

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Defending Main Street SuperPAC Inc.		FEC IDENTIFICATION NUMBER ▼ C C00540203
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee Strategic Media Placement Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 25 / 2024
Mailing Address 7669 Stagers Loop		Amount 250603.44
City Delaware	State OH	Zip Code 43015
Purpose of Expenditure TV Ad	Category/ Type	Transaction ID : SE.6629 Date of Disbursement or Obligation MM / DD / YYYY 09 / 23 / 2024
Name of Federal Candidate Bynum, Janelle, , ,		Office Sought: ☒ House District: 05 ☐ President ☐ Senate State: OR
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee Strategic Media Placement Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 25 / 2024
Mailing Address 7669 Stagers Loop		Amount 211658.80
City Delaware	State OH	Zip Code 43015
Purpose of Expenditure TV Ad	Category/ Type	Transaction ID : SE.6630 Date of Disbursement or Obligation MM / DD / YYYY 09 / 23 / 2024
Name of Federal Candidate Rollins, Will, , ,		Office Sought: ☒ House District: 41 ☐ President ☐ Senate State: CA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	462262.24
(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.

Chamberlain, Sarah, , ,

Signature

Date

MM / DD / YYYY
09 / 24 / 2024

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(Schedule E)PAGE 2 OF 2
FOR SE OF FORM 24/48

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Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee Strategic Media Placement Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 23 / 2024
Mailing Address 7669 Stagers Loop		Amount 279162.46
City Delaware	State OH	Zip Code 43015
Purpose of Expenditure TV Ad/Production	Category/ Type	Transaction ID : SE.6631 Date of Disbursement or Obligation MM / DD / YYYY 09 / 23 / 2024
Name of Federal Candidate Vargas, Anthony, , ,		☐ Support ☒ Oppose
		Office Sought: ☒ House District: 02 ☐ President ☐ Senate State: NE
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee The Strategy Group for Media Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 25 / 2024
Mailing Address 7669 Stagers Loop		Amount 13188.58
City Delaware	State OH	Zip Code 43015
Purpose of Expenditure TV Ad Production	Category/ Type	Transaction ID : SE.6632 Date of Disbursement or Obligation MM / DD / YYYY 09 / 23 / 2024
Name of Federal Candidate Rollins, Will, , ,		☐ Support ☒ Oppose
		Office Sought: ☒ House District: 41 ☐ President ☐ Senate State: CA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	292351.04
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	754613.28

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, , ,

Signature

Date

MM / DD / YYYY
09 / 24 / 2024