

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

NAME OF COMMITTEE (In Full) Defeat Bad Leaders		FEC IDENTIFICATION NUMBER ▼ C C00863704	
Check if ☒ 24-hour report ☐ 48-hour report ☐ New report ☒ Amends report filed on		MM / DD / YYYY 10 / 20 / 2024	

Full Name of Payee Outfront Media		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2024	
Mailing Address 405 Lexington Ave Fl 14		Amount 1700.00	
City New York	State NY	Zip Code 10174-0002	Transaction ID : 500192299
Purpose of Expenditure Media buy		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 17 / 2024
Name of Federal Candidate TRUMP, DONALD, J., ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: US
Calendar Year-To-Date Per Election for Office Sought		11252.11	Disbursement For: ☐ Primary ☒ General 2024 ☐ 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		☐ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1700.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	1700.00

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.

Leonard, Richard, , ,
Signature

Date MM / DD / YYYY
10 / 20 / 2024