

**HUSCH BLACKWELL**

Digitally signed  
by Kathryn Ross  
Date: 2020.07.23  
17:39:26 -04'00'

Lowell Pearson  
Office Managing Partner

235 East High Street, P.O. Box 1251  
Jefferson City, MO 65102-1251  
Direct: 573.761.1115  
Fax: 573.634.7854  
lowell.pearson@huschblackwell.com

July 23, 2020

**VIA E-MAIL TO**  
**CELA@FEC.GOV**

Jeff S. Jordan  
Assistant General Counsel  
Federal Election Commission  
Washington, DC 20036

Re: MUR 7756

Dear Mr. Jordan:

I represent Americas PAC and its Treasurer, Tom Donelson, in this matter. Statements of Designation of Counsel are attached.

When America's PAC and Mr. Donelson received the complaint, they moved immediately to address the issue raised by filing amended reports. The complaint was received on Wednesday, July 8 and the amended reports were filed on Monday, July 13. Copies of the amended reports are attached.

I respectfully suggest that the complaint be dismissed since Americas PAC and Mr. Donelson took immediate corrective action to cure what was, at most, an inadvertent error.

Please direct any additional correspondence or questions to me.

Sincerely



LOWELL D. PEARSON

LDP:cst  
Attachments



FEDERAL ELECTION COMMISSION  
1050 First Street, NE  
Washington, DC 20463

# STATEMENT OF DESIGNATION OF COUNSEL

Provide one form for each Respondent/Witness

EMAIL ccla@fec.gov

FAX 202-219-3923

AR/MUR/RR/P-MUR# MUR 7756

Name of Counsel: Lowell D. Pearson

Firm: Husch Blackwell LLP

Address: 235 E. High Street, P.O. Box 1251  
Jefferson City, MO 65102

Office#: (573) 635-9118 Fax#: (573) 634-7854

Mobile#: \_\_\_\_\_

E-mail: lowell.pearson@huschblackwell.com

The above-named individual and/or firm is hereby designated as my counsel and is authorized to receive any notifications and other communications from the Commission and to act on my behalf before the Commission.

\_\_\_\_\_  
Date

[Signature]  
(Signature - Respondent/Agent/Treasurer)

[Signature]  
(Name - Please Print)

Treasurer  
Title

**RESPONDENT:** Tom Donelson, Treasurer of America's PAC  
(Please print Committee Name/ Company Name/Individual Named in Notification Letter)

Mailing Address: 2560 Plymouth  
(Please Print) Marion, IA 52302

Home#: \_\_\_\_\_ Mobile#: \_\_\_\_\_

Office#: (573) 415-8234 Fax#: \_\_\_\_\_

E-mail: amyblunt@hbstrategies.us

This form relates to a Federal Election Commission matter that is subject to the confidentiality provisions of 52 U.S.C. § 30109(a)(12)(A). This section prohibits making public any notification or investigation conducted by the Federal Election Commission without the express written consent of the person under investigation.

Rev. 2018



FEDERAL ELECTION COMMISSION  
1050 First Street, NE  
Washington, DC 20463

# STATEMENT OF DESIGNATION OF COUNSEL

Provide one form for each Respondent/Witness

EMAIL [celn@fec.gov](mailto:celn@fec.gov)

FAX 202-219-3923

AR/MUR/RR/P-MUR# MUR 7756

Name of Counsel: Lowell D. Pearson

Firm: Husch Blackwell LLP

Address: 235 E. High Street, P.O. Box 1251  
Jefferson City, MO 65102

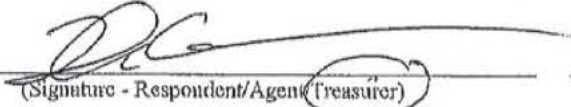
Office#: (573) 635-9118 Fax#: (573) 634-7854

Mobile#: \_\_\_\_\_

E-mail: lowell.pearson@huschblackwell.com

The above-named individual and/or firm is hereby designated as my counsel and is authorized to receive any notifications and other communications from the Commission and to act on my behalf before the Commission.

\_\_\_\_\_  
Date

  
(Signature - Respondent/Agent/Treasurer)

Tom Donelson  
(Name - Please Print)

Treasurer  
Title

**RESPONDENT:** Tom Donelson, Treasurer of America's PAC  
(Please print Committee Name/ Company Name/Individual Named in Notification Letter)

Mailing Address: 2560 Plymouth  
(Please Print)  
Marion, IA 52302

Home#: \_\_\_\_\_ Mobile#: \_\_\_\_\_

Office#: (573) 415-8234 Fax#: \_\_\_\_\_

E-mail: amyblunt@hbstrategies.us

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Rev. 2018



# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

Americas PAC

ADDRESS (number and street)

2560 Plymouth

Check if different  
than previously  
reported. (ACC)

Marion

IA

52302

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00559906

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)4. TYPE OF REPORT  
(Choose One)

(a) Quarterly Reports:

☒April 15  
Quarterly Report (Q1)☐July 15  
Quarterly Report (Q2)☐October 15  
Quarterly Report (Q3)☐January 31  
Year-End Report (YE)☐July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the  
State of(d) 30-Day  
POST-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

01

01

2020

through

03

31

2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Donelson, Tom, . .

Type or Print Name of Treasurer

Signature of Treasurer

Donelson, Tom, . .

