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

Defending Main Street SuperPAC Inc.    Fec IDENTIFICATION NUMBER   C   C   C   C   C   C   C   C   C	Schedule E)	FOR SE OF FORM 24/48
Defending Main Street SuperPAC Inc.  C	NAME OF COMMITTEE (In Full)	
Full Name of Payee New Paymedia, LLC  Mailing Address 1 Easton Oval Suite 310  City State Zip Code Transaction ID: \$E.6001  Date of Public Distribution/Dissemination  Calegory Type  Name of Federal Candidate  Gavarrone, Theresa, Oppose  City State Zip Code  Gavarrone, Theresa, Oppose  Calendar Year-To-Date Per Election for Office Sought  City State  C	Defending Main Street SuperPAC Inc.	
Full Name of Pavee   Amount   Ashour report		C C00540203
New Day Media, LLC  Mailing Address 1 Easton Oval Suite 310  City State Zip Code OH 43219  Purpose of Expenditure TV Adi/Production  Name of Federal Candidate  Gavarone, Theresa  Calendar Year-To-Date Per Election for Office Sought  Name of Federal Candidate  City State Zip Code  Date of Disbursement or Obligation  Date of Disbursement or Obligation  Date of Disbursement or Obligation  Purpose of Expenditure  TV Adi/Production  Name of Federal Candidate  Calendar Year-To-Date Per Election for Office Sought  Date of Disbursement for: X Primary General  Date of Disbursement or Obligation  Date of Disbursement or Obligation  Date of Disbursement or Obligation  Category/ Type  Name of Federal Candidate  Support  Office Sought: House District: Date President Senate State: DH  Date of Disbursement or Obligation  Transaction ID 200 / 2002  Date of Disbursement or Obligation  Transaction ID 200 / 2002  Date of Disburseme	Check if 24-hour report 48-hour report New report Amends report f	
Mailing Address 1 Easton Oval Suite 310  City State Zip Code Columbus OH 43219  Purpose of Expenditure  Purpose of Expenditure  Purpose of Expenditure  Name of Federal Candidate  City State Zip Code  Gavarone, Theresa, Oppose President Senate State: OH  Disbursement For: Primary General  Amount  City State Zip Code  Disbursement For: Primary General  Amount  City State Zip Code  Disbursement For: Primary General  Date of Disbursement or Obligation  Date of Disbursement or Obligation  Date of Disbursement For: Primary General  City State Zip Code  Date of Disbursement or Obligation  Date of Disbursement For: Primary General  City State Zip Code  Date of Disbursement or Obligation  Date of Disbursement or Obligation  Date of Disbursement For: Primary General  Date of Disbursement For: Primary General  City State Zip Code  Date of Disbursement For: Primary General  Purpose of Expenditure  Category/ Type  Date of Disbursement For: Primary General  Disbursement For: Primary General  Per Election for Office Sought  Category/ Type  Date of Disbursement For: Primary General  Coppose President Senate State: Disbursement For: Primary General  Purpose of Expenditure Senate State: Disbursement For: Primary General  Category/ Type  Other (specify) Purpose of Disbursement For: Primary General  Category/ Type  Disbursement For: Primary General  Category/ Type  Disbursement For: Primary General  Coppose President Senate State: Disbursement For: Primary General  Category/ Type Date of Disbursement For: Primary General  Category/ Type Date of Disbursement For: Primary General  Color (specify) Primary		Date of Public Distribution/Dissemination
Mailing Address 1 Easton Oval Suite 310  City State Zip Code Columbus OH 43219  Purpose of Expenditure TV Ad/Production  Name of Federal Candidate Gavarone, Theresa,  Calendar Year-To-Date Per Election for Office Sought  City State Zip Code  Date of Disbursement or Obligation  Transaction ID: SE.6001  Date of Disbursement or Obligation  Office Sought: House District: _09 PresidentSenateState: _OH  Date of Public Distribution/Dissemination  Tityle  Date of Public Distribution/Dissemination  Amount  City State Zip Code  Purpose of Expenditure  Category/ Type  Name of Federal Candidate	New Day Media, LLC	
