairfax Blvd	Amount
Ste 500 City State Zip Code	50000.00
Fairfax VA 22030-5029	Transaction ID : 500263206 Date of Disbursement or Obligation
Purpose of Expenditure Ad Buy - Digital Category/ Type	08
Name of Federal Candidate Support Office	e Sought: X House District: 10
FROST, MAXWELL, ALEJANDRO, , Oppose	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought Disbut 2022	ursement For: ✓ Primary General Other (specify) ✓
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	Amount
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure Category/	M M / D D / Y Y Y Y Y
Type	
Name of Federal Candidate Support Office	e Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	ursement For: Primary General
	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	50000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	50000.00
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.	
	08 10 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	