Date

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
OnlyFEC FORM 3X  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Americas PAC

Report Covering the Period:

From:

01 / 01 / 2020

To:

03 / 31 / 2020

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2020		72600.47
(b) Cash on Hand at Beginning of Reporting Period.....	72600.47	
(c) Total Receipts (from Line 19) .....	3002553.00	3002553.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	3075153.47	3075153.47
7. Total Disbursements (from Line 31) .....	2723710.50	2723710.50
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	351442.97	351442.97
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Americas PAC

Report Covering the Period:

From:

MM / DD / YYYY  
01 / 01 / 2020

To:

MM / DD / YYYY  
03 / 31 / 2020

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	3002500.00	3002500.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	3002500.00	3002500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	3002500.00	3002500.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	53.00	53.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b)).....	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	3002553.00	3002553.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	3002553.00	3002553.00



# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share .....	0.00	0.00
(b) Other Federal Operating Expenditures .....	253600.00	253600.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	253600.00	253600.00
22. Transfers to Affiliated/Other Party Committees .....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	2470110.50	2470110.50
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F) .....	0.00	0.00
26. Loan Repayments Made .....	0.00	0.00
27. Loans Made .....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations) .....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	2723710.50	2723710.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....	2723710.50	2723710.50

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	3002500.00	3002500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	3002500.00	3002500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	253600.00	253600.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	53.00	53.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	253547.00	253547.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Americas PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Snider, John, , ,

Mailing Address 830 N. Saint peter St.

City

South Bend

State

IN

Zip Code

46617

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

N/A

Receipt For:

☐ Primary ☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

01

24

2020

Transaction ID : SA11AI.5500

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
 Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Uihlein, Richard, , ,

Mailing Address 1396 N Waukegan Road

City

Lake Forest

State

IL

Zip Code

60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Uihlein

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000000.00

Date of Receipt

01

10

2020

Transaction ID : SA11AI.5499

Amount of Each Receipt this Period

3000000.00

☐ Memo Item  
 Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

3002500.00

TOTAL This Period (last page this line number only).....▶

3002500.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER:  
 (check only one)

PAGE 7 OF 21

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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 NAME OF COMMITTEE (In Full)  
 Americas PAC

 Full Name (Last, First, Middle Initial)  
 A. Donelson, Tom, , ,

Date of Disbursement

01	03	2020
----	----	------

Mailing Address 2560 Plymouth Street

 City  
 Marion

 State  
 IA

 Zip Code  
 52302

FEC Identification Number

☒ C  
 Transaction ID : SB21B.5501

 Purpose of Disbursement  
 General and Media Consulting

Candidate Name

 Category/  
 Type

 Amount of Each Disbursement this Period  
 30000.00

 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For: 2020  
☒ Primary ☐ General  
☐ Other (specify) ▼

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Donelson, Tom, , ,

Date of Disbursement

03	11	2020
----	----	------

Mailing Address 2560 Plymouth Street

 City  
 Marion

 State  
 IA

 Zip Code  
 52302

FEC Identification Number

☒ C  
 Transaction ID : SB21B.5537

 Purpose of Disbursement  
 Operational & Strategic Consulting

Candidate Name

 Category/  
 Type

 Amount of Each Disbursement this Period  
 40000.00

 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For: 2020  
☒ Primary ☐ General  
☐ Other (specify) ▼

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Echols, Jim, , ,

Date of Disbursement

02	01	2020
----	----	------

Mailing Address 1815 N. 78th Place

 City  
 Kansas City

 State  
 KS

 Zip Code  
 66112

FEC Identification Number

☒ C  
 Transaction ID : SB21B.5517

 Purpose of Disbursement  
 Media Consulting

Candidate Name

 Category/  
 Type

 Amount of Each Disbursement this Period  
 2500.00

 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For: 2020  
☒ Primary ☐ General  
☐ Other (specify) ▼

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

72600.00

TOTAL This Period (last page this line number only).....▶



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER:  
 (check only one)

PAGE 8 OF 21

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27  
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Americas PAC

Full Name (Last, First, Middle Initial)

A. Furnish, Brad, , ,

Mailing Address 705 W. 76th Terrace

City

Kansas City

State

MO

Zip Code

64114

Purpose of Disbursement

Media Placement Consulting

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For: 2020

☒ Primary ☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

01 20 2020

FEC Identification Number

C

Transaction ID : SB21B.5504

Amount of Each Disbursement this Period

80000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Husch Blackwell Strategies

Mailing Address 101 W. High Street

City

Jefferson City

State

MO

Zip Code

65101

Purpose of Disbursement

Professional Services

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For: 2020

☒ Primary ☐ General☐ Other (specify)

State:

District:

Date of Disbursement

01 09 2020

FEC Identification Number

C

Transaction ID : SB21B.5502

Amount of Each Disbursement this Period

12000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Selectman, Delbert, , ,

Mailing Address 1147 State Ave.

