

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

NAME OF COMMITTEE (In Full) Trump Domsday PAC		FEC IDENTIFICATION NUMBER ▼ C C00756635	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Patronage		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 24 / 2020	
Mailing Address P.O. Box 610142		Amount 17500.00	
City Redwood City	State CA	Zip Code 94061	Transaction ID : PDT.E.3
Purpose of Expenditure Website		Category/ Type 24A	Date of Disbursement or Obligation MM / DD / YYYY 09 / 24 / 2020
Name of Federal Candidate Trump, Donald J., , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		95000.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Patronage		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 24 / 2020	
Mailing Address P.O. Box 610142		Amount 17500.00	
City Redwood City	State CA	Zip Code 94061	Transaction ID : PDT.E.4
Purpose of Expenditure Website		Category/ Type 24E	Date of Disbursement or Obligation MM / DD / YYYY 09 / 24 / 2020
Name of Federal Candidate Biden, Joe R., , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		95000.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	35000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	35000.00

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.

*Deane, Shawnda, , ,***[Electronically Filed]**

Date

MM / DD / YYYY
09 / 25 / 2020

Signature