Schedule E)		PAGE 1 OF 39 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
America PAC		C C00879510
Check if 24-hour report X 48-hour report New re	eport Amends report fi	iled on
Full Name of Payee GOLDFINCH PARTNERS LLC		Date of Public Distribution/Dissemination
		10 15 7 2024
Mailing Address PO BOX 408		Amount
City State	Zip Code	22059.59
BAYVILLE NJ	08721	Transaction ID : SE24.642
Purpose of Expenditure	Category/	Date of Disbursement or Obligation
PRINTING/POSTAGE	Type	10 15 2024
Name of Federal Candidate	Support Of	ffice Sought: X House District: 00
BEGICH, NICK, , ,	Oppose	President Senate State: AK
Calendar Year-To-Date		isbursement For: Primary X General
Per Election for Office Sought	402330.21	Other (specify)
Full Name of Payee GOLDFINCH PARTNERS LLC		Date of Public Distribution/Dissemination
		10 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 408		Amount
City State	Zip Code	22059.59
City State BAYVILLE NJ	2ip Code 08721	Transaction ID : SE24.643
Purpose of Expenditure		Date of Disbursement or Obligation
PRINTING/POSTAGE	Category/ Type	10 15 / 2024
Name of Federal Candidate	Support O	Office Sought: X House District: 00
PELTOLA, MARY, , ,	Oppose	President Senate State: AK
Calendar Year-To-Date		oisbursement For: Primary X General
Per Election for Office Sought	402330.21	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	·····	44119.18
(b) SUBTOTAL of Unitemized Independent Expenditures		
	-	7 7 7
(c) TOTAL Independent Expenditures	·····	
Under penalty of perjury I certify that the independent expenditure	•	
with, or at the request or suggestion of, any candidate or authoriz party committee) any political party committee or its agent.	ed committee or agent or en	ither, or (ii the reporting entity is not a political
GOBER, CHRIS, , ,	Date	10 15 2024
Signature		

Schedule E)	i ENDITOTIES	PAGE 2 OF 39 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
America PAC		C C00879510
Check if 24-hour report X 48-hour report	New report Amends report file	ed on Man / Dab / Yayayay
Full Name of Payee		Date of Public Distribution/Dissemination
IMGE LLC		10 15 2024
Mailing Address 1401 H STREET NW STE 550		Amount
City State	Zip Code	22895.73
WASHINGTON DC	20005	Transaction ID : SE24.672 Date of Disbursement or Obligation
Purpose of Expenditure	Category/	M M / D D / Y Y Y Y
DIGITAL MEDIA	Туре	10 15 2024
Name of Federal Candidate	Support Offi	ce Sought:
SALAS, RUDY, , ,	X Oppose	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	706471.94 Dis 202	bursement For:
Full Name of Payee		Date of Public Distribution/Dissemination
THE LUKENS COMPANY		10 14 2024
Mailing Address 2800 SHIRLINGTON ROAD		Amount
STE 900		Amount
City State	e Zip Code	13484.00
ARLINGTON VA	22206	Transaction ID : SE24.654 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE	Category/ Type	10 15 2024
Name of Federal Candidate	Support Offi	ce Sought: X House District: 22
SALAS, RUDY, , ,	∑ Oppose	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	706471.94 Dis	bursement For: Primary X General 24 Other (specify) ▶
() QUETOTAL ()	,	
(a) SUBTOTAL of Itemized Independent Expenditures	·····	36379.73
(b) SUBTOTAL of Unitemized Independent Expenditures	•	7 7 7
(c) TOTAL Independent Expenditures	·····	
Under penalty of perjury I certify that the independent exp with, or at the request or suggestion of, any candidate or a party committee) any political party committee or its agent.		
GOBER, CHRIS, , ,	Date	10 15 7 2024
- 3		

Schedule E)	PAGE 3 OF 39 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
America PAC	C C00879510
	O statistic
Check if 24-hour report 48-hour report New report Amer	nds report filed on
Full Name of Payee	Date of Public Distribution/Dissemination
IMGE LLC	10 15 / Y Y Y Y 1
Mailing Address 1401 H STREET NW STE 550	Amount
City State Zip Code	22895.73
WASHINGTON DC 20005	Transaction ID : SE24.671
Purpose of Expenditure	Date of Disbursement or Obligation
DIGITAL MEDIA Category/ Type	10 15 7 2024
Name of Federal Candidate	pport Office Sought: X House District: 22
VALADAG DAVID	pose President Senate State: CA
Calendar Year-To-Date	Disbursement For: Primary General
Per Election for Office Sought 706471.94	2024 Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
THE LUKENS COMPANY	10 14 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD	Amount
STE 900	Amount
City State Zip Code	13484.00
ARLINGTON VA 22206	Transaction ID : SE24.653 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE Category/ Type	10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
1,750	ستتما لتا لتا البحد
Name of Federal Candidate	
VALADAO, DAVID, , ,	ppose President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 706471.94	Disbursement For: Primary X General
Per Election for Office Sought 7064/1.94	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	36379.73
(b) SUBTOTAL of Unitemized Independent Expenditures	
(b) SOBTOTAL OF CHICAMAZON INDEPONDENT EXPONDING COMMISSION CONTROL OF CHICAMAZON COMMISSION COMMIS	
(c) TOTAL Independent Expenditures	
	7 7
Under penalty of perjury I certify that the independent expenditures reported here	in were not made in cooperation, consultation, or concert
with, or at the request or suggestion of, any candidate or authorized committee or party committee) any political party committee or its agent.	
party committee, any pontical party committee of its agent.	
GOBER, CHRIS, , ,	Date 10 15 2024
Signature	Date 10 15 2024

				FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report X 48-hour report	New repo	ort Amends repo		M = M / D = D / Y = Y = Y
Full Name of Payee CONNECTION STRATEGY LLC			Date	of Public Distribution/Dissemination
CONNECTION STRATEGY LLC				10 / 14 / 2024
Mailing Address PO BOX 161			Amou	unt
City	State	Zip Code		7784.76
HUDSON	WI	54016		saction ID : SE24.701 of Disbursement or Obligation
Purpose of Expenditure MESSAGE PHONE CALLS		Category/ Type		10 / 15 / 2024
Name of Federal Candidate		Support	Office Sough	ht: X House District: 41
CALVERT, KEN, , ,		Oppose	Presid	lent Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	, , , ,	1118560.72	Disbursemer 2024	nt For: Primary X General Other (specify) ▶
Full Name of Payee			Date	of Public Distribution/Dissemination
Mailing Address 1401 H STREET NW STE 550			Amou	10 15 2024 unt
City	State	Zip Code		38592.85
WASHINGTON	DC	20005		action ID : SE24.673 of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		M 10 / 15 / 2024
Name of Federal Candidate		X Support	Office Sough	ht: X House District: 41
CALVERT, KEN, , ,		Oppose	Presid	dent Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	, , , ,	1118560.72	Disbursemer 2024	nt For:
(a) SUBTOTAL of Itemized Independent Expenditures	S			46377.61
(b) SUBTOTAL of Unitemized Independent Expenditu	ıres		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independen with, or at the request or suggestion of, any candidate party committee) any political party committee or its a	e or authorized			
GOBER, CHRIS, , , Signature		_ Date	10	15 / 2024
- Ignataro				

PAGE

OF

Schedule E)	11 L /W L/V	1101120		PAGE 5 OF 39 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				G GOOGLES
Check if 24-hour report X 48-hour report	New rep	port Amends repo	ort filed on	M / D = D / Y = Y = Y
Full Name of Payee			Date o	f Public Distribution/Dissemination
THE LUKENS COMPANY				10 14 2024
Mailing Address 2800 SHIRLINGTON ROAD			Amoun	
STE 900			Amoun	
City	State	Zip Code		21603.75
ARLINGTON	VA	22206		ction ID : SE24.655 f Disbursement or Obligation
Purpose of Expenditure		Category/	М	M / D D / Y Y Y
PRINTING/POSTAGE		Type		10 15 2024
Name of Federal Candidate		X Support	Office Sought	: X House District: 41
CALVERT, KEN, , ,		Oppose	Preside	nt Senate State: CA
Calendar Year-To-Date			Disbursement	For: Primary X General
Per Election for Office Sought		1118560.72	2024 Ot	her (specify)
Full Name of Payee			Date o	f Public Distribution/Dissemination
CONNECTION STRATEGY LLC				10 14 2024
Mailing Address PO BOX 161				10 14 2027
1			Amour	nt
City	State	Zip Code		7784.76
HUDSON	WI	54016		ction ID : SE24.702 f Disbursement or Obligation
Purpose of Expenditure		Category/	Date o	M / D D / Y Y Y
MESSAGE PHONE CALLS		Type	-	10 15 2024
Name of Federal Candidate		Support	Office Sought	: X House District: 41
ROLLINS, WILL, , ,		Oppose	Preside	CA
Calendar Year-To-Date			Disbursement	For: Primary X General
Per Election for Office Sought	7 7	1118560.72	2024 Ot	her (specify) ▶
	,			
(a) SUBTOTAL of Itemized Independent Expenditur	es		. •	29388.51
(b) SUBTOTAL of Unitemized Independent Expendi	tures		· •	4 4
(c) TOTAL Independent Expenditures				
(b) TOTAL Mappendont Experiences			· •	7 7 7
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candidates				
party committee) any political party committee or its		,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
GOBER, CHRIS, , ,		Date	10	15 2024
Signature				

