

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

PAGE 1 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) AMERICAN UNITY PAC INC	FEC IDENTIFICATION NUMBER C C00523589
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee McCarthy Hennings Media Inc.		Date 10 / 17 / 2012
Mailing Address 1850 M St., NW Ste. 235		Amount 9086.20
City Washington	State DC	Zip Code 20036
Purpose of Expenditure IE-Tisei-Media Production	Category/ Type 004	Transaction ID : SE.4214
Name of Federal Candidate Supported or Opposed by Expenditure: RICHARD R. TISEI		Office Sought: <input checked="" type="checkbox"/> House State: MA <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 9086.20		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Multi Media Services Inc.		Date 10 / 17 / 2012
Mailing Address 915 King St., 2nd Floor		Amount 44000.00
City Alexandria	State VA	Zip Code 22314
Purpose of Expenditure IE-Tisei-Media Buy	Category/ Type 004	Transaction ID : SE.4216
Name of Federal Candidate Supported or Opposed by Expenditure: RICHARD R. TISEI		Office Sought: <input checked="" type="checkbox"/> House State: MA <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 519086.20		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	449086.20
(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.

Samuel Ashner

[Electronically Filed]

Date

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) AMERICAN UNITY PAC INC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00523589 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Targeted Victory		Date MM / DD / YYYY <div style="border: 1px solid black; padding: 2px;">10 / 17 / 2012</div>
Mailing Address 1033 N. Fairfax St.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">70000.00</div>
City Alexandria	State VA	
Zip Code 22314	Transaction ID : SE.4215	
Purpose of Expenditure IE-Tisei-Online Ads	Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	Office Sought: <input checked="" type="checkbox"/> House State: MA <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: RICHARD R. TISEI		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">79086.20</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee		Date MM / DD / YYYY
Mailing Address		Amount <div style="border: 1px solid black; padding: 2px;"></div>
City	State	
Zip Code	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Purpose of Expenditure	Category/ Type <div style="border: 1px solid black; padding: 2px;"></div>