

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

NAME OF COMMITTEE (In Full) GOPAC Election Fund		FEC IDENTIFICATION NUMBER ▼ C C00559740
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee MARTIN & BLAINE THE DIFFERENTIATORS		Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 22 / 2024
Mailing Address PO BOX 17623		Amount 45426.51
City RALEIGH	State NC	Zip Code 27619
Purpose of Expenditure DIRECT MAIL EXPENSE	Category/ Type	Transaction ID : SE24.9 Date of Disbursement or Obligation MM / DD / YYYY 01 / 23 / 2024
Name of Federal Candidate MILLS, GREY, , , ☒ Support ☐ Oppose		Office Sought: ☒ House District: 10 ☐ President ☐ Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 201926.51		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
Purpose of Expenditure	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY
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.....▶	45426.51
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	45426.51

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.

JOHNSON, MELODIE, , ,

Signature

Date

MM / DD / YYYY
01 / 23 / 2024