Schedule E)		PAGE 6 OF 39 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
America PAC		C C00879510
		0
Check if 24-hour report X 48-hour report New	w report Amends report file	ed on Man / Dab / Yayayay
Full Name of Payee IMGE LLC		Date of Public Distribution/Dissemination
		10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550		Amount
City State	Zip Code	38592.84
WASHINGTON DC	20005	Transaction ID : SE24.674 Date of Disbursement or Obligation
Purpose of Expenditure	Category/	M M / D D / Y Y Y Y Y
DIGITAL MEDIA	Type	10 15 2024
Name of Federal Candidate	Support Off	ice Sought: X House District: 41
ROLLINS, WILL, , ,	X Oppose	President Senate State: CA
Calendar Year-To-Date		bursement For: Primary K General
Per Election for Office Sought	1118560.72	Other (specify)
Full Name of Payee		Date of Public Distribution/Dissemination
THE LUKENS COMPANY		10 / 14 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD		Amount
STE 900		Amount
City State	Zip Code	21603.75
ARLINGTON VA	22206	Transaction ID : SE24.656 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE	Category/	10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Туре	
Name of Federal Candidate		ice Sought: House District: 41
ROLLINS, WILL, , ,	X Oppose	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	1118560.72 Dis	sbursement For: Primary X General
Per Election for Office Sought	111000112	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	·····	60196.59
(b) SUBTOTAL of Unitemized Independent Expenditures		
		7 7 7
(c) TOTAL Independent Expenditures	·····	
		7 7
Under penalty of perjury I certify that the independent expend		
with, or at the request or suggestion of, any candidate or author party committee) any political party committee or its agent.	orized committee or agent of eitl	ner, or (if the reporting entity is not a political
GOBER, CHRIS, , ,	Date	10 15 2024
Signature	Date	

Schedule E)	DITORES	PAGE 7 OF 39 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
America PAC		C C00879510
Check if 24-hour report X 48-hour report New re	port Amends report file	ed on May / Dad / Yayayay
Full Name of Payee		Date of Public Distribution/Dissemination
IMGE LLC		10 15 2024
Mailing Address 1401 H STREET NW STE 550		Amount
	7: 0 !	20057.00
City State WASHINGTON DC	Zip Code 20005	33857.90 Transaction ID : SE24.675
Purpose of Expenditure		Date of Disbursement or Obligation
DIGITAL MEDIA	Category/ Type	10 15 2024
Name of Federal Candidate	Support Offi	ice Sought: X House District: 45
STEEL, MICHELLE, , ,	Oppose	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	941269.47 Dis 202	bursement For: Primary X General Other (specify) ▶
Full Name of Payee	·	Date of Public Distribution/Dissemination
THE LUKENS COMPANY		10 14 2024
Mailing Address 2800 SHIRLINGTON ROAD		America
STE 900		Amount
City State	Zip Code	19350.00
ARLINGTON VA	22206	Transaction ID : SE24.657 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE	Category/ Type	10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Off	ice Sought: House District: 45
STEEL, MICHELLE, , ,	Oppose	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	941269.47 Dis 202	bursement For: Primary General Other (specify) General
	<u>'</u>	
(a) SUBTOTAL of Itemized Independent Expenditures	·····	53207.90
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
		49-1-49-1-49-1-49-1-49-1-49-1-49-1-49-1
(c) TOTAL Independent Expenditures	· · · · · · · · · · · · · · · · · · ·	
Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.		
GOBER, CHRIS, , ,	Date	10 15 2024
Signature	Date	

Schedule E)	LXI LIIDI	TOTILO		PAGE 8 OF 39 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FI	EC IDENTIFICATION NUMBER ▼
America PAC				C00879510
				0 00010010
Check if 24-hour report X 48-hour report	New repo	ort Amends repo	ort filed on	M / D = D / Y = Y = Y
Full Name of Payee			Date of	Public Distribution/Dissemination
THE LUKENS COMPANY			M -	
Mailing Address 2800 SHIRLINGTON ROAD			Amount	
STE 900			Amount	
1 '		Zip Code		19348.50
ARLINGTON	VA	22206		tion ID : SE24.697 Disbursement or Obligation
Purpose of Expenditure		Category/	M	M / D D / Y Y Y
PRINTING/POSTAGE		Type		0 15 2024
Name of Federal Candidate		X Support	Office Sought:	House District: 45
STEEL, MICHELLE, , ,		Oppose	President	Senate State: CA
Calendar Year-To-Date			Disbursement F	For: Primary X General
Per Election for Office Sought	,,	941269.47	2024 Othe	er (specify)
Full Name of Payee			Date of	Public Distribution/Dissemination
IMGE LLC			M 1	
Mailing Address 1401 H STREET NW STE 550				سندا لتا لـــــــــــــــــــــــــــــــــ
			Amount	
City	State	Zip Code		33857.90
WASHINGTON	DC	20005		ion ID : SE24.676 Disbursement or Obligation
Purpose of Expenditure		Category/	M	M / D D / Y Y Y
DIGITAL MEDIA		Type		15 2024
Name of Federal Candidate		Support	Office Sought:	House District: 45
TRAN, DEREK, , ,		Oppose	President	CA
Calendar Year-To-Date		1	Disbursement F	For: Primary X General
Per Election for Office Sought		941269.47	2024 Oth	er (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures	j 		•	53206.40
(b) SUBTOTAL of Unitemized Independent Expenditure	res		· -	<i>T T T</i>
(c) TOTAL Independent Expenditures				
(C) TOTAL INDEPENDENT EXPENDITURES			•	7 7 7
Under penalty of perjury I certify that the independen with, or at the request or suggestion of, any candidate				
party committee) any political party committee or its a		-	. ,	
GOBER, CHRIS, , ,		Date	40	15 2024
Signature				

Schedule E)	•	PAGE 9 OF 39 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FE	C IDENTIFICATION NUMBER ▼
America PAC	C	
		,
Check if 24-hour report X 48-hour report New report	Amends report filed on	/ D D / Y Y Y Y
Full Name of Payee	Date of P	ublic Distribution/Dissemination
THE LUKENS COMPANY	M 10	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD	Amount	
STE 900		
City State Zip Code		19350.00
ARLINGTON VA 22206		on ID: SE24.658 isbursement or Obligation
Purpose of Expenditure Category	y/ M M	
PRINTING/POSTAGE Typ	oe lio	10 2027
Name of Federal Candidate	Support Office Sought:	House District: 45
TRAN, DEREK, , ,	Oppose President	Senate State: CA
Calendar Year-To-Date	Disbursement Fo	r: Primary X General
Per Election for Office Sought 941269.	47 2024 Other	(specify) ▶
Full Name of Payee	Date of P	ublic Distribution/Dissemination
THE LUKENS COMPANY	M = N	14 2024
Mailing Address 2800 SHIRLINGTON ROAD		
STE 900	Amount	
City State Zip Code		19348.50
ARLINGTON VA 22206		on ID : SE24.698 Disbursement or Obligation
Purpose of Expenditure Category	V/	/ D D / Y Y Y Y
PRINTING/POSTAGE Typ		15 2024
Name of Federal Candidate	Support Office Sought:	House District: 45
TRAN, DEREK, , ,	Oppose President	Senate State: CA
Calendar Year-To-Date	Disbursement Fo	or: Primary X General
Per Election for Office Sought 941269.	47 2024 Other	(specify)
(a) SUBTOTAL of Itemized Independent Expenditures	······	38698.50
(b) SUBTOTAL of Unitemized Independent Expenditures		7 7 7
(c) TOTAL Independent Expenditures		
(e) 10 M2 masporasin Exponantico	• L	4
Under penalty of perjury I certify that the independent expenditures reported with, or at the request or suggestion of, any candidate or authorized committee		
party committee) any political party committee or its agent.	•	
CORER CHRIS	M M / D	D / Y Y Y Y Y
GOBER, CHRIS, , ,		15 2024
Signature		

