24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
The Committee To Defend The President	C C00544767
Check if 24-hour report 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y
Full Name of Payee ALLEGIANCE DIRECT, LLC	Date of Public Distribution/Dissemination
Mailing Address 215 DEPOT CT. SE SUITE 302	03 01 2020 Amount
City State Zip Code LEESBURG VA 20175	10000.00 Transaction ID : SE24.154709
Purpose of Expenditure ESTIMATED MARCH MAIL VOTER CONTACT Category/ Type	Date of Disbursement or Obligation 03
TRUMP DONALD I	e Sought: House District:
Chhose X	President Senate State: ursement For: Primary General
Full Name of Payee	Other (specify) ▶ Date of Public Distribution/Dissemination
CAMPAIGN SOLUTIONS Mailing Address 117 N SAINT ASAPH ST.	03 / 01 / 2020
City State Zip Code	Amount 60000.00
ALEXANDRIA VA 22314	Transaction ID : SE24.154710 Date of Disbursement or Obligation
Purpose of Expenditure ESTIMATED MARCH ONLINE VOTER CONTACT Category/ Type	03 / 02 / 2020
Name of Federal Candidate TRUMP, DONALD, J., , Oppose X Support Office	President Senate State:
Calendar Year-To-Date Per Election for Office Sought Disbute 2020	ursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	70000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not mount with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
	3 / 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 4 FOR SE OF FORM 24/48	
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
The Committee To Defend The President	C C00544767	
	0 000044707	
Check if 24-hour report 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y	
Full Name of Payee	Date of Public Distribution/Dissemination	
CAMPAIGN SOLUTIONS	03 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 117 N SAINT ASAPH ST.	Amount	
City State Zip Code	60000.00	
ALEXANDRIA VA 22314	Transaction ID : SE24.154711 Date of Disbursement or Obligation	
Purpose of Expenditure ESTIMATED MARCH LIST RENTAL FEES Category/ Type	03 / 02 / 2020	
Name of Federal Candidate Support Office	Sought: House District:	
TRUMP, DONALD, J., ,	President Senate State:	
Calendar Year-To-Date Per Election for Office Sought Disbut 2020	rsement For: Primary	
Full Name of Payee	Date of Public Distribution/Dissemination	
CONNELL DONATELLI, INC.	03 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 117 N SAINT ASAPH ST.	Amount	
City State Zip Code	30000.00	
ALEXANDRIA VA 22314	Transaction ID : SE24.154712 Date of Disbursement or Obligation	
Purpose of Expenditure ESTIMATED MARCH ONLINE VOTER CONTACT Category/ Type	M 03	
Name of Federal Candidate Support Office	Sought: House District:	
TRUMP DONALD .I	President Senate State:	
Calendar Year-To-Date Per Election for Office Sought Disbu 2020	rsement For: Primary General Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	90000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures	1171171171	
(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.		
Backer, Dan, , , [Electronically Filed] Date		

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

Schedule E)	FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
The Committee To Defend The President	C C00544767	
	0 00041101	
Check if 24-hour report 48-hour report New report Amends report	ort filed on	
Full Name of Payee DONORBUREAU, LLC	Date of Public Distribution/Dissemination	
<u> </u>	03 01 2020	
Mailing Address 1900 N CULPEPER ST	Amount	
City State Zip Code	15000.00	
ARLINGTON VA 22207	Transaction ID : SE24.154713 Date of Disbursement or Obligation	
Purpose of Expenditure ESTIMATED MARCH PHONE VOTER CONTACT Category/ Type	03 / 02 / 4 2020	
Name of Federal Candidate Support	Office Sought: House District:	
TRUMP, DONALD, J., , Oppose	resident Senate State:	
Calendar Year-To-Date Per Election for Office Sought 881533.82	Disbursement For: Primary General 2020 Gther (specify) ▶	
Full Name of Payee	Date of Public Distribution/Dissemination	
INFOCISION MANAGEMENT CORPORATION	03 01 2020	
Mailing Address P.O. BOX 932441		
	Amount	
City State Zip Code	10000.00	
CLEVELAND OH 44193	Transaction ID : SE24.154716 Date of Disbursement or Obligation	
Purpose of Expenditure ESTIMATED MARCH PHONE VOTER CONTACT Category/ Type	03 / 02 / 2020	
Name of Federal Candidate	Office Sought: House District:	
TRUMP, DONALD, J., , Oppose	President Senate State:	
Calendar Year-To-Date Per Election for Office Sought 881533.82	Disbursement For: ☐ Primary ☐ General 2020 ☐ Other (specify) ▶	
	Cities (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	25000.00	
(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.		
Backer, Dan, , , [Electronically Filed] Date	9 03 02 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Signature		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 4 OF 4 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
The Committee To Defend The President	C C00544767	
Check if 24-hour report 48-hour report New report Amends report filed on	M / D = D / Y = Y = Y	
Full Name of Payee Date of	of Public Distribution/Dissemination	
	03 01 7 2020	
Mailing Address 117 NORTH SAINT ASAPH STREET Amoun	nt	
City State Zip Code	10000.00	
Date of	action ID : SE24.154714 of Disbursement or Obligation	
Purpose of Expenditure ESTIMATED MARCH ONLINE VOTER CONTACT Category/ Type	03 02 2020	
Name of Federal Candidate X Support Office Sough	t: House District:	
TRUMP, DONALD, J., , Oppose Preside	ent Senate State:	
Calendar Year-To-Date Per Election for Office Sought Disbursement 2020 Office Sought	t For: Primary X General ther (specify) ▶	
	of Public Distribution/Dissemination	
	03 / 01 / 2020	
Mailing Address 3948 3RD STREET S	nt	
SUITE 18		
	100000.00 oction ID : SE24.154715	
Purpose of Expenditure	of Disbursement or Obligation 03	
Name of Federal Candidate X Support Office Sough	nt: House District:	
TRUMP, DONALD, J., , Oppose Preside		
Calendar Year-To-Date Per Election for Office Sought Disbursemen 2020 O	ther (specify) ►	
(a) SUBTOTAL of Itemized Independent Expenditures	110000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures	4 4	
(c) TOTAL Independent Expenditures	295000.00	
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.		
Backer, Dan, , , [Electronically Filed] Date 03	02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
gsc.		