

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

NAME OF COMMITTEE (In Full) DUTY TO AMERICA PAC			FEC IDENTIFICATION NUMBER ▼ C C00881987		
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 EDGERTON STRATEGIES, LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 27 / 2024		
Mailing Address 1540 KELLER PARKWAY #108-402			Amount 7747.20		
City KELLER		State TX	Zip Code 76248		Transaction ID : SE.4273
Purpose of Expenditure TEXT MESSAGES		Category/ Type		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 28 / 2024	
Name of Federal Candidate HARRIS, KAMALA, , ,			☐ Support ☒ Oppose		Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 23374858.03			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
Full Name of Payee EDGERTON STRATEGIES, LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 27 / 2024		
Mailing Address 1540 KELLER PARKWAY #108-402			Amount 7747.20		
City KELLER		State TX	Zip Code 76248		Transaction ID : SE.4274
Purpose of Expenditure TEXT MESSAGES		Category/ Type		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 28 / 2024	
Name of Federal Candidate TRUMP, DONALD J., , ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 23382605.23			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			15494.40		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶			15494.40		
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 HOBBS, CABELL, , ,			Date M M / D D / Y Y Y Y Y Y 10 / 28 / 2024		