Schedule E)	LIVI EXI END	II OILEO		PAGE 10 OF 39 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FE [,]	C IDENTIFICATION NUMBER ▼
America PAC				
				, 000.00.1
Check if 24-hour report X 48-hour report	New rep	port Amends repo	ort filed on	/ D = D / Y = Y = Y
Full Name of Payee			Date of P	ublic Distribution/Dissemination
IMGE LLC			10 ^M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550			Amount	
City	State	Zip Code		28276.41
WASHINGTON	DC	20005		on ID : SE24.686
Purpose of Expenditure		T		isbursement or Obligation
DIGITAL MEDIA		Category/ Type	10	15 2024
Name of Federal Candidate		Support	Office Sought:	X House District:03
BACCAM, LANON, , ,		Oppose	President	Senate State: IA
Calendar Year-To-Date			Disbursement Fo	or: Primary X General
Per Election for Office Sought		402525.90	2024 Other	(specify) ►
Full Name of Payee			Date of P	Public Distribution/Dissemination
THE LUKENS COMPANY			M 10	14 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD			Amount	
STE 900			Amount	
City	State	Zip Code		17201.30
ARLINGTON	VA	22206		on ID: SE24.660 Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/	M 10	
		Type		
Name of Federal Candidate		Support	Office Sought:	House District: 03
BACCAM, LANON, , ,		X Oppose	President	Senate State: IA
Calendar Year-To-Date		402525.90	Disbursement Fo	or: Primary X General
Per Election for Office Sought		402020.00		r (specify) -
(a) SUBTOTAL of Itemized Independent Expendent	litures		. •	45477.71
(b) SUBTOTAL of Unitemized Independent Expe	enditures			
(-)		••••		7 7 7
(c) TOTAL Independent Expenditures				
				- Apr
Under penalty of perjury I certify that the indeposition of, any can				
party committee) any political party committee or		a committee or agent o	n enner, or (ii the	reporting entity is not a political
GOBER, CHRIS, , ,		Date	40	15 2024
Signature				

<u> </u>		FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
America PAC		C C00879510
Check if 24-hour report X 48-hour report New re	port Amends report filed	d on Mam / Dad / Yayayay
Full Name of Payee		Date of Public Distribution/Dissemination
IMGE LLC		10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550		Amount
City State	Zip Code	28276.42
WASHINGTON DC	20005	Transaction ID : SE24.685 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA	Category/ Type	10 15 2024
Name of Federal Candidate	Support Offic	e Sought: House District:03
NUNN, ZACH, , ,	Oppose	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	402525.90 Disb 2024	ursement For: Primary X General Other (specify) ▶
Full Name of Payee THE LUKENS COMPANY	1	Date of Public Distribution/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD STE 900		Amount
City State	Zip Code	17201.30
ARLINGTON VA	22206	Transaction ID : SE24.659 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE	Category/ Type	10 15 2024
Name of Federal Candidate	Support Office	e Sought: House District: 03
NUNN, ZACH, , ,	Oppose	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	402525.90 Disb 2024	oursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	····	45477.72
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	······	
Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.		
GOBER, CHRIS, , ,	Date	10 15 2024
Signature		

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NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
America PAC		C C00879510
Check if 24-hour report X 48-hour report New rep	port Amends report file	d on Mam / Dad / Yayayay
Full Name of Payee		Date of Public Distribution/Dissemination
IMGE LLC		10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550		Amount
City State	Zip Code	23796.45
WASHINGTON DC	20005	Transaction ID : SE24.678 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA	Category/ Type	10 / 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Office	ce Sought: X House District: 02
GOLDEN, JARED, , ,	X Oppose	President Senate State: ME
Calendar Year-To-Date Per Election for Office Sought	678183.43 Disk 2024	
Full Name of Payee		Other (specify)
THE LUKENS COMPANY		Date of Public Distribution/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD STE 900		Amount
City State	Zip Code	15220.00
ARLINGTON VA	22206	Transaction ID : SE24.662 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE	Category/ Type	10 15 2024
Name of Federal Candidate	Support Office	ce Sought: X House District: 02
GOLDEN, JARED, , ,		President Senate State: ME
Calendar Year-To-Date Per Election for Office Sought		bursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		39016.45
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	······································	
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
GOBER, CHRIS, , ,	Date	10 15 2024
Signature		

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OF

Schedule E)	PAGE	E 13 OF 39 SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIF	FICATION NUMBER ▼
America PAC	C C0087	9510
Check if 24-hour report X 48-hour report	lew report Amends report filed on	D / Y Y Y Y Y
Full Name of Payee	Date of Public Distri	ibution/Dissemination
IMGE LLC	M = M / D	
Mailing Address 1401 H STREET NW STE 550	Amount	
City State	Zip Code	23796.45
WASHINGTON DC	20005 Transaction ID : SE Date of Disburseme	24.677
Purpose of Expenditure	Category/	
DIGITAL MEDIA	Type 10 10	5 2024
Name of Federal Candidate	Support Office Sought: X Hou	use District:02
THERIAULT, AUSTIN, , ,		nate State: ME
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Form Form Form Form Form Form Form Form	Primary X General
Full Name of Payee	Date of Public Distr	ibution/Dissemination
THE LUKENS COMPANY	10 / 1	4 2024
Mailing Address 2800 SHIRLINGTON ROAD	Amount	
STE 900	Amount	
City State	Zip Code	15220.00
ARLINGTON VA	22206 Transaction ID : SE2 Date of Disbursement	
Purpose of Expenditure PRINTING/POSTAGE	Category/ Type 10 1	5 / 2024
Name of Federal Candidate	Support Office Sought: X Hot	use District: 02
THERIAULT, AUSTIN, , ,		nate State: ME
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Form Form Form Form Form Form Form Form	Primary X General
(a) SUBTOTAL of Itemized Independent Expenditures		39016.45
		7
(b) SUBTOTAL of Unitemized Independent Expenditures)	4
(c) TOTAL Independent Expenditures	······	79.
Under penalty of perjury I certify that the independent experience with, or at the request or suggestion of, any candidate or a party committee) any political party committee or its agent.		
GOBER, CHRIS, , ,	Date 10 / 15	2024
•		

Schedule E)		1101120		PAGE 14 OF 39 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				C 000073310
Check if 24-hour report X 48-hour report	New repo	ort Amends repo	ort filed on	= M / D = D / Y = Y = Y
Full Name of Payee			Date o	f Public Distribution/Dissemination
OSCEOLA STRATEGIES LLC				10 21 2024
Mailing Address 8 THE GREEN			Amoun	
STE A			Amour	
City	State	Zip Code		6027.00
DOVER	DE	19901		action ID : SE24.708 If Disbursement or Obligation
Purpose of Expenditure		Category/	М	10 15 2024
PRINTING/POSTAGE		Type		10 13 2024
Name of Federal Candidate		X Support	Office Sought	:: X House District: 07
BARRETT, TOM, , ,		Oppose	Preside	nt Senate State: MI
Calendar Year-To-Date			Disbursement	For: Primary General
Per Election for Office Sought		303798.00	2024 Ot	her (specify)
Full Name of Payee			Date o	of Public Distribution/Dissemination
OSCEOLA STRATEGIES LLC				10 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 8 THE GREEN				
STE A			Amour	nt
City	State	Zip Code		6027.00
DOVER	DE	19901		ction ID : SE24.709 of Disbursement or Obligation
Purpose of Expenditure		Category/	M	M / D D / Y Y Y
PRINTING/POSTAGE		Туре	_ _ L	10 15 2024
Name of Federal Candidate		Support	Office Sought	t: X House District: 07
HERTEL, CURTIS, , ,		Oppose	Preside	MI
Calendar Year-To-Date			Disbursement	t For: Primary X General
Per Election for Office Sought	7 7	303798.00	2024 Ot	ther (specify)
(a) SUBTOTAL of Itemized Independent Expenditure	es		•	12054.00
(b) SUBTOTAL of Unitemized Independent Expendi	tures		· -	
(a) TOTAL Independent Expanditures				
(c) TOTAL Independent Expenditures			· •	7 1 7 1 7
Under penalty of perjury I certify that the independ- with, or at the request or suggestion of, any candida				
party committee) any political party committee or its		1 Committee of again 1	7 Oitiloi, C. (no toporting office, to fiel a pointing
GOBER, CHRIS, , ,		Date	10	15 2024
Signature				

		FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
America PAC		C C00879510
Check if 24-hour report X 48-hour report New report	Amends report filed on	M = M / D = D / Y = Y = Y
Full Name of Payee OSCEOLA STRATEGIES LLC	Date	e of Public Distribution/Dissemination
OSCEULA STRATEGIES LLC		10 21 2024
Mailing Address 8 THE GREEN	Amo	ount
STE A	o O a da	5007.50
· ·		5897.50 nsaction ID : SE24.710 e of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE	Category/ Type	10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Office Sou	ght: X House District: 08
JUNGE, PAUL, , ,	Oppose Pres	ident Senate State: MI
Calendar Year-To-Date Per Election for Office Sought 3	Disbursem 2024	ent For:
Full Name of Payee OSCEOLA STRATEGIES LLC	Dat	e of Public Distribution/Dissemination
Mailing Address 8 THE GREEN	Am	10 21 2024 ount
STE A City State Zi	p Code	5897.50
	9901 Tran	saction ID : SE24.711
Purpose of Expenditure PRINTING/POSTAGE	Category/ Type	e of Disbursement or Obligation 10 15 2024
Name of Federal Candidate	Support Office Sou	ght: X House District: 08
MCDONALD, KRISTEN, , ,	X Oppose Pres	sident Senate State: MI
Calendar Year-To-Date Per Election for Office Sought	Disbursem 2024	ent For:
(a) SUBTOTAL of Itemized Independent Expenditures		11795.00
(b) SUBTOTAL of Unitemized Independent Expenditures		7
(c) TOTAL Independent Expenditures	·····	7 1 7 1 5
Under penalty of perjury I certify that the independent expenditures rewith, or at the request or suggestion of, any candidate or authorized coparty committee) any political party committee or its agent.		
GOBER, CHRIS, , , Signature	Date 10	15 2024
S.g. idda o		

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OF

,		FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
America PAC		C C00879510
Check if 24-hour report X 48-hour report New report	ort Amends report filed	on M M / D D / Y Y Y Y Y
Full Name of Payee OSCEOLA STRATEGIES LLC		Date of Public Distribution/Dissemination
OSCEULA STRATEGIES LLC		10 21 2024
Mailing Address 8 THE GREEN		Amount
STE A		
City State DOVER DE	Zip Code 19901	5379.00 Transaction ID : SE24.712
30.2	19301	Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE	Category/ Type	M 10 / 15 / Y 2024
Name of Federal Candidate	Support Office	Sought: House District: 10
JAMES, JOHN, , ,	Oppose	President Senate State: MI
Calendar Year-To-Date Per Election for Office Sought	301206.00 Disbu 2024	rsement For: Primary
Full Name of Payee OSCEOLA STRATEGIES LLC		Date of Public Distribution/Dissemination
		10 21 2024
Mailing Address 8 THE GREEN STE A		Amount
City State	Zip Code	5379.00
DOVER DE	19901	Transaction ID : SE24.713 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE	Category/ Type	10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Office	Sought: House District: 10
MARLINGA, CARL, , ,	X Oppose	President Senate State: MI
Calendar Year-To-Date Per Election for Office Sought	301206.00 Disbu 2024	rsement For:
(a) SUBTOTAL of Itemized Independent Expenditures		10758.00
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	·····	
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
GOBER, CHRIS, , ,	Date 10	0 15 2024
Signature		

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OF

Schedule E)	PAGE 17 OF 39 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
America PAC	C C00879510
Check if 24-hour report X 48-hour report New report Amends report filed on	= M / D = D / Y = Y = Y
Full Name of Payee Date of	of Public Distribution/Dissemination
CONNECTION STRATEGY LLC	10 14 2024
Mailing Address PO BOX 161 Amount	nt
City State Zip Code	3534.81
HUDSON WI 54016 Trans	action ID : SE24.703 of Disbursement or Obligation
Sulogol y/	M / D D / Y Y Y Y
MESSAGE PHONE CALLS Type	10 15 2024
Support Office Sough	t: X House District: 02
BACON, DON, , , Oppose Preside	ent Senate State: NE
Calendar Year-To-Date Per Election for Office Sought Disbursemen 2024 O	t For: Primary
Full Name of Payee Date	of Public Distribution/Dissemination
	10 14 2024
Mailing Address PO BOX 161 Amou	nt
City State Zip Code	3534.81
HUDSON WI 54016 Transa	oction ID : SE24.704 of Disbursement or Obligation
Purpose of Expenditure MESSAGE PHONE CALLS Category/ Type	10 / 15 / 2024
Name of Federal Candidate Support Office Sough	nt: X House District: 02
VARGAS, TONY, , , VARGAS, TONY, , , Oppose Preside	NF.
Calendar Year-To-Date Per Election for Office Sought Disbursement 2024	nt For:
(a) SUBTOTAL of Itemized Independent Expenditures	7069.62
(b) SUBTOTAL of Unitemized Independent Expenditures	
(a) CODITION OF CHIRCHING MINISPERSOR EXPONENTIAL COMMISSION OF CHIRCHING COMM	7 7 7
(c) TOTAL Independent Expenditures	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in c with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if party committee) any political party committee or its agent.	
GOBER, CHRIS, , , Signature Date	15 / Y Y Y Y Y Y Y 2024

S	chedule E)	120	⊢	PAGE 18 OF 39 FOR SE OF FORM 24/48
NA	AME OF COMMITTEE (In Full)			NTIFICATION NUMBER ▼
A	America PAC			00879510
				000.00.0
Ch	neck if 24-hour report X 48-hour report New report	Amends repor	rt filed on	D = D / Y = Y = Y = Y
	Full Name of Payee		Date of Public	Distribution/Dissemination
	IMGE LLC		10	15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 1401 H STREET NW STE 550		Amount	
	City State Zip C	Code		42618.98
	WASHINGTON DC 2000		Transaction ID) : SE24.688
	Purpose of Expenditure		Date of Disburs	sement or Obligation
	DIGITAL MEDIA	tegory/ Type	10	15 2024
	Name of Federal Candidate	Support	Office Sought:	House District: 07
	ALTMAN, SUE, , ,	X Oppose	President	Senate State: NJ
	Calendar Year-To-Date	2074 77	Disbursement For:	Primary X General
	Per Election for Office Sought 7620	074.77	Other (spe	cify) ▶
	Full Name of Payee		Date of Public	Distribution/Dissemination
	THE LUKENS COMPANY		10 /	14 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 2800 SHIRLINGTON ROAD			
	STE 900		Amount	
	City State Zip C	Code		24760.00
	ARLINGTON VA 2220	06	Transaction ID Date of Disburs	: SE24.664 sement or Obligation
	Purpose of Expenditure PRINTING/POSTAGE Cate	tegory/	M M /	15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		Туре		10 202
	Name of Federal Candidate	Support	Office Sought:	House District:07
	ALTMAN, SUE, , ,	X Oppose	President	Senate State: NJ
	Calendar Year-To-Date	2074.77	Disbursement For: 2024	Primary X General
	Per Election for Office Sought	074.77	Other (spe	ecify) ►
	(a) SUBTOTAL of Itemized Independent Expenditures		>	67378.98
	(b) SUBTOTAL of Unitemized Independent Expenditures			
	(b) SUBTOTAL OF OTHER HIZER HIGEPERICENT EXPONENTIAL OF OTHER HIZER		·	
	(c) TOTAL Independent Expenditures			
			-7-	19-11-25-1
	Under penalty of perjury I certify that the independent expenditures report	rtad harain wara	not made in cooperation	on concultation or concert
	with, or at the request or suggestion of, any candidate or authorized comm			
	party committee) any political party committee or its agent.			
	GOBER, CHRIS, , ,		M = M / D = D	/ Y - Y - Y - Y
	Signature	Date	10 15	2024

