

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

NAME OF COMMITTEE (In Full) DEFEND AMERICAN JOBS		FEC IDENTIFICATION NUMBER ▼ C C00836221	
Check if ☒ 24-hour report ☐ 48-hour report		☒ New report ☐ Amends report filed on	

Full Name of Payee Dockside Strategies LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 21 / 2025		
Mailing Address 8 The Green Ste. 14712			Amount 2450.00		
City Dover	State DE	Zip Code 19901	Transaction ID : SE.4493		
Purpose of Expenditure IE-Fine-Media Production		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate FINE, RANDY, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 06 ☐ President ☐ Senate State: FL		
Calendar Year-To-Date Per Election for Office Sought		1161801.52	Disbursement For: ☐ Primary ☐ General 2025 ☒ Other (specify) ▶ Special-General		

Full Name of Payee Dockside Strategies LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 21 / 2025		
Mailing Address 8 The Green Ste. 14712			Amount 2250.00		
City Dover	State DE	Zip Code 19901	Transaction ID : SE.4513		
Purpose of Expenditure IE-Patronis-Media Production		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate PATRONIS, JIMMY JR., , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 01 ☐ President ☐ Senate State: FL		
Calendar Year-To-Date Per Election for Office Sought		347546.17	Disbursement For: ☐ Primary ☐ General 2025 ☒ Other (specify) ▶ Special-General		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	4700.00
(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.

Lisker, Lisa, , ,

Signature

Date

MM / DD / YYYY
03 / 22 / 2025