

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

NAME OF COMMITTEE (In Full) KEEP AMERICA GREAT PAC, INC.		FEC IDENTIFICATION NUMBER ▼ C C00896365	
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY	

Full Name of Payee Storytellers Group LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2025	
Mailing Address PO Box 1832		Amount 4394.00	
City Gallatin	State TN	Zip Code 37066-1832	Transaction ID : EAA74DDAF49EE4693A32
Purpose of Expenditure Text Blast		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 28 / 2025
Name of Federal Candidate Morris, Nate, ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: <u>KY</u>
Calendar Year-To-Date Per Election for Office Sought		2669321.00	Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶ _____

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount 	
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY
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..... ▶	4394.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	4394.00

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.

GOODE, MICHAEL, , ,

Signature

Date

MM / DD / YYYY

10 / 30 / 2025