## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)		PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		
The Committee To Defend The President		C C00544767
Check if 24-hour report  X 48-hour report  New report Amends report filed on		
Full Name of Payee THE STRATEGY GROUP FOR MEDIA		Date of Public Distribution/Dissemination
		10 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 7669 STAGGERS LOOPS		Amount
City State 2	Zip Code	39968.46
DELAWARE OH	43015	Transaction ID : SE24.139804 Date of Disbursement or Obligation
Purpose of Expenditure AD PRODUCTION	Category/ Type	10 17 2018
Name of Federal Candidate	<b>✗</b> Support Office	ce Sought: House District:
TRUMP, DONALD, J, ,	Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	Disb 1703495.89	oursement For: Primary <b>X</b> General O Other (specify) ▶
Full Name of Payee		Date of Public Distribution/Dissemination
		M M / D D / Y Y Y Y
Mailing Address		Amount
City State	Zip Code	
City State .	Zip Code	
Purpose of Expenditure	Onto mam./	Date of Disbursement or Obligation
	Category/ Type	M = M / D = D / 1 = 1 = 1 = 1
Name of Federal Candidate		ce Sought: House District:
	Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	Disk	bursement For: Primary General
		Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	·····	39968.46
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	······	39968.46
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.		
	cally Filed] Date	10 17 2018
Signature		