Schedule E)	1101120	PAGE 19 OF 39 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
America PAC		C C00879510
		O time.
Check if 24-hour report 48-hour report New report	ort Amends report file	ed on Man / Dab / Yayayay
Full Name of Payee		Date of Public Distribution/Dissemination
IMGE LLC		10 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550		Amount
City State	Zip Code	42618.99
WASHINGTON DC	20005	Transaction ID : SE24.687
Purpose of Expenditure	1 .	Date of Disbursement or Obligation
DIGITAL MEDIA	Category/ Type	10 / 15 / Y Y Y Y Y
Name of Federal Candidate	Support Offi	ice Sought: House District: 07
KEAN, TOM, , ,	Oppose	President Senate State: NJ
Calendar Year-To-Date		bursement For: Primary X General
Per Election for Office Sought	762074.77	Other (specify)
Full Name of Payee		Date of Public Distribution/Dissemination
THE LUKENS COMPANY		10 14 2024
Mailing Address 2800 SHIRLINGTON ROAD		Amount
STE 900		Amount
City State	Zip Code	24760.00
ARLINGTON VA	22206	Transaction ID : SE24.663 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE	Category/	10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Type	السندا لتا لتا
Name of Federal Candidate	Support Offi	ice Sought: House District: 07
KEAN, TOM, , ,	Oppose	President Senate State: NJ
Calendar Year-To-Date	762074.77 Dis 202	sbursement For: Primary X General
Per Election for Office Sought	702074.77	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	·····	67378.99
(b) SUBTOTAL of Unitemized Independent Expenditures		
(b) GOD TOTAL OF GITTER AND	P	7 7 7
(c) TOTAL Independent Expenditures		
	•	7 7 7
Under penalty of perjury I certify that the independent expenditures	reported herein were not i	made in cooperation, consultation, or concert
with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
party committee or no agont.		
GOBER, CHRIS, , ,	Date	10 15 2024
Signature	_ Date	2027

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NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
America PAC		C C00879510
Check if 24-hour report X 48-hour report New report	rt Amends report filed	d on Mam / Dad / Yayayay
Full Name of Payee		Date of Public Distribution/Dissemination
IMGE LLC		10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550		Amount
City State 2	Zip Code	30206.68
	20005	Transaction ID : SE24.682 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA	Category/ Type	10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Office	e Sought: House District:09
KAPTUR, MARCY, , ,	X Oppose	President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	736622.30 Disb 2024	
Full Name of Payee		Other (specify) Date of Public Distribution/Dissemination
THE LUKENS COMPANY		Date of Public Distribution/Dissemination 10 14 2024
Mailing Address 2800 SHIRLINGTON ROAD STE 900		Amount
	Zip Code	16842.00
ARLINGTON VA	22206	Transaction ID : SE24.666 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE	Category/ Type	10 15 2024
Name of Federal Candidate	Support Office	re Sought: X House District: 09
KAPTUR, MARCY, , ,		President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		ursement For: Primary X General 4 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures		47048.68
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	······	
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
GOBER, CHRIS, , ,		10 15 2024
Signature		

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		FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
America PAC		C C00879510
Check if 24-hour report X 48-hour report New report	Amends report filed on	M / D D / Y B Y B Y B Y
Full Name of Payee	Date o	of Public Distribution/Dissemination
IMGE LLC		10 15 2024
Mailing Address 1401 H STREET NW STE 550	Amour	
City State Zip Cod	e	30206.69
WASHINGTON DC 20005	Transa	action ID : SE24.681 If Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA Category Ty	ory/ /pe	10 15 / 2024
Name of Federal Candidate	Support Office Sought	t: X House District: 09
MERRIN, DERRICK, , ,	Oppose Preside	
Calendar Year-To-Date Per Election for Office Sought 736622	Disbursement 2024 Ot	t For: Primary X General
Full Name of Payee		of Public Distribution/Dissemination
THE LUKENS COMPANY	M	10 14 2024
Mailing Address 2800 SHIRLINGTON ROAD STE 900	Amour	لىنىا لىا ك
City State Zip Cod	le le	16842.00
ARLINGTON VA 22206		ction ID : SE24.665 If Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE Category Ty	orv/	10 15 2024
Name of Federal Candidate	Support Office Sought	t: X House District:09
MERRIN, DERRICK, , ,	Oppose Preside	ent Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 736622	Disbursement 2024 Ot	t For:
(a) SUBTOTAL of Itemized Independent Expenditures	······································	47048.69
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	······································	7 1 7 1 7
Under penalty of perjury I certify that the independent expenditures reported with, or at the request or suggestion of, any candidate or authorized committ party committee) any political party committee or its agent.		
GOBER, CHRIS, , ,	Date 10	15 2024
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Schedule E)	LAF LINDI	TONES		PAGE 22 OF 39 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report X 48-hour report	New repo	ort Amends repo		M / D = D / Y = Y = Y
Full Name of Payee			Date of	Fublic Distribution/Dissemination
IMGE LLC			M	10 15 2024
Mailing Address 1401 H STREET NW STE 550			Amoun	t
City	State	Zip Code		32308.36
WASHINGTON	DC	20005		ction ID : SE24.683 f Disbursement or Obligation
Purpose of Expenditure		Category/		M / D D / Y Y Y
DIGITAL MEDIA		Туре		10 15 2024
Name of Federal Candidate		X Support	Office Sought:	House District: 13
COUGHLIN, KEVIN, , ,		Oppose	Presider	
Calendar Year-To-Date Per Election for Office Sought	, , ,	906330.23	Disbursement 2024 Oth	For: Primary X General ner (specify) ▶
Full Name of Payee			Date of	f Public Distribution/Dissemination
THE LUKENS COMPANY				10 14 2024
Mailing Address 2800 SHIRLINGTON ROAD			Amoun	
STE 900			Amoun	
City	State	Zip Code		19292.00
ARLINGTON	VA	22206		tion ID : SE24.667 f Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 ^M / 15 ^D / 2024
Name of Federal Candidate		Support	Office Sought	: X House District: 13
COUGHLIN, KEVIN, , ,		Oppose	Preside	OH
Calendar Year-To-Date Per Election for Office Sought	, , ,	906330.23	Disbursement 2024 Ot	For: Primary General her (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	;			51600.36
(b) SUBTOTAL of Unitemized Independent Expenditu	res			7 7 7 7
				7- 1-7- 1-7-
(c) TOTAL Independent Expenditures			•	7 7 7
Under penalty of perjury I certify that the independen with, or at the request or suggestion of, any candidate party committee) any political party committee or its a	e or authorized			
GOBER, CHRIS, , ,		_ Date	10 /	15 / 2024
3				

Sc	chedule E)	EXI ENDI				PAGE 23 OF 39 FOR SE OF FORM 24/48
NA	ME OF COMMITTEE (In Full)				FEC ID	DENTIFICATION NUMBER ▼
Α	America PAC					C00879510
Ch	neck if 24-hour report X 48-hour report	New repo	ort Amends repo	ort filed on	M = M /	D D / Y Y Y Y
	Full Name of Payee			Date	of Public	c Distribution/Dissemination
	IMGE LLC				M M M	15 2024
	Mailing Address 1401 H STREET NW STE 550			Amo	ount	
	City	State	Zip Code	$ \Gamma$		32308.35
	WASHINGTON	DC	20005			ID : SE24.684
	Purpose of Expenditure		Cotocon/	Date	of Disbu	ursement or Obligation
	DIGITAL MEDIA		Category/ Type	_	10	15 2024
	Name of Federal Candidate		Support	Office Soug	ght:	House District: 13
	SYKES, EMILIA, , ,		X Oppose	Presi		Senate State: OH
	Calendar Year-To-Date		222222	Disburseme	ent For:	Primary K General
	Per Election for Office Sought		906330.23		Other (sp	pecify) ▶
	Full Name of Payee			Date	e of Publi	c Distribution/Dissemination
	THE LUKENS COMPANY				M M M	14 2024
	Mailing Address 2800 SHIRLINGTON ROAD					
	STE 900			Amo	ount	
	City	State	Zip Code			19292.00
	ARLINGTON	VA	22206			D: SE24.668 ursement or Obligation
	Purpose of Expenditure		Category/		10	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	PRINTING/POSTAGE		Type		10	10 2024
	Name of Federal Candidate		Support	Office Sou	ght:	X House District: 13
	SYKES, EMILIA, , ,		X Oppose	Pres	ident	Senate State: OH
	Calendar Year-To-Date		906330.23	Disburseme 2024	ent For:	Primary Seneral
	Per Election for Office Sought		500550.25		Other (sp	pecify)
	(a) SUBTOTAL of Itemized Independent Expenditures			• •	7	51600.35
	(b) SUBTOTAL of Unitemized Independent Expenditur	res				
				, r	7	49-
	(c) TOTAL Independent Expenditures					
,	Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its ag	e or authorized				
	GOBER, CHRIS, , ,			M = M	/ D D	/ Y Y Y Y
	Signature		_ Date	10	15	2024

