

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) TRUST IN THE MISSION PAC			FEC IDENTIFICATION NUMBER ▼ C C00840546	
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on			M M M / D D D / Y Y Y Y Y Y	
Full Name of Payee ACE CONSULTING GROUP LLC		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 08 / 31 / 2023		
Mailing Address 78 FOLLY ROAD BOULEVARD STE B9-1182		Amount 210991.77		
City CHARLESTON	State SC	Zip Code 29407	Transaction ID : SE24.107	
Purpose of Expenditure NON-CONTRIBUTION ACCT: MEDIA PLACEMENT		Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 08 / 30 / 2023	
Name of Federal Candidate SCOTT, TIMOTHY, E., ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: IA	
Calendar Year-To-Date Per Election for Office Sought		6339212.80	Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶	
Full Name of Payee ACE CONSULTING GROUP LLC		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 08 / 31 / 2023		
Mailing Address 78 FOLLY ROAD BOULEVARD STE B9-1182		Amount 130496.27		
City CHARLESTON	State SC	Zip Code 29407	Transaction ID : SE24.108	
Purpose of Expenditure NON-CONTRIBUTION ACCT: MEDIA PLACEMENT		Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 08 / 30 / 2023	
Name of Federal Candidate SCOTT, TIMOTHY, E., ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought		1879740.06	Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....		341488.04		
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures.....				
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.				
JENKINS, TIFFANY, , , Signature		Date 09 / 02 / 2023		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 2 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) TRUST IN THE MISSION PAC		FEC IDENTIFICATION NUMBER ▼ C C00840546
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee ON THE MARK DIRECT, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 31 / 2023
Mailing Address 1301 GERVAIS STREET SUITE 1900		Amount 2569.20
City COLUMBIA	State SC	Zip Code 29201
Purpose of Expenditure NON-CONTRIBUTION ACCT: BUMPER STICKERS - PRINTING / SHIPPING	Category/ Type	Transaction ID : SE24.109 Date of Disbursement or Obligation MM / DD / YYYY 08 / 30 / 2023
Name of Federal Candidate SCOTT, TIMOTHY, E., ,	☒ Support ☐ Oppose	Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶

Full Name of Payee ON THE MARK DIRECT, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 31 / 2023
Mailing Address 1301 GERVAIS STREET SUITE 1900		Amount 1359.60
City COLUMBIA	State SC	Zip Code 29201
Purpose of Expenditure NON-CONTRIBUTION ACCT: BUMPER STICKERS - PRINTING / SHIPPING	Category/ Type	Transaction ID : SE24.110 Date of Disbursement or Obligation MM / DD / YYYY 08 / 30 / 2023
Name of Federal Candidate SCOTT, TIMOTHY, E., ,	☒ Support ☐ Oppose	Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: NH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	3928.80
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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.

JENKINS, TIFFANY, , ,

Signature

Date

MM / DD / YYYY
09 / 02 / 2023

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 3 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) TRUST IN THE MISSION PAC		FEC IDENTIFICATION NUMBER ▼ C C00840546	
Check if ☐ 24-hour report ☒ 48-hour report		☒ New report ☐ Amends report filed on	

Full Name of Payee ON THE MARK DIRECT, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 31 / 2023	
Mailing Address 1301 GERVAIS STREET SUITE 1900		Amount 2419.20	
City COLUMBIA	State SC	Zip Code 29201	Transaction ID : SE24.111
Purpose of Expenditure NON-CONTRIBUTION ACCT: BUMPER STICKERS - PRINTING / SHIPPING		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 08 / 30 / 2023
Name of Federal Candidate SCOTT, TIMOTHY, E., ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: SC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2024 ☐ 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..... ▶	2419.20
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	347836.04

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.

JENKINS, TIFFANY, , ,

Signature

Date

MM / DD / YYYY
09 / 02 / 2023