City

Kansas City

State

KS

Zip Code

66102

Purpose of Disbursement

Media Consulting

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For: 2020

☒ Primary ☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

02 01 2020

FEC Identification Number

C

Transaction ID : SB21B.5515

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

94500.00

TOTAL This Period (last page this line number only).....▶



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER:  
 (check only one)

PAGE 9 OF 21

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Americas PAC

Full Name (Last, First, Middle Initial)

A. VCreek

Mailing Address 2318 SW Briarwood

City

Topeka

State

KS

Zip Code

66611

Purpose of Disbursement

Media Production &amp; Research

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For: 2020

☒ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

01	20	2020
----	----	------

FEC Identification Number

C

Transaction ID : SB21B.5503

Amount of Each Disbursement this Period

80000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. VCreek

Mailing Address 2318 SW Briarwood

City

Topeka

State

KS

Zip Code

66611

Purpose of Disbursement

Research

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For: 2020

☒ Primary☐ General☐ Other (specify)

State:

District:

Date of Disbursement

03	31	2020
----	----	------

FEC Identification Number

C

Transaction ID : SB21B.5551

Amount of Each Disbursement this Period

6600.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

--	--	--

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

86600.00

TOTAL This Period (last page this line number only).....▶

253600.00

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 10 OF 21  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Americas PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> <b>C00559906</b>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M</span> <span style="border: 1px solid black; padding: 2px;">D D</span> <span style="border: 1px solid black; padding: 2px;">Y Y</span>					
Full Name of Payee <b>Cumulus KHKI</b>			<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M</span> <span style="border: 1px solid black; padding: 2px;">D D</span> <span style="border: 1px solid black; padding: 2px;">Y Y</span> <b>05 13 2020</b>		
Mailing Address <b>4143 109th St.</b>			Amount <b>41600.00</b>		
City <b>Urbandale</b>	State <b>IA</b>	Zip Code <b>50322</b>	Transaction ID : <b>SE.5527</b>		
Purpose of Expenditure <b>Media Buy - Split Transaction</b>		Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M</span> <span style="border: 1px solid black; padding: 2px;">D D</span> <span style="border: 1px solid black; padding: 2px;">Y Y</span> <b>03 06 2020</b>		
Name of Federal Candidate: <b>AXNE, CINDY, . .</b>			<input type="checkbox"/> Support    Office Sought: <input checked="" type="checkbox"/> House    District: <b>03</b> <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>IA</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span> <b>100800.00</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) <span style="border: 1px solid black; padding: 2px;"> </span>		
Full Name of Payee <b>Cumulus KHKI</b>			<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M</span> <span style="border: 1px solid black; padding: 2px;">D D</span> <span style="border: 1px solid black; padding: 2px;">Y Y</span> <b>07 17 2020</b>		
Mailing Address <b>4143 109th St.</b>			Amount <b>88400.00</b>		
City <b>Urbandale</b>	State <b>IA</b>	Zip Code <b>50322</b>	Transaction ID : <b>SE.5581</b>		
Purpose of Expenditure <b>Media Buy - Split Transaction</b>		Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M</span> <span style="border: 1px solid black; padding: 2px;">D D</span> <span style="border: 1px solid black; padding: 2px;">Y Y</span> <b>03 06 2020</b>		
Name of Federal Candidate: <b>ERNST, JONI K, . .</b>			<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: <b>00</b> <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>IA</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span> <b>214200.00</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) <span style="border: 1px solid black; padding: 2px;"> </span>		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span> <b>130000.00</b>		
(b) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
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 <u>Donelson, Tom, . .</u>			Date <span style="border: 1px solid black; padding: 2px;">M M</span> <span style="border: 1px solid black; padding: 2px;">D D</span> <span style="border: 1px solid black; padding: 2px;">Y Y</span>		



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Americas PAC</b>			FEC IDENTIFICATION NUMBER ▼ <b>C C00559906</b>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">JUN 05 2020</span>					
Full Name of Payee <b>Cumulus Media - Flint</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">05 13 2020</span>		
Mailing Address <b>6317 Taylor Drive</b>			Amount <span style="border: 1px solid black; padding: 2px;">63000.00</span>		
City <b>Flint</b>	State <b>MI</b>	Zip Code <b>48507</b>	Transaction ID : <b>SE.5542</b>		
Purpose of Expenditure <b>Media Purchase</b>		Category/Type	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">03 18 2020</span>		
Name of Federal Candidate: <b>JAMES, JOHN, , ,</b>			<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: <b>00</b> <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>MI</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">542672.00</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>Des Moines Radio Group</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">05 13 2020</span>		
Mailing Address <b>5407 W. McKinley</b>			Amount <span style="border: 1px solid black; padding: 2px;">59200.00</span>		
City <b>Milwaukee</b>	State <b>WI</b>	Zip Code <b>53208</b>	Transaction ID : <b>SE.5524</b>		
Purpose of Expenditure <b>Media Buy - Split Transaction</b>		Category/Type	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">03 06 2020</span>		
Name of Federal Candidate: <b>AXNE, CINDY, , ,</b>			<input type="checkbox"/> Support    Office Sought: <input checked="" type="checkbox"/> House    District: <b>03</b> <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>IA</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">59200.00</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">122200.00</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
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 <b>Donelson, Tom, , ,</b>			Date <span style="border: 1px solid black; padding: 2px;">JUN 05 2020</span>		



