24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	DENT EXPEND	TIONES	PAGE 1 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Protect Our Future PAC			C C00801514
Check if 24-hour report 48-hour report	rt New rep	port Amends repo	ort filed on
Full Name of Payee			Date of Public Distribution/Dissemination
PFB Media			05 11 2022
Mailing Address 505 Court St			Amount
Unit 1H	<u> </u>	7: 0 1	20110.00
City Brooklyn	State NY	Zip Code 11231-3947	62119.93 Transaction ID : 500126995 Data of Dishusament of Obligation
Purpose of Expenditure Ad Production		Category/ Type	Date of Disbursement or Obligation M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought:
SALINAS, ANDREA, , ,		X Oppose	President Senate State: OR
Calendar Year-To-Date Per Election for Office Sought		11261373.85	Disbursement For: ✓ Primary General 2022 Other (specify) ✓
Full Name of Payee			Date of Public Distribution/Dissemination
Resonance Campaigns			05 11 2022
Mailing Address 913 Florida Ave NW			Amount
City	State	Zip Code	50247.11
Washington	DC	20001-4001	Transaction ID : 500126994 Date of Disbursement or Obligation
Purpose of Expenditure Direct Mailing Services		Category/ Type	05 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought: House District: 06
SALINAS, ANDREA, , ,		x Oppose	President Senate State: OR
Calendar Year-To-Date Per Election for Office Sought	7 7	11261373.85	Disbursement For: ✓ Primary General Other (specify) ✓
(a) SUBTOTAL of Itemized Independent Expe	nditures		▶ 112367.04
(-)			7 7 112001104
(b) SUBTOTAL of Unitemized Independent Ex	penditures		
(c) TOTAL Independent Expenditures			
	andidate or authorize		not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political
Montoya, Dacey, , ,	[Electron	nically Filed] Date	e 05 / 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
-			

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 3 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)	C IDENTIFICATION NUMBER ▼			
Protect Our Future PAC	C00801514			
Check if X 24-hour report 48-hour report New report Amends report filed on	/ D = D / Y = Y = Y			
Full Name of Payee Date of Pu	ublic Distribution/Dissemination			
Screen Strategies Media	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 11150 Fairfax Blvd Ste 500 Amount				
	544550.00			
	514550.00 on ID : 500126996			
Purpose of Expenditure Ad Buy - TV Category/ Type Date of Di O5	isbursement or Obligation 10 2022			
Name of Federal Candidate	0c			
SALINAS, ANDREA, , , Support Office Sought: SALINAS, ANDREA, , ,	House District: 06 Senate State: OR			
Calendar Year-To-Date Per Election for Office Sought Disbursement For 2022	, ,			
Other	(specify) ►			
Full Name of Payee Screen Strategies Media Date of Pt 05	ublic Distribution/Dissemination / 11 2022			
Mailing Address 11150 Fairfax Blvd Amount	11 2022			
Ste 500				
City State Zip Code	14999.57			
Date of Di	n ID : 500126997 isbursement or Obligation			
Purpose of Expenditure Ad Buy - Radio Category/ Type O5	/ 10 / Y Y Y Y Y			
Name of Federal Candidate Support Office Sought:	✗ House District:06			
SALINAS, ANDREA, , , President	Senate State: OR			
Calendar Year-To-Date Per Election for Office Sought Disbursement Fo 2022 Other	or: x Primary General (specify) ▶			
(a) SUBTOTAL of Itemized Independent Expenditures	529549.57			
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7			
(c) TOTAL Independent Expenditures	7 1 7 1 7			
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.				
	D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 3 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Protect Our Future PAC	C C00801514
Check if X 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
	ate of Public Distribution/Dissemination
Screen Strategies Media	05 11 2022
	mount
Ste 500	
City State Zip Code Fairfax VA 22030-5029 Tr	171429.00 ransaction ID : 500126998
Da	ate of Disbursement or Obligation
Purpose of Expenditure Ad Buy - Digital Category/ Type	05 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office So	ought: X House District: 06
SALINAS ANDREA	esident Senate State: OR
Calendar Year-To-Date Per Election for Office Sought Disburser 2022	ment For: Primary General Other (specify) ▶
Full Name of Payee	ate of Public Distribution/Dissemination
	M M / D D / Y Y Y Y Y
Mailing Address Ar	mount
City State Zip Code	
Di	ate of Disbursement or Obligation
Purpose of Expenditure Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office Sc	ought: House District:
	esident Senate State:
Galerida Todi To Balo	ment For: Primary General
Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	171429.00
(b) SUBTOTAL of Unitemized Independent Expenditures	4 4
(c) TOTAL Independent Expenditures	813345.61
Under penalty of perjury I certify that the independent expenditures reported herein were not made with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
Montoya, Dacey, , , [Electronically Filed] Date 05	12 2022
Signature	