

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

 PAGE 1 OF 4
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) FEDUP POLITICAL ACTION COMMITTEE AKA FEDUP PAC		FEC IDENTIFICATION NUMBER ▼ C C00455923	
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 <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY / / </div> <div>MM / DD / YYYY / / </div> <div>MM / DD / YYYY / / </div> </div>	

Full Name of Payee American Target Advertising			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 25 / 2020		
Mailing Address 9625 Surveyor Court Suite 400			Amount 151.00		
City Manassas	State VA	Zip Code 20110	Transaction ID : SE.16131		
Purpose of Expenditure Creative Production Paper (Estimate)		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 25 / 2020		
Name of Federal Candidate TRUMP, DONALD J., ,		<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		264680.46	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee Data Management Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 25 / 2020		
Mailing Address PO Box 846			Amount 136.00		
City Stoneville	State NC	Zip Code 27048	Transaction ID : SE.16136		
Purpose of Expenditure Data Processing (Estimate)		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 25 / 2020		
Name of Federal Candidate TRUMP, DONALD J., ,		<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		268380.57	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	287.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL 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.

Testa, Donna, Doe, ,

[Electronically Filed]

Date

 MM / DD / YYYY
 09 / 26 / 2020

Signature

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NAME OF COMMITTEE (In Full) FEDUP POLITICAL ACTION COMMITTEE AKA FEDUP PAC		FEC IDENTIFICATION NUMBER ▼ C C00455923
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 Day & Night Printing		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 25 / 2020	
Mailing Address 8618 Westwood Center Drive Suite LL-100		Amount 1890.00	
City Vienna	State VA	Zip Code 22182	Transaction ID : SE.16134
Purpose of Expenditure Printing and Mailshop (Estimate)	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 25 / 2020	
Name of Federal Candidate TRUMP, DONALD J., ,		<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		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee Facebook		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 25 / 2020	
Mailing Address 1 Hacker Way		Amount 40000.00	
City Menlo Park	State CA	Zip Code 94025	Transaction ID : SE.16130
Purpose of Expenditure Online Advertising Space 9/25/2020-11/2/2020 (Estimate)	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 25 / 2020	
Name of Federal Candidate BIDEN, JOSEPH R JR, ,		<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		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	41890.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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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 Giant Printing		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 25 / 2020	
Mailing Address 4116 Walney Road Suite F		Amount 22.79	
City Chantilly	State VA	Zip Code 20151	Transaction ID : SE.16132
Purpose of Expenditure Envelopes (Estimate)		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 25 / 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		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee The Viguerie Company		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 25 / 2020	
Mailing Address 9625 Surveyor Court Suite 400		Amount 150.12	
City Manassas	State VA	Zip Code 20110	Transaction ID : SE.16135
Purpose of Expenditure List Rental (Estimate)		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 25 / 2020
Name of Federal Candidate TRUMP, DONALD J., ,		<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		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	172.91
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Full Name of Payee United States Postal Service		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 25 / 2020	
Mailing Address 475 L'Enfant Plaza SW		Amount 1501.20	
City Washington	State DC	Zip Code 20260	Transaction ID : SE.16133
Purpose of Expenditure Postage and Shipping (Estimate)	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 25 / 2020	
Name of Federal Candidate TRUMP, DONALD J., ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 266204.45		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure	Category/ Type		
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1501.20
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	43851.11

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