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Americas PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C C00559906</b>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M Y Y</span>					
Full Name of Payee <b>Des Moines Radio Group</b>			<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">07</span> <span style="border: 1px solid black; padding: 2px;">17</span> <span style="border: 1px solid black; padding: 2px;">2020</span>		
Mailing Address <b>5407 W. McKinley</b>			Amount <b>125800.00</b>		
City <b>Milwaukee</b>	State <b>WI</b>	Zip Code <b>53208</b>	Transaction ID : <b>SE.5579</b>		
Purpose of Expenditure <b>Media purchase - split transaction</b>			Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">03</span> <span style="border: 1px solid black; padding: 2px;">06</span> <span style="border: 1px solid black; padding: 2px;">2020</span>		
Name of Federal Candidate: <b>ERNST, JONI K, ..</b>			<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: <b>00</b> <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>IA</b>		
Calendar Year-To-Date Per Election for Office Sought <b>125800.00</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>I Heart - Eau Claire</b>			<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">02</span> <span style="border: 1px solid black; padding: 2px;">26</span> <span style="border: 1px solid black; padding: 2px;">2020</span>		
Mailing Address <b>619 Cameron Street</b>			Amount <b>38720.00</b>		
City <b>Eau Claire</b>	State <b>WI</b>	Zip Code <b>54703</b>	Transaction ID : <b>SE.5511</b>		
Purpose of Expenditure <b>Media Buy</b>			Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">01</span> <span style="border: 1px solid black; padding: 2px;">24</span> <span style="border: 1px solid black; padding: 2px;">2020</span>		
Name of Federal Candidate: <b>ZUNKER, TRICIA, ..</b>			<input type="checkbox"/> Support    Office Sought: <input checked="" type="checkbox"/> House    District: <b>07</b> <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>WI</b>		
Calendar Year-To-Date Per Election for Office Sought <b>133320.00</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<b>164520.00</b>		
(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.					
Signature <u>Donelson, Tom, ..</u>				Date <span style="border: 1px solid black; padding: 2px;">M M</span> <span style="border: 1px solid black; padding: 2px;">D D</span> <span style="border: 1px solid black; padding: 2px;">Y Y</span>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Americas PAC</b>			FEC IDENTIFICATION NUMBER ▼ <b>C00559906</b>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">M A Y</span> <span style="border: 1px solid black; padding: 2px;">J U N</span> <span style="border: 1px solid black; padding: 2px;">J U L</span>					
Full Name of Payee <b>iHeart Media - Cedar Rapids</b>			<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">05</span> <span style="border: 1px solid black; padding: 2px;">13</span> <span style="border: 1px solid black; padding: 2px;">2020</span>		
Mailing Address <b>600 Old Marion Road NE</b>			Amount <b>57600.00</b>		
City <b>Cedar Rapids</b>	State <b>IA</b>	Zip Code <b>52402</b>	Transaction ID : <b>SE.5530</b>		
Purpose of Expenditure <b>Media Purchase - Split Transaction</b>		Category/Type	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">03</span> <span style="border: 1px solid black; padding: 2px;">06</span> <span style="border: 1px solid black; padding: 2px;">2020</span>		
Name of Federal Candidate: <b>FINKENAUER, ABBY, , ,</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: <b>01</b> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>IA</b>		
Calendar Year-To-Date Per Election for Office Sought		<b>136840.00</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>iHeart Media - Cedar Rapids</b>			<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">07</span> <span style="border: 1px solid black; padding: 2px;">17</span> <span style="border: 1px solid black; padding: 2px;">2020</span>		
Mailing Address <b>600 Old Marion Road NE</b>			Amount <b>122400.00</b>		
City <b>Cedar Rapids</b>	State <b>IA</b>	Zip Code <b>52402</b>	Transaction ID : <b>SE.5585</b>		
Purpose of Expenditure <b>Media Purchase</b>		Category/Type	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">03</span> <span style="border: 1px solid black; padding: 2px;">06</span> <span style="border: 1px solid black; padding: 2px;">2020</span>		
Name of Federal Candidate: <b>ERNST, JONI K, , ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House    District: <b>00</b> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>IA</b>		
Calendar Year-To-Date Per Election for Office Sought		<b>336600.00</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<b>180000.00</b>		
(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.					
Signature <u>Donelson, Tom, , ,</u>			Date <span style="border: 1px solid black; padding: 2px;">5</span> <span style="border: 1px solid black; padding: 2px;">5</span> <span style="border: 1px solid black; padding: 2px;">2018</span>		



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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NAME OF COMMITTEE (In Full) <b>Americas PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C00559906</b>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">M O D Y</span>					
Full Name of Payee <b>IHeart Media - Detroit</b>			<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">05 13 2020</span>		
Mailing Address <b>2023 Dorothea</b>			Amount <span style="border: 1px solid black; padding: 2px;">330998.50</span>		
City <b>Berkley</b>	State <b>MI</b>	Zip Code <b>48072</b>	Transaction ID : <b>SE.5549</b>		
Purpose of Expenditure <b>Media Purchase</b>		Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">03 26 2020</span>		
Name of Federal Candidate: <b>JAMES, JOHN, ,</b>			<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: <b>00</b> <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>MI</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1253670.50</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>I Heart Media - WMXD</b>			<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">05 13 2020</span>		
Mailing Address <b>27675 Halsted Road</b>			Amount <span style="border: 1px solid black; padding: 2px;">359992.00</span>		
City <b>Farmington Hills</b>	State <b>MI</b>	Zip Code <b>48331</b>	Transaction ID : <b>SE.5534</b>		
Purpose of Expenditure <b>Media Purchase</b>		Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">03 06 2020</span>		
Name of Federal Candidate: <b>JAMES, JOHN, ,</b>			<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: <b>00</b> <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>MI</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">359992.00</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
<b>(a) SUBTOTAL of Itemized Independent Expenditures</b> ..... ▶ <span style="border: 1px solid black; padding: 2px;">690990.50</span>					
<b>(b) SUBTOTAL of Unitemized Independent Expenditures</b> ..... ▶ <span style="border: 1px solid black; padding: 2px;"> </span>					
<b>(c) TOTAL Independent Expenditures</b> ..... ▶ <span style="border: 1px solid black; padding: 2px;"> </span>					
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 <u>Donelson, Tom, ,</u>			Date <span style="border: 1px solid black; padding: 2px;"> </span>		



