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

Schedule E)		FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Giffords PAC		C C00540443
Check if 24-hour report 48-hour report New report	Amends report filed on	M = M / D = D / Y = Y = Y = Y
Full Name of Payee Deliver Strategies, LLC	_	of Public Distribution/Dissemination
	[10 14 2020
Mailing Address PO Box 100970	Amou	unt
City State Zip Coo	de	82032.33
Arlington VA 22210-		saction ID: 500021840 of Disbursement or Obligation
Purpose of Expenditure Mail Production Categ		10 14 2020
Name of Federal Candidate	Support Office Sough	ht: House District: 00
TILLIS, THOM R, , ,	X Oppose Presid	lent Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 70234	Disbursemer 2020	nt For:
Full Name of Payee	Date	of Public Distribution/Dissemination
Deliver Strategies, LLC		10
Mailing Address PO Box 100970	Amou	unt
City State Zip Co	de	96113.04
Arlington VA 22210		action ID: 500021841 of Disbursement or Obligation
Purpose of Expenditure Postage Categ	ory/ ype	M 10 / 14 / Y Y Y Y Y Y Y
Name of Federal Candidate	Support Office Sough	ht: House District: 00
TILLIS, THOM R, , ,	X Oppose Presid	dent Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 70234	Disbursement 2020	nt For: Primary X General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	······	178145.37
(b) SUBTOTAL of Unitemized Independent Expenditures		7 1 7 1 7
(c) TOTAL Independent Expenditures		7
Under penalty of perjury I certify that the independent expenditures reporte with, or at the request or suggestion of, any candidate or authorized commit party committee) any political party committee or its agent.		•
Egan, Peggy, , , [Electronically Fig. 2]	led] Date 10	15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

	PAGE 2 OF 2 FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)	ENTIFICATION NUMBER ▼		
Giffords PAC	C00540443		
Check if 24-hour report X 48-hour report	D		
Deliver Strategies, LLC	Distribution/Dissemination		
Mailing Address PO Box 100970 Amount	14 2020		
City State Zip Code Arlington VA 22210-3970 Transaction ID	96113.03		
Purpose of Expenditure Postage Category/ Date of Disbura Category/	rsement or Obligation		
Name of Federal Candidate Type Name of Federal Candidate X Support Office Sought:	House District:		
Cunningham, Cal, , , Oppose President	Senate State: NC		
Calendar Year-To-Date Per Election for Office Sought Disbursement For: 2020 Other (spe	Primary X General ecify) ▶		
Full Name of Payee Deliver Strategies, LLC Date of Public	Distribution/Dissemination		
Mailing Address PO Box 100970 Amount			
City State Zip Code Arlington VA 22210-3970 Transaction ID			
Purpose of Expenditure Mail Production Category/ Type Date of Disbur	rsement or Obligation		
Name of Federal Candidate Cunningham, Cal, , , Oppose President	House District:		
Calendar Year-To-Date Per Election for Office Sought 702341.25 Disbursement For: 2020	Primary General		
Other (spe	ecify)		
(a) SUBTOTAL of Itemized Independent Expenditures	178145.36		
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures	356290.73		
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.			
Egan, Peggy, , , [Electronically Filed] Date 10 15	2020		