

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

NAME OF COMMITTEE (In Full) SAVE AMERICA FUND			FEC IDENTIFICATION NUMBER ▼ C C00732172		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee GPS Impact			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 23 / 2024		
Mailing Address 112 SE 4th St Unit 202			Amount 20000.00		
City Des Moines		State IA	Zip Code 50309		Transaction ID : SE.4438
Purpose of Expenditure Digital Advertising		Category/ Type		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 07 / 23 / 2024	
Name of Federal Candidate GALAN-WOODS, MARLENE, , ,			☒ Support ☐ Oppose		Office Sought: ☒ House District: 01 ☐ President ☐ Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought			152992.42 Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶		
Full Name of Payee			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y		
Mailing Address			Amount 		
City		State	Zip Code		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Purpose of Expenditure		Category/ Type		M M / D D / Y Y Y Y Y Y	
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..... ▶ 20000.00 (b) SUBTOTAL of Unitemized Independent Expenditures ▶ (c) TOTAL Independent Expenditures..... ▶ 20000.00					
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 Galvin, Edward, , , Date M M / D D / Y Y Y Y Y Y 07 / 24 / 2024					