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Americas PAC</b>			FEC IDENTIFICATION NUMBER ▼ <b>C C00559906</b>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report Amends report filed on <input type="text"/>					
Full Name of Payee <b>Katz Radio Group</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>111 Presidential Blvd. Suite 215</b>			Date of Public Distribution/Dissemination <b>05 13 2020</b>		
City <b>Bala Cynwyd</b>		State <b>PA</b>	Amount <b>103000.00</b>		
Zip Code <b>19004</b>		Transaction ID : <b>SE.5545</b>			
Purpose of Expenditure <b>Media Purchase</b>		Category/Type		Date of Disbursement or Obligation <b>03 18 2020</b>	
Name of Federal Candidate: <b>JAMES, JOHN, ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <b>00</b> State: <b>MI</b>		
Calendar Year-To-Date Per Election for Office Sought <b>850672.00</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>MCW Radio</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>557 Scott St.</b>			Date of Public Distribution/Dissemination <b>02 26 2020</b>		
City <b>Wausau</b>		State <b>WI</b>	Amount <b>94600.00</b>		
Zip Code <b>54430</b>		Transaction ID : <b>SE.5509</b>			
Purpose of Expenditure <b>Media Production</b>		Category/Type		Date of Disbursement or Obligation <b>01 24 2020</b>	
Name of Federal Candidate: <b>ZUNKER, TRICIA, ,</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <b>07</b> State: <b>WI</b>		
Calendar Year-To-Date Per Election for Office Sought <b>94600.00</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<b>197600.00</b>		
(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.					
Signature _____ <i>Danelson, Tom, ,</i>			Date <input type="text"/>		

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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NAME OF COMMITTEE (In Full) <b>Americas PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C00559906</b>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M Y Y</span>					
Full Name of Payee <b>NRG Media</b>			<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">02 26 2020</span>		
Mailing Address <b>2301 Plover Road</b>			Amount <span style="border: 1px solid black; padding: 2px;">50600.00</span>		
City <b>Plover</b>	State <b>WI</b>	Zip Code <b>54467</b>	Transaction ID : <b>SE.5513</b>		
Purpose of Expenditure <b>Media Production</b>		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">01 25 2020</span>		
Name of Federal Candidate: <b>ZUNKER, TRICIA, , ,</b>			<input type="checkbox"/> Support    Office Sought: <input checked="" type="checkbox"/> House    District: <b>07</b> <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>WI</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">183920.00</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ <span style="border: 1px solid black; padding: 2px;"></span>		
Full Name of Payee <b>NRG Media - WI</b>			<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">02 26 2020</span>		
Mailing Address <b>9616 Hwy 47 North</b>			Amount <span style="border: 1px solid black; padding: 2px;">56320.00</span>		
City <b>Rhineland</b>	State <b>WI</b>	Zip Code <b>54501</b>	Transaction ID : <b>SE.5506</b>		
Purpose of Expenditure <b>Media Purchase</b>		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">01 24 2020</span>		
Name of Federal Candidate: <b>ZUNKER, TRICIA, , ,</b>			<input type="checkbox"/> Support    Office Sought: <input checked="" type="checkbox"/> House    District: <b>07</b> <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>WA</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">56320.00</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ <span style="border: 1px solid black; padding: 2px;"></span>		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">106920.00</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
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 <u>Donelson, Tom, , ,</u>			Date <span style="border: 1px solid black; padding: 2px;">M M Y Y</span>		



