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

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
PATRIOTS FOR TRUMP	C C00586826
	C 00030020
Check if 24-hour report 48-hour report New report Amends report filed	d on
Full Name of Payee	Date of Public Distribution/Dissemination
AMERICAN EXPRESS	10 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 650448	Amount
City State Zip Code	1869.56
DALLAS TX 75265	Transaction ID : SE.4158 Date of Disbursement or Obligation
Purpose of Expenditure POSTAGE FOR VOTER CONTACT MAILING Category/ Type 004	10 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Offic	ce Sought: House District: 00
DONALD J TRUMP Oppose	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought Distriction 1	oursement For: X Primary General Other (specify) ▶
Full Name of Payee INTEGRAM	Date of Public Distribution/Dissemination
	10 13 2015
Mailing Address 22695 COMMERCE CENTER CT	Amount
City State Zip Code	1952.10
DULLES VA 20166	Transaction ID : SE.4157 Date of Disbursement or Obligation
Purpose of Expenditure VOTER CONTACT MAILING Category/ Type 004	10 D D D Z 2015
Name of Federal Candidate Support Office	ce Sought: House District: 00
DONALD J TRUMP Oppose	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought Dist 201	oursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	3821.66
(b) SUBTOTAL of Unitemized Independent Expenditures	1171171171
(c) TOTAL Independent Expenditures	3821.66
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.	
2 4.10	10 14 2015
Signature	