24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Alliance for a Better Minnesota Federal PAC	C C00564013
	<u> </u>
Check if X 24-hour report 48-hour report New report Amends report filed	on Mam / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
New Partners	10 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 5021	Amount
City State Zip Code	247200.00
St. Cloud MN 56032	Transaction ID : SE.4941 Date of Disbursement or Obligation
Purpose of Expenditure Phone Banks (Estimate) Category/ Type	M M / D D / Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District:
BIDEN, JOSEPH R JR, R, , Jr. Oppose	
Calendar Year-To-Date Per Election for Office Sought Disbut 2020	ursement For: Primary General Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
New Partners	10 17 2020
Mailing Address PO Box 5021	Amount
City State Zip Code	83300.00
St. Cloud MN 56032	Transaction ID : SE.4942
Purpose of Expenditure Category/ Category/	Date of Disbursement or Obligation
Phone Banks (Estimate)	
	e Sought: House District:
SMITH, TINA, , ,	President Senate State: MN
Calendar Year-To-Date Per Election for Office Sought Disbut 2020	ursement For: Primary General Other (specify) ▶
	Outlot (Specify) F
(a) SUBTOTAL of Itemized Independent Expenditures	330500.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	330500.00
Under penalty of perjury I certify that the independent expenditures reported herein were not mount with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	•
· Date	0 18 2020
Signature	