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Americas PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C C00559906</b>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">05</span> <span style="border: 1px solid black; padding: 2px;">13</span> <span style="border: 1px solid black; padding: 2px;">2020</span>					
Full Name of Payee <b>StateNet</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">05</span> <span style="border: 1px solid black; padding: 2px;">13</span> <span style="border: 1px solid black; padding: 2px;">2020</span>		
Mailing Address <b>2601 Northwind Dr.</b>			Amount <span style="border: 1px solid black; padding: 2px;">119680.00</span>		
City <b>Richmond</b>	State <b>VA</b>	Zip Code <b>23233</b>	Transaction ID : <b>SE.5539</b>		
Purpose of Expenditure <b>Media Buy</b>		Category/Type <span style="border: 1px solid black; padding: 2px;">03</span> <span style="border: 1px solid black; padding: 2px;">11</span> <span style="border: 1px solid black; padding: 2px;">2020</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">03</span> <span style="border: 1px solid black; padding: 2px;">11</span> <span style="border: 1px solid black; padding: 2px;">2020</span>		
Name of Federal Candidate: <b>JAMES, JOHN, ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House    District: <b>00</b> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>MI</b>		
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">479672.00</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>StateNet</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">05</span> <span style="border: 1px solid black; padding: 2px;">13</span> <span style="border: 1px solid black; padding: 2px;">2020</span>		
Mailing Address <b>2601 Northwind Dr.</b>			Amount <span style="border: 1px solid black; padding: 2px;">179520.00</span>		
City <b>Richmond</b>	State <b>VA</b>	Zip Code <b>23233</b>	Transaction ID : <b>SE.5540</b>		
Purpose of Expenditure <b>Media Purchase</b>		Category/Type <span style="border: 1px solid black; padding: 2px;">03</span> <span style="border: 1px solid black; padding: 2px;">11</span> <span style="border: 1px solid black; padding: 2px;">2020</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">03</span> <span style="border: 1px solid black; padding: 2px;">11</span> <span style="border: 1px solid black; padding: 2px;">2020</span>		
Name of Federal Candidate: <b>ERNST, JONI K, ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House    District: <b>00</b> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>IA</b>		
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">565420.00</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">299200.00</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
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 <u>Donelson, Tom, ,</u>			Date <span style="border: 1px solid black; padding: 2px;">05</span> <span style="border: 1px solid black; padding: 2px;">13</span> <span style="border: 1px solid black; padding: 2px;">2020</span>		



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 18 OF 21  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Americas PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> <b>C00559906</b>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>➤</b> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M Y Y</span> <span style="border: 1px solid black; padding: 2px;">M M Y Y</span> <span style="border: 1px solid black; padding: 2px;">M M Y Y</span>					
Full Name of Payee <b>Townsquare - Flint</b>			<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">05</span> <span style="border: 1px solid black; padding: 2px;">13</span> <span style="border: 1px solid black; padding: 2px;">2020</span>		
Mailing Address <b>3420 Pine Tree Road</b>			Amount <span style="border: 1px solid black; padding: 2px;">90000.00</span>		
City <b>Lansing</b>	State <b>MI</b>	Zip Code <b>48911</b>	Transaction ID : <b>SE.5543</b>		
Purpose of Expenditure <b>Media Purchase</b>		Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">03</span> <span style="border: 1px solid black; padding: 2px;">18</span> <span style="border: 1px solid black; padding: 2px;">2020</span>		
Name of Federal Candidate: <b>JAMES, JOHN, , ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House    District: <b>00</b> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>MI</b>		
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">632672.00</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ <span style="border: 1px solid black; padding: 2px;"> </span>		
Full Name of Payee <b>Townsquare KOEL</b>			<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">05</span> <span style="border: 1px solid black; padding: 2px;">13</span> <span style="border: 1px solid black; padding: 2px;">2020</span>		
Mailing Address <b>501 Sycamore St.</b>			Amount <span style="border: 1px solid black; padding: 2px;">23200.00</span>		
City <b>Waterloo</b>	State <b>IA</b>	Zip Code <b>50703</b>	Transaction ID : <b>SE.5531</b>		
Purpose of Expenditure <b>Media Purchase - Split Transaction</b>		Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">03</span> <span style="border: 1px solid black; padding: 2px;">06</span> <span style="border: 1px solid black; padding: 2px;">2020</span>		
Name of Federal Candidate: <b>FINKENAUER, ABBY, , ,</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: <b>01</b> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>IA</b>		
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">160040.00</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ <span style="border: 1px solid black; padding: 2px;"> </span>		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">113200.00</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
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 <u>Donelson, Tom, , ,</u>			Date <span style="border: 1px solid black; padding: 2px;"> </span> <span style="border: 1px solid black; padding: 2px;"> </span> <span style="border: 1px solid black; padding: 2px;"> </span>		

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 19 OF 21  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Americas PAC</b>			FEC IDENTIFICATION NUMBER ▼ <b>C 000559906</b>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M Y Y</span> <span style="border: 1px solid black; padding: 2px;">M M Y Y</span> <span style="border: 1px solid black; padding: 2px;">M M Y Y</span>					
Full Name of Payee <b>Townsquare KOEL</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">07</span> <span style="border: 1px solid black; padding: 2px;">17</span> <span style="border: 1px solid black; padding: 2px;">2020</span>		
Mailing Address <b>501 Sycamore St.</b>			Amount <b>49300.00</b>		
City <b>Waterloo</b>	State <b>IA</b>	Zip Code <b>50703</b>	Transaction ID : <b>SE.5586</b>		
Purpose of Expenditure <b>Media Purchase - Split Transaction</b>		Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">03</span> <span style="border: 1px solid black; padding: 2px;">06</span> <span style="border: 1px solid black; padding: 2px;">2020</span>		
Name of Federal Candidate: <b>ERNST, JONI K, ,</b>			Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    District: <b>00</b> State: <b>IA</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">385900.00</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ <span style="border: 1px solid black; padding: 2px;"> </span>		
Full Name of Payee <b>Townsquare Media - IA</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">05</span> <span style="border: 1px solid black; padding: 2px;">13</span> <span style="border: 1px solid black; padding: 2px;">2020</span>		
Mailing Address <b>425 Second St. 4th Floor</b>			Amount <b>79240.00</b>		
City <b>Cedar Rapids</b>	State <b>IA</b>	Zip Code <b>52401</b>	Transaction ID : <b>SE.5529</b>		
Purpose of Expenditure <b>Media Purchase - Split Transaction</b>		Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">03</span> <span style="border: 1px solid black; padding: 2px;">06</span> <span style="border: 1px solid black; padding: 2px;">2020</span>		
Name of Federal Candidate: <b>FINKENAUER, ABBY, ,</b>			Office Sought: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate    District: <b>01</b> State: <b>IA</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">79240.00</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ <span style="border: 1px solid black; padding: 2px;"> </span>		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">128540.00</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
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 <u>Donelson, Tom, ,</u>			Date <span style="border: 1px solid black; padding: 2px;">M M Y Y</span> <span style="border: 1px solid black; padding: 2px;">M M Y Y</span> <span style="border: 1px solid black; padding: 2px;">M M Y Y</span>		



