

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

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Defending Main Street SuperPAC Inc.		FEC IDENTIFICATION NUMBER ▼ C C00540203	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Strategic Media Placement			Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 03 / 2018		
Mailing Address 7669 Stagers Loop			Amount 100000.00		
City Delaware	State OH	Zip Code 43015	Transaction ID : SE.4894		
Purpose of Expenditure TV Ad Buy		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 05 / 01 / 2018		
Name of Federal Candidate Balderson, Troy, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 12 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH		
Calendar Year-To-Date Per Election for Office Sought		350000.00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input checked="" type="checkbox"/> Other (specify) ▶ Special-Primary		

Full Name of Payee Strategic Media Placement			Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 03 / 2018		
Mailing Address 7669 Stagers Loop			Amount 10000.00		
City Delaware	State OH	Zip Code 43015	Transaction ID : SE.4895		
Purpose of Expenditure TV Ad Production		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 05 / 01 / 2018		
Name of Federal Candidate Balderson, Troy, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 12 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH		
Calendar Year-To-Date Per Election for Office Sought		360000.00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input checked="" type="checkbox"/> Other (specify) ▶ Special-Primary		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	110000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	110000.00

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.

Chamberlain, Sarah, , ,

[Electronically Filed]

Date

 MM / DD / YYYY
05 / 03 / 2018

Signature