	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
America PAC	C C00879510
Check if 24-hour report X 48-hour report No.	ew report Amends report filed on Amends report
Full Name of Payee	Date of Public Distribution/Dissemination
IMGE LLC	10 15 2024
Mailing Address 1401 H STREET NW STE 550	Amount
City State	Zip Code 19367.16
WASHINGTON DC	20005 Transaction ID : SE24.680 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA	Category/ Type Category/ 10 Type Type
Name of Federal Candidate	Support Office Sought: X House District: 03
GLUESENKAMP PEREZ, MARIE, , ,	Oppose President Senate State: WA
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary ☐ General 2024 Other (specify) ►
Full Name of Payee THE LUKENS COMPANY	Date of Public Distribution/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD STE 900	Amount
City State	Zip Code 11887.00
ARLINGTON VA	22206 Transaction ID : SE24.670 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE	Category/ Type 10 10 15 / 2024
Name of Federal Candidate	Support Office Sought: House District: 03
GLUESENKAMP PEREZ, MARIE, , ,	Oppose President Senate State: WA
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: ☐ Primary ☐ General 2024 ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	31254.16
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	······································
	ditures reported herein were not made in cooperation, consultation, or concert horized committee or agent of either, or (if the reporting entity is not a political
GOBER, CHRIS, , ,	Date 10 / 15 / 2024
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Schedule E)	101120	PAGE 25 OF 39 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼			
America PAC		C C00879510			
Check if 24-hour report X 48-hour report New report	ort Amends report file	ed on Man / Dad / Yayayay			
Full Name of Payee IMGE LLC		Date of Public Distribution/Dissemination			
		10 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 1401 H STREET NW STE 550		Amount			
City State	Zip Code	19367.17			
WASHINGTON DC	20005	Transaction ID : SE24.679 Date of Disbursement or Obligation			
Purpose of Expenditure	Category/	Man / Dad / Yayayay			
DIGITAL MEDIA	Type	10 15 2024			
Name of Federal Candidate	Support Offi	ce Sought: X House District: 03			
KENT, JOE, , ,	Oppose	President Senate State: WA			
Calendar Year-To-Date		bursement For: Primary General			
Per Election for Office Sought	556911.89	Other (specify)			
Full Name of Payee		Date of Public Distribution/Dissemination			
THE LUKENS COMPANY		10 14 2024			
Mailing Address 2800 SHIRLINGTON ROAD		Amount			
STE 900		Amount			
City State	Zip Code	11887.00			
ARLINGTON VA	22206	Transaction ID : SE24.669 Date of Disbursement or Obligation			
Purpose of Expenditure	Category/	10 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
PRINTING/POSTAGE	Type	10 10 202.			
Name of Federal Candidate	X Support Off	ice Sought: House District: 03			
KENT, JOE, , ,	Oppose	President Senate State: WA			
Calendar Year-To-Date	Dis 556911.89	bursement For: Primary General			
Per Election for Office Sought	550911.69	Other (specify) -			
(a) SUBTOTAL of Itemized Independent Expenditures	·····	31254.17			
(b) SUBTOTAL of Unitemized Independent Expenditures					
(b) SOBTOTAL OF OFFICE TRANSPORTAGES EXPONENTIAL CO.	P				
(c) TOTAL Independent Expenditures					
	•	4 4			
Under penalty of perjury I certify that the independent expenditures	reported herein were not i	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.				
, , assert,, permitted of the age.tt.					
GOBER, CHRIS, , ,	Date	10 15 2024			
Signature	_ Date	.5 .5 .2027			

	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
America PAC	C C00879510
Check if 24-hour report 48-hour report New report Amends report filed	on Man / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
ARENA MAIL & DIGITAL	10 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1260 EAST STRINGHAM AVE STE 400	Amount
City State Zip Code	175550.00
SALT LAKE CITY UT 84106	Transaction ID : SE24.650 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE Category/ Type	10 15 2024
Name of Federal Candidate Support Office	e Sought: House District:00
HADDIS KAMALA	President Senate State:
Calendar Year-To-Date Per Election for Office Sought Disbut 2024	
	Other (specify) ▶
Full Name of Payee BLITZ CANVASSING LLC	Date of Public Distribution/Dissemination
Mailing Address 10065 E HARVARD AVE	10 14 2024
STE 400	Amount
City State Zip Code	1381305.50
DENVER CO 80231	Transaction ID : SE24.707 Date of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS Category/ Type	10 15 / 2024
	e Sought: House District: 00
HARRIS, KAMALA, , ,	President Senate State:
Calendar Year-To-Date Per Election for Office Sought Disbut 2024	ursement For: Primary General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	1556855.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of eithe party committee) any political party committee or its agent.	
GODER, CHRIS, , ,	15 2024
Signature	

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OF

Schedule E)	I EXI END	TOTILO		PAGE 27 OF 39 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			F	EC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report X 48-hour report	New rep	ort Amends repo	ort filed on	M / D = D / Y = Y = Y
Full Name of Payee			Date of	Public Distribution/Dissemination
IMGE LLC			M 10	M / D D / Y Y Y
Mailing Address 1401 H STREET NW STE 550			Amount	
City	State	Zip Code		150661.00
WASHINGTON	DC	20005		ction ID : SE24.648 Disbursement or Obligation
Purpose of Expenditure		Category/	М	
DIGITAL MEDIA		Type		0 15 2024
Name of Federal Candidate		Support	Office Sought:	House District: 00
HARRIS, KAMALA, , ,		X Oppose	President	
Calendar Year-To-Date Per Election for Office Sought	10	02240410.75	Disbursement F 2024 Othe	For: Primary
Full Name of Payee	-		Date of	Public Distribution/Dissemination
IMGE LLC			M 1	
Mailing Address 1401 H STREET NW STE 550			Amount	
City	State	Zip Code		63105.50
WASHINGTON	DC	20005		ion ID : SE24.690 Disbursement or Obligation
Purpose of Expenditure TEXTING		Category/ Type	M 1	
Name of Federal Candidate HARRIS, KAMALA, , ,		Support	Office Sought:	House District:00
17 (((G, 10 (W) L) (, , ,		X Oppose	X Presiden	
Calendar Year-To-Date Per Election for Office Sought	1(02240410.75	Disbursement I 2024 Oth	For:
				(1)/
(a) SUBTOTAL of Itemized Independent Expenditure	es		· •	213766.50
(b) SUBTOTAL of Unitemized Independent Expendit	tures			
(c) TOTAL Independent Expenditures			· -	7 1 7 1 7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	40	15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature				

Schedule E)	IDENT EXTEND	II OI ILO		PAGE 28 OF 39 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC ID	DENTIFICATION NUMBER ▼
America PAC				C00879510
Check if 24-hour report X 48-hour repo	ort New rep	ort Amends repo	ort filed on	D = D / Y = Y = Y
Full Name of Payee			Date of Public	Distribution/Dissemination
IMGE LLC			10	13 2024
Mailing Address 1401 H STREET NW STE 5	i50		Amount	
City	State	Zip Code		3014.15
WASHINGTON	DC	20005	Transaction I	D: SE24.700 Irsement or Obligation
Purpose of Expenditure TEXTING		Category/	M M M	15 2024
TEXTING		Type		10 2021
Name of Federal Candidate		Support	Office Sought:	House District: 00
HARRIS, KAMALA, , ,		X Oppose	Y President	Senate State:
Calendar Year-To-Date Per Election for Office Sought	11	02240410.75	Disbursement For: 2024 Other (sp	Primary
Full Name of Payee			Date of Publi	c Distribution/Dissemination
IMGE LLC			M M M	19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE	Ē 550		Amount	
City	State	Zip Code		53909.95
WASHINGTON	DC	20005	Transaction II Date of Disbu	D: SE24.717 ursement or Obligation
Purpose of Expenditure TEXTING		Category/ Type	M 10	15 2024
		Турс		
Name of Federal Candidate HARRIS, KAMALA, , ,		Support	Office Sought:	House District: 00
TIANNO, IVAWIALA, , ,		X Oppose	X President	Senate State:
Calendar Year-To-Date Per Election for Office Sought	, , , , , ,	02240410.75	Disbursement For: 2024 Other (sp	Primary X General Decify) ▶
-				
(a) SUBTOTAL of Itemized Independent Exp	enditures		•	56924.10
(b) SUBTOTAL of Unitemized Independent E	xpenditures			
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the ind with, or at the request or suggestion of, any party committee) any political party committee	candidate or authorized			
GOBER, CHRIS, , ,		Date	M M / D D D 15	2024
Signature				