Suite 310  City State Zip Code Columbus OH 43219  Purpose of Expenditure TV Ad/Production  Name of Federal Candidate Gavarone, Theresa,  Calendar Year-To-Date Per Election for Office Sought  City State Zip Code  Date of Disbursement or Obligation  Purpose of Expenditure  City State Zip Code  Date of Disbursement or Obligation  Purpose of Expenditure  Category/ Type  Date of Public Distribution/Dissemination  Amount  City State Zip Code  Date of Disbursement or Obligation  Purpose of Expenditure  Category/ Type  Name of Federal Candidate  Support Office Sought House District:  Oppose  President Senate State:  Date of Disbursement or Obligation  Amount  City State Zip Code  Date of Disbursement or Obligation  Purpose of Expenditure  Category/ Type  Cate	Mailing Address 1 Easton Oval	04 22 2022
Columbus  OH 43219  Transaction ID: SE.6001  Date of Disbursement or Obligation  TV Ad Production  Name of Federal Candidate Gavarone, Theresa, ,		Amount
Purpose of Expenditure TV Ad/Production  Name of Federal Candidate Gavarone, Theresa,  Calendar Year-To-Date Per Election for Office Sought  City  State  City  State  Category/ Type  Date of Disbursement or Obligation  Purpose of Expenditure  Category/ Type  Name of Federal Candidate  City  State  Zip Code  Date of Disbursement or Obligation  Date of Disbursement For:  Amount  City  State  City  Category/ Type  Name of Federal Candidate  Date of Disbursement or Obligation  Date of Disbursement o	City State Zip Code	100000.00
Purpose of Expenditure TV Ad/Production    Name of Federal Candidate		
Gavarone, Theresa, ,	TV/ Ad/Production Category/	M M / D D / Y Y Y Y
Calendar Year-To-Date Per Election for Office Sought  Full Name of Payee    Date of Public Distribution/Dissemination   Mailing Address	Name of Federal Candidate Support O	ffice Sought:   House District: 09
Per Election for Office Sought  Full Name of Payee  Date of Public Distribution/Dissemination  Mailing Address  Amount  City  State  Zip Code  Date of Disbursement or Obligation  Purpose of Expenditure  Category/ Type  Name of Federal Candidate  Support  Oppose  President  Senate  State:  Disbursement For:  Primary  General  Per Election for Office Sought  (a) SUBTOTAL of Itemized 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.  [Electronically Filed]  Date 04 20 2022	Gavarone, Theresa, , , Oppose	President Senate State: OH
Full Name of Payee    Date of Public Distribution/Dissemination	Calcilidat Total To Edito	)22
Mailing Address  Amount  City State Zip Code  Date of Disbursement or Obligation  Purpose of Expenditure  Category/ Type  Name of Federal Candidate  Support  Office Sought: House District:  Calendar Year-To-Date Per Election for Office Sought  Calendar Year-To-Date Per Election for Office Sought  (a) SUBTOTAL of Itemized Independent Expenditures.  (b) SUBTOTAL of Unitemized Independent Expenditures.  Calendar Year-To-Date Per Election for Office Sought  Disbursement For: Primary General  Other (specify)  (c) TOTAL Independent Expenditures.  Loopoo.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 04 20 2022	Full Name of Payee	
City State Zip Code    Purpose of Expenditure	Tull Name of Fayee	
City State Zip Code    Date of Disbursement or Obligation	Mailing Address	Amount
Purpose of Expenditure    Category/   Type		Amount
Purpose of Expenditure    Category/ Type	City State Zip Code	
Purpose of Expenditure    Category/ Type		Date of Dishursement or Obligation
Oppose President Senate State:  Calendar Year-To-Date Per Election for Office Sought Disbursement For: Primary General Other (specify) ▶  (a) SUBTOTAL of Itemized Independent Expenditures	Calegory/	
Calendar Year-To-Date Per Election for Office Sought  (a) SUBTOTAL of Itemized Independent Expenditures	Name of Federal Candidate	office Sought: House District:
Calendar Year-To-Date Per Election for Office Sought  (a) SUBTOTAL of Itemized Independent Expenditures		
Per Election for Office Sought  Other (specify) ▶  (a) SUBTOTAL of Itemized Independent Expenditures		
(b) SUBTOTAL of Unitemized Independent Expenditures	Caloridar Tour To Bato	
(c) TOTAL Independent Expenditures	(a) SUBTOTAL of Itemized Independent Expenditures	100000.00
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   04   20   2022	(b) SUBTOTAL of Unitemized Independent Expenditures	
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 04 20 2022	(c) TOTAL Independent Expenditures	100000.00
[Electronically Filed] Date 04 20 2022	with, or at the request or suggestion of, any candidate or authorized committee or agent of e	· · · · · · · · · · · · · · · · · · ·
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