

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 1
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) INDEPENDENT PAC			FEC IDENTIFICATION NUMBER ▼ C C00884924		
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on MM / DD / YYYY					
Full Name of Payee IHEARTMEDIA ENTERTAINMENT INC			Date of Public Distribution/Dissemination MM / DD / YYYY		
Mailing Address 20880 STONE OAK PKWY			Amount 10000.00		
City State Zip Code SAN ANTONIO TX 78258-7460		Transaction ID : SE24.35750 Date of Disbursement or Obligation MM / DD / YYYY			
Purpose of Expenditure NON CONTRIBUTION ACCT: MEDIA PLACEMENT / MEDIA PRODUCTION		Category/Type		Name of Federal Candidate BODNAR, SETH, ,	
Name of Federal Candidate BODNAR, SETH, ,		☒ Support ☐ Oppose		Office Sought: ☐ House ☒ Senate ☐ President ☐ State: MT	
Calendar Year-To-Date Per Election for Office Sought		809054.92		Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶	
Full Name of Payee IHEARTMEDIA ENTERTAINMENT INC			Date of Public Distribution/Dissemination MM / DD / YYYY		
Mailing Address 20880 STONE OAK PKWY			Amount 5700.00		
City State Zip Code SAN ANTONIO TX 78258-7460		Transaction ID : SE24.35751 Date of Disbursement or Obligation MM / DD / YYYY			
Purpose of Expenditure NON CONTRIBUTION ACCT: MEDIA PLACEMENT / MEDIA PRODUCTION		Category/Type		Name of Federal Candidate GETTY, CHRISTOPHER, ROMAN, ,	
Name of Federal Candidate GETTY, CHRISTOPHER, ROMAN, ,		☒ Support ☐ Oppose		Office Sought: ☒ House ☐ Senate ☐ President ☐ State: IL	
Calendar Year-To-Date Per Election for Office Sought		256820.00		Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			15700.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶			15700.00		
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, SAMUEL, , ,			Date MM / DD / YYYY		