Schedule E)	PAGE 29 OF 39 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	C IDENTIFICATION NUMBER ▼
America PAC	C00879510
Check if 24-hour report 48-hour report New report Amends report filed on	/ D = D / Y = Y = Y
Full Name of Payee Date of P	ublic Distribution/Dissemination
OSCEOLA STRATEGIES LLC 10	
Mailing Address 8 THE GREEN Amount	
STE A	
City State Zip Code	194517.00
Date of D	on ID: SE24.652 hisbursement or Obligation
Purpose of Expenditure Category/	
PRINTING/POSTAGE Type 10	15 2024
Name of Federal Candidate Support Office Sought:	House District: 00
HARRIS, KAMALA, , , Oppose President	Senate State:
Calendar Year-To-Date Per Election for Office Sought Disbursement For 2024 Other	or: Primary
	Public Distribution/Dissemination
RED MAVERICK MEDIA LLC	
Mailing Address 1426 N 3RD STREET	10 2024
STE 310	
City State Zip Code	806.50
	on ID : SE24.692 Disbursement or Obligation
Purpose of Expenditure Category/	
ТКИЧТИЧС	10 2024
Name of Federal Candidate Support Office Sought:	House District: 00
HARRIS, KAMALA, , , Oppose President	Senate State:
Calendar Year-To-Date Per Election for Office Sought Disbursement For 2024 Other	or:
(a) SUBTOTAL of Itemized Independent Expenditures	195323.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in coop with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the party committee) any political party committee or its agent.	
OODER, CITRIS, , ,	15 / Y = Y = Y = Y
Signature Date 10	15 2024

	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
America PAC	C C00879510
Check if 24-hour report X 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y
Full Name of Payee	Date of Public Distribution/Dissemination
THE BAKER GROUP LLC	10 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 416 WILSON PIKE CIRCLE	Amount
City State Zip Code	261280.00
BRENTWOOD TN 37027	Transaction ID : SE24.715 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE Category/ Type	10 15 2024
Name of Federal Candidate Support Office	Sought: House District: 00
HADDIS KAMALA	President Senate State:
	rsement For: Primary X General
Per Election for Office Sought 102240410.75 2024	Other (specify) >
Full Name of Payee THE SYNAPSE GROUP LLC	Date of Public Distribution/Dissemination
THE STNAPSE GROUP LLC	10 14 2024
Mailing Address 1309 COFFEEN AVE STE 1200	Amount
City State Zip Code	467500.00
	Transaction ID : SE24.719 Date of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS Category/ Type	10 15 / Y 2024
Name of Federal Candidate Support Office	Sought: House District: 00
HARRIS, KAMALA, , ,	President Senate State:
Calendar Year-To-Date Per Election for Office Sought Disbut 2024	rsement For: Primary X General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	728780.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not many with, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	
GOBER, CHRIS, , , Date	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

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OF

	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
America PAC	C C00879510
Check if 24-hour report X 48-hour report New report Amends report filed of	on Mam / Dab / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
ARENA MAIL & DIGITAL	10 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1260 EAST STRINGHAM AVE STE 400	Amount
City State Zip Code	175550.00
SALT LAKE CITY UT 84106	Transaction ID : SE24.649 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE Category/ Type	10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	Sought: House District: 00
TRUMP DONALD	President Senate State:
	sement For: Primary General
Per Election for Office Sought 102240410.75 2024	Other (specify) >
Full Name of Payee BLITZ CANVASSING LLC	Date of Public Distribution/Dissemination
DETECTIVACCING LEC	10 14 2024
Mailing Address 10065 E HARVARD AVE STE 400	Amount
City State Zip Code	1381305.50
DENVER CO 80231	Transaction ID : SE24.706 Date of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS Category/ Type	10 15 / 2024
	Sought: House District: 00
TRUMP, DONALD, , ,	President Senate State:
Calendar Year-To-Date Per Election for Office Sought Disbur 2024	rsement For:
(a) SUBTOTAL of Itemized Independent Expenditures	1556855.50
(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 with, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	
GOBER, CHRIS, , , Date	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

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	neddie E)		FOR SE OF FORM 24/48
	ME OF COMMITTEE (In Full)	FEC	IDENTIFICATION NUMBER ▼
A	merica PAC	C	C00879510
Che	eck if 24-hour report X 48-hour report New report Amends report filed	on M M M	/ D = D / Y = Y = Y = Y
T	Full Name of Payee	Date of Pub	olic Distribution/Dissemination
	CONNECTION STRATEGY LLC	10	/ 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address PO BOX 161	Amount	
	City State Zip Code		110384.49
	HUDSON WI 54016		n ID : SE24.695 bursement or Obligation
	Purpose of Expenditure MESSAGE PHONE CALLS Category/ Type	10	15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
-	Name of Federal Candidate Support Office	Sought:	House District: 00
	TRUMP DONALD	President	Senate State:
	Calendar Year-To-Date Per Election for Office Sought Disbut 2024	rsement For:	
ŀ	Full Name of Payee		specify) ▶blic Distribution/Dissemination
	CONNECTION STRATEGY LLC	M M M	15 2024
	Mailing Address PO BOX 161	Amount	2027
	City State Zip Code		344879.07
	HUDSON WI 54016		ID: SE24.696 sbursement or Obligation
	Purpose of Expenditure MESSAGE PHONE CALLS Category/ Type	10 ^M	15 / 2024
		Sought:	House District: 00
	TOUMD DONALD	President	Senate State:
	Calendar Year-To-Date Per Election for Office Sought Disbut 2024		Primary
	(a) SUBTOTAL of Itemized Independent Expenditures		455263.56
((b) SUBTOTAL of Unitemized Independent Expenditures		7
((c) TOTAL Independent Expenditures		p 1 /p 1 /m
١	Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.		
	GOBER, CHRIS, , , Date		
	Signature		

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OF

,	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
America PAC	C C00879510
Check if 24-hour report 48-hour report New report Amends report filed o	n M = M / D = D / Y = Y = Y
	Date of Public Distribution/Dissemination
CONNECTION STRATEGY LLC	10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 161	Amount
City State Zip Code	163341.60
	Transaction ID : SE24.705 Date of Disbursement or Obligation
Purpose of Expenditure MESSAGE PHONE CALLS Category/ Type	10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office 9	Sought: House District: 00
TRUMP, DONALD, , ,	President Senate State:
Calendar Year-To-Date Per Election for Office Sought Disburs 2024	ement For: Primary X General Other (specify) ▶
FULL REACH MEDIA GROUP LLC	Date of Public Distribution/Dissemination
Mailing Address PO BOX 101552	Amount
City State Zip Code	2892.00
	ransaction ID : SE24.693 Date of Disbursement or Obligation
Purpose of Expenditure TEXTING Category/ Type	10 15 2024
Name of Federal Candidate Support Office 9	Sought: House District: 00
TRUMP, DONALD, , ,	President Senate State:
	sement For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures	166233.60
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not mad with, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	
GOBER, CHRIS, , , Date	15 2024
Signature	

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				FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report X 48-hour report	New repo	ort Amends repo		M / D D / Y = Y = Y
Full Name of Payee			Date of	of Public Distribution/Dissemination
IMGE LLC			M	10 13 2024
Mailing Address 1401 H STREET NW STE 550			Amou	nt
City	State	Zip Code		111111.00
WASHINGTON	DC	20005		action ID : SE24.644 of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		10 15 2024
Name of Federal Candidate		Support	Office Sough	t: House District: 00
TRUMP, DONALD, , ,		Oppose	X Preside	
Calendar Year-To-Date Per Election for Office Sought	10	02240410.75	Disbursemen 2024 O	t For: Primary X General ther (specify) ▶
Full Name of Payee	_			of Public Distribution/Dissemination
Mailing Address 1401 H STREET NW STE 550			Amou	10 14 2024 nt
City	State	Zip Code	$-\Gamma$	111111.00
WASHINGTON	DC	20005		oction ID : SE24.645 of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		10 / 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		X Support	Office Sough	it: House District: 00
TRUMP, DONALD, , ,		Oppose	X Preside	ent Senate State:
Calendar Year-To-Date Per Election for Office Sought	, 10	02240410.75	Disbursemen 2024	
(a) SUBTOTAL of Itemized Independent Expenditure	es		•	222222.00
(b) SUBTOTAL of Unitemized Independent Expendi	itures		· •	7
(c) TOTAL Independent Expenditures			· [7 1 7 1 7
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , , Signature		_ Date	10	15 / 2024
Signaturo				

