

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 PACT			FEC IDENTIFICATION NUMBER ▼ C C00837443		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on / /					
Full Name of Payee Public Concepts			Date of Public Distribution/Dissemination / /		
Mailing Address 5155 Corporate Way D2			Amount 26000.00		
City Jupiter		State FL	Zip Code 33458		Transaction ID : SE.4292
Purpose of Expenditure Direc Mail		Category/ Type 004		Date of Disbursement or Obligation / /	
Name of Federal Candidate KEISER, BELINDA, , ,			☐ Support ☒ Oppose		Office Sought: ☒ House District: 22 ☐ President ☐ Senate State: FL
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶		
Full Name of Payee			Date of Public Distribution/Dissemination		
Mailing Address			Amount		
City		State	Zip Code		Date of Disbursement or Obligation
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..... ▶ 26000.00					
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶ 26000.00					
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.					
Signature Jones, William, S, ,			Date / /		