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 20 OF 21  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Americas PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C C00559906</b>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">07</span> <span style="border: 1px solid black; padding: 2px;">17</span> <span style="border: 1px solid black; padding: 2px;">2020</span>					
Full Name of Payee <b>Townsquare Media - IA</b>			<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">07</span> <span style="border: 1px solid black; padding: 2px;">17</span> <span style="border: 1px solid black; padding: 2px;">2020</span>		
Mailing Address <b>425 Second St. 4th Floor</b>			Amount <span style="border: 1px solid black; padding: 2px;">140260.00</span>		
City <b>Cedar Rapids</b>	State <b>IA</b>	Zip Code <b>52401</b>	Transaction ID : <b>SE.5583</b>		
Purpose of Expenditure <b>Media Purchase - Split Transaction</b>			Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">03</span> <span style="border: 1px solid black; padding: 2px;">06</span> <span style="border: 1px solid black; padding: 2px;">2020</span>		
Name of Federal Candidate: <b>ERNST, JONI K, ,</b>			<input checked="" type="checkbox"/> Support    Office Sought: <input checked="" type="checkbox"/> House    District: <b>00</b> <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>IA</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">140260.00</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>Townsquare Media - Lansing</b>			<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">05</span> <span style="border: 1px solid black; padding: 2px;">13</span> <span style="border: 1px solid black; padding: 2px;">2020</span>		
Mailing Address <b>3420 Pine Tree Road</b>			Amount <span style="border: 1px solid black; padding: 2px;">115000.00</span>		
City <b>Lansing</b>	State <b>MI</b>	Zip Code <b>48911</b>	Transaction ID : <b>SE.5544</b>		
Purpose of Expenditure <b>Media Purchase</b>			Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">03</span> <span style="border: 1px solid black; padding: 2px;">18</span> <span style="border: 1px solid black; padding: 2px;">2020</span>		
Name of Federal Candidate: <b>JAMES, JOHN, ,</b>			<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: <b>00</b> <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>MI</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">747672.00</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">255260.00</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
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 <u>Donelson, Tom, ,</u>			Date <span style="border: 1px solid black; padding: 2px;">07</span> <span style="border: 1px solid black; padding: 2px;">17</span> <span style="border: 1px solid black; padding: 2px;">2020</span>		



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 21 OF 21  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Americas PAC</b>			FEC IDENTIFICATION NUMBER ▼ <b>C C00559906</b>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">01/03/20</span>					
Full Name of Payee <b>WCOW</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">02/26/2020</span>		
Mailing Address <b>113 West Oak St.</b>			Amount <b>9680.00</b>		
City <b>Sparta</b>	State <b>WI</b>	Zip Code <b>54656</b>	Transaction ID : <b>SE.5514</b>		
Purpose of Expenditure <b>Media Purchase</b>		Category/Type <span style="border: 1px solid black; padding: 2px;">01</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">01/25/2020</span>		
Name of Federal Candidate: <b>ZUNKER, TRICIA, , ,</b>			Office Sought: <input checked="" type="checkbox"/> House    District: <b>07</b> <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>WI</b>		
Calendar Year-To-Date Per Election for Office Sought <b>193600.00</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>WSRW - Grand Rapids</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">05/13/2020</span>		
Mailing Address <b>77 Monroe Center Suite 1000</b>			Amount <b>72000.00</b>		
City <b>Grand Rapids</b>	State <b>MI</b>	Zip Code <b>49503</b>	Transaction ID : <b>SE.5547</b>		
Purpose of Expenditure <b>Media Purchase</b>		Category/Type <span style="border: 1px solid black; padding: 2px;">03</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">03/26/2020</span>		
Name of Federal Candidate: <b>JAMES, JOHN, , ,</b>			Office Sought: <input type="checkbox"/> House    District: <b>00</b> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>MI</b>		
Calendar Year-To-Date Per Election for Office Sought <b>922672.00</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<b>81680.00</b>		
(b) SUBTOTAL of Unitemized Independent Expenditures .....					
(c) TOTAL Independent Expenditures .....			<b>2470110.50</b>		
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 <u>Donelson, Tom, , ,</u>			Date <span style="border: 1px solid black; padding: 2px;">05/13/20</span>		

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 1 OF 3  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Americas PAC</b>	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00559906         </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 5px;">           05 / 13 / 2020         </div>	

Full Name of Payee <b>Cumulus KHKI</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">05</div> <div style="border: 1px solid black; padding: 2px;">13</div> <div style="border: 1px solid black; padding: 2px;">2020</div> </div>	
Mailing Address <b>4143 109th St.</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">41600.00</div>	
City <b>Urbandale</b>	State <b>IA</b>	Zip Code <b>50322</b>	Transaction ID : <b>SE.5559</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">03</div> <div style="border: 1px solid black; padding: 2px;">06</div> <div style="border: 1px solid black; padding: 2px;">2020</div> </div>
Purpose of Expenditure <b>Media Buy</b>		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	
Name of Federal Candidate <b>AXNE, CINDY, , ,</b>		Office Sought: <input checked="" type="checkbox"/> House    District: <b>03</b> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>IA</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">100800.00</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Des Moines Radio Group</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">05</div> <div style="border: 1px solid black; padding: 2px;">13</div> <div style="border: 1px solid black; padding: 2px;">2020</div> </div>	
Mailing Address <b>5407 W. McKinley</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">59200.00</div>	
City <b>Milwaukee</b>	State <b>WI</b>	Zip Code <b>53208</b>	Transaction ID : <b>SE.5560</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">03</div> <div style="border: 1px solid black; padding: 2px;">06</div> <div style="border: 1px solid black; padding: 2px;">2020</div> </div>
Purpose of Expenditure <b>Media Buy</b>		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	
Name of Federal Candidate <b>AXNE, CINDY, , ,</b>		Office Sought: <input checked="" type="checkbox"/> House    District: <b>03</b> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>IA</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">59200.00</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	100800.00
(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.

Donelson, Tom, , ,

Signature

Date



**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 2 OF 3  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Americas PAC</b>	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00559906         </div>
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 Check if ☒ 24-hour report: ☐ 48-hour report ☐ New report ☒ Amends report filed on 05 / 13 / 2020

Full Name of Payee <b>iHeart Media - Cedar Rapids</b>		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">05</span> / <span style="border: 1px solid black; padding: 2px;">13</span> / <span style="border: 1px solid black; padding: 2px;">2020</span>	
Mailing Address <b>600 Old Marion Road NE</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>57600.00</b></div>	
City <b>Cedar Rapids</b>	State <b>IA</b>	Zip Code <b>52402</b>	Transaction ID : SE.5562
Purpose of Expenditure Media Purchase	Category/ Type	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">03</span> / <span style="border: 1px solid black; padding: 2px;">06</span> / <span style="border: 1px solid black; padding: 2px;">2020</span>	
Name of Federal Candidate <b>FINKENAUER, ABBY, . .</b>		Office Sought: <input checked="" type="checkbox"/> House District: <b>01</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>IA</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>136840.00</b></div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>StateNet</b>		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">05</span> / <span style="border: 1px solid black; padding: 2px;">13</span> / <span style="border: 1px solid black; padding: 2px;">2020</span>	
Mailing Address <b>2601 Northwind Dr.</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>179520.00</b></div>	
City <b>Richmond</b>	State <b>VA</b>	Zip Code <b>23233</b>	Transaction ID : SE.5565
Purpose of Expenditure Media Purchase	Category/ Type	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">03</span> / <span style="border: 1px solid black; padding: 2px;">11</span> / <span style="border: 1px solid black; padding: 2px;">2020</span>	
Name of Federal Candidate <b>ERNST, JONI K, . .</b>		Office Sought: <input type="checkbox"/> House District: <b>00</b> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>IA</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>202720.00</b></div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>237120.00</b></div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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 Donelson, Tom, . .

 Date 05 / 13 / 2020



**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
 (Schedule E)

 PAGE 3 OF 3  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Americas PAC</b>			FEC IDENTIFICATION NUMBER ▼ <b>C00559906</b>		
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">05 / 13 / 2020</span>					
Full Name of Payee <b>Townsquare KOEL</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">05 / 13 / 2020</span>		
Mailing Address <b>501 Sycamore St.</b>			Amount <span style="border: 1px solid black; padding: 2px;">23200.00</span>		
City <b>Waterloo</b>		State <b>IA</b>	Zip Code <b>50703</b>		Transaction ID : <b>SE.5563</b>
Purpose of Expenditure <b>Media Purchase</b>		Category/Type		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">03 / 06 / 2020</span>	
Name of Federal Candidate <b>FINKENAUER, ABBY, . .</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: <b>00</b> <input type="checkbox"/> President    State: <b>IA</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">23200.00</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>Townsquare Media - IA</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">05 / 13 / 2020</span>		
Mailing Address <b>425 Second St. 4th Floor</b>			Amount <span style="border: 1px solid black; padding: 2px;">79240.00</span>		
City <b>Cedar Rapids</b>		State <b>IA</b>	Zip Code <b>52401</b>		Transaction ID : <b>SE.5561</b>
Purpose of Expenditure <b>Media Purchase</b>		Category/Type		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">03 / 06 / 2020</span>	
Name of Federal Candidate <b>FINKENAUER, ABBY, . .</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate    District: <b>01</b> <input type="checkbox"/> President    State: <b>IA</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">79240.00</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;">102440.00</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;">440360.00</span>		
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 <u>Donelson, Tom, . .</u>			Date <span style="border: 1px solid black; padding: 2px;">05 / 13 / 2020</span>		