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Schedule E)	ERT EXTERNS	II OILO		PAGE 35 OF 39 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC I	DENTIFICATION NUMBER ▼
America PAC			С	C00879510
Check if 24-hour report X 48-hour report	X New rep	port Amends repo	ort filed on	/ D D / Y T Y T Y
Full Name of Payee			Date of Publ	ic Distribution/Dissemination
IMGE LLC			10 ^M	15 2024
Mailing Address 1401 H STREET NW STE 550	1		Amount	
City	State	Zip Code		16964.78
WASHINGTON	DC	20005		ID : SE24.646 ursement or Obligation
Purpose of Expenditure		Category/	Date of Disb	/ D D / Y Y Y Y
TEXTING		Type	10	15 2024
Name of Federal Candidate		X Support	Office Sought:	House District:00
TRUMP, DONALD, , ,		Oppose	X President	Senate State:
Calendar Year-To-Date Per Election for Office Sought	1	02240410.75	Disbursement For: 2024 Other (s	Primary
Full Name of Payee			·	lic Distribution/Dissemination
IMGE LLC			M = M	/ D D / Y Y Y Y
Mailing Address 1401 H STREET NW STE 5			10	14 2024
Mailing Address 1401 H STREET NW STE 5	50		Amount	
City	State	Zip Code		150661.00
WASHINGTON	DC	20005	Transaction I	D: SE24.647 oursement or Obligation
Purpose of Expenditure		Category/	M = M	/ D D / Y Y Y
DIGITAL MEDIA		Type	10	15 2024
Name of Federal Candidate		X Support	Office Sought:	House District:00
TRUMP, DONALD, , ,		Oppose	X President	Senate State:
Calendar Year-To-Date Per Election for Office Sought	1	02240410.75	Disbursement For: 2024	Primary X General
Tot Election for Office Sought	7 7		Other (s	pecify)
(a) SUBTOTAL of Itemized Independent Expen	ditures			167625.78
(4)				4
(b) SUBTOTAL of Unitemized Independent Exp	enditures		•	
(c) TOTAL Independent Expenditures			• •	7
Under penalty of perjury I certify that the indep with, or at the request or suggestion of, any car party committee) any political party committee or	ndidate or authorized			
GOBER, CHRIS, , ,		Date	M M / D D D	2024
Signature			تنا لننا	

				FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report X 48-hour report	New repo	ort Amends repo		M / D D / Y = Y = Y
Full Name of Payee			Date of	of Public Distribution/Dissemination
IMGE LLC			M	10 15 / Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550			Amou	nt
City	State	Zip Code		63105.51
WASHINGTON	DC	20005		action ID : SE24.689 of Disbursement or Obligation
Purpose of Expenditure TEXTING		Category/ Type		10 15 2024
Name of Federal Candidate		Support	Office Sough	t: House District: 00
TRUMP, DONALD, , ,		Oppose	X Preside	
Calendar Year-To-Date Per Election for Office Sought	10	02240410.75	Disbursemen 2024	t For: Primary X General
Full Name of Payee				of Public Distribution/Dissemination
Mailing Address 1401 H STREET NW STE 550			Amou	10 14 2024 nt
City	State	Zip Code		65444.46
WASHINGTON	DC	20005		oction ID : SE24.694 of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		10 / 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		X Support	Office Sough	t: House District: 00
TRUMP, DONALD, , ,		Oppose	X Preside	ent Senate State:
Calendar Year-To-Date Per Election for Office Sought	1(02240410.75	Disbursemen 2024	
(a) SUBTOTAL of Itemized Independent Expenditure	98		•	128549.97
(b) SUBTOTAL of Unitemized Independent Expendit	tures		•	7
(c) TOTAL Independent Expenditures			· [7 1 7 1 7
Under penalty of perjury I certify that the independed with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		_ Date	10	15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature				

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Schedule E)	JENT EXILINO			PAGE 37 OF 39 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC II	DENTIFICATION NUMBER ▼
America PAC			C	C00879510
Check if 24-hour report X 48-hour repor	t New repo	ort Amends repo	ort filed on	/ D D / Y D Y D Y
Full Name of Payee			Date of Publi	c Distribution/Dissemination
IMGE LLC			10	13 2024
Mailing Address 1401 H STREET NW STE 55	iO		Amount	
City	State	Zip Code		3014.15
WASHINGTON	DC	20005		ID: SE24.699 ursement or Obligation
Purpose of Expenditure		Category/	Date of Disbl	/ D D / Y Y Y Y
TEXTING		Type	10	15 2024
Name of Federal Candidate		X Support	Office Sought:	House District:00
TRUMP, DONALD, , ,		Oppose	X President	Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	02240410.75	Disbursement For: 2024 Other (sp	Primary ☐ General
Full Name of Payee			·	ic Distribution/Dissemination
IMGE LLC			M = M	/ D D / Y Y Y Y
Mailing Address 1401 H STREET NW STE	FEO		10	19 2024
1401 FI SIREET INVOSIL	550		Amount	
City	State	Zip Code		53909.95
WASHINGTON	DC	20005	Transaction II Date of Disb	D : SE24.716 ursement or Obligation
Purpose of Expenditure		Category/	M = M	/ D D / Y Y Y Y
TEXTING		Туре	10	15 2024
Name of Federal Candidate		X Support	Office Sought:	House District:00
TRUMP, DONALD, , ,		Oppose	President	Senate State:
Calendar Year-To-Date Per Election for Office Sought	1	02240410.75	Disbursement For: 2024	Primary X General
1 61 Lieuton for Chieu Cought			Other (sp	pecify) -
(a) SUBTOTAL of Itemized Independent Exper	nditures		•	56924.10
(b) SUBTOTAL of Unitemized Independent Ex	penditures		·· •	
(c) TOTAL Independent Expenditures			>	
Under penalty of perjury I certify that the indewith, or at the request or suggestion of, any caparty committee) any political party committee	andidate or authorized			
GOBER, CHRIS, , ,		Date	10 15	/ Y Y Y Y Y Y Z024
Signature				

,	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
America PAC	C C00879510
Check if 24-hour report X 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
Full Name of Payee D OSCEOLA STRATEGIES LLC	ate of Public Distribution/Dissemination
	10
Mailing Address 8 THE GREEN	mount
STE A City State Zip Code	194517.00
DOVER DE 19901 TI	ransaction ID : SE24.651 late of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE Category/ Type	10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office So	ought: House District: 00
TRUMP, DONALD, , ,	esident Senate State:
Calendar Year-To-Date Per Election for Office Sought Disburse 2024	ement For: Primary
RED MAVERICK MEDIA LLC	Date of Public Distribution/Dissemination 10 15 2024
Mailing Address 1426 N 3RD STREET STE 310	nmount
City State Zip Code	806.50
	ansaction ID : SE24.691 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING Category/ Type	10 / 15 / 2024
Name of Federal Candidate Support Office S	ought: House District: 00
TRUMP, DONALD, , ,	resident Senate State:
	ement For: Primary X General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	195323.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	1 1 7 1 1 7 1 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made with, or at the request or suggestion of, any candidate or authorized committee or agent of either, o party committee) any political party committee or its agent.	
GOBER, CHRIS, , , Date	15 2024
Signature	

PAGE

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OF

Schedule E)	PAGE 39 OF 39 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
America PAC	C C00879510			
Check if 24-hour report X 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y			
Full Name of Payee Da	ate of Public Distribution/Dissemination			
THE BAKER GROUP LLC	10 17 2024			
Mailing Address 416 WILSON PIKE CIRCLE Ar	mount			
City State Zip Code	261280.00			
BRENTWOOD TN 37027 Tr.	ransaction ID : SE24.714 ate of Disbursement or Obligation			
Purpose of Expenditure Category/	M M / D D / Y Y Y Y			
PRINTING/POSTAGE Type	10 15 2024			
Name of Federal Candidate Support Office So	ought: House District: 00			
TRUMP, DONALD, , , Oppose Pre	esident Senate State:			
Calendar Year-To-Date Per Election for Office Sought Disburser 2024	ment For:			
Full Name of Payee	ate of Public Distribution/Dissemination			
THE SYNAPSE GROUP LLC	10 14 2024			
Mailing Address 1309 COFFEEN AVE	mount			
STE 1200	mount			
City State Zip Code	467500.00			
	ansaction ID : SE24.718 ate of Disbursement or Obligation			
Purpose of Expenditure CANVASSING/FIELD OPERATIONS Category/ Type	10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate Support Office Sc	ought: House District: 00			
TRUMP, DONALD, , ,				
Calendar Year-To-Date Per Election for Office Sought Disburser 2024 Disburser 2024	ment For: Primary General			
	Other (specify) -			
(a) SUBTOTAL of Itemized Independent Expenditures	728780.00			
(b) SUBTOTAL of Unitemized Independent Expenditures				
· L	7 7			
(c) TOTAL Independent Expenditures	7432611.09			
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.				
GOBER, CHRIS, , , Signature Date	15 2024			
Signature				