24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Defending Main Street SuperPAC Inc.	C C00540203
Check if 24-hour report 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y
Full Name of Payee Mentzer Media Services, Inc.	Date of Public Distribution/Dissemination
	04 17 2014
Mailing Address 600 Fairmont Avenue	Amount
Suite 306 City State Zip Code	112000.00
City State Zip Code Towson MD 21286	Transaction ID : SE.4180 Date of Disbursement or Obligation
Purpose of Expenditure TV Ad/Production Category/ Type	04 / D D / 2014
Name of Federal Candidate Support Office	e Sought: X House District: 02
Michael Simpson Oppose	President Senate State: ID
Calendar Year-To-Date Per Election for Office Sought Disbut 2014	ursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	Amount
City State Zip Code	
	S. (S.) Superior Oblination
Purpose of Expenditure Category/ Type	Date of Disbursement or Obligation
Name of Federal Candidate Support Office	e Sought: House District:
Oppose Oppose	President Senate State:
Calendar Year-To-Date Disbu	ursement For: Primary General
Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	112000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	112000.00
Under penalty of perjury I certify that the independent expenditures reported herein were not may 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.	
Sarah Chamberlain [Electronically Filed] Date 0	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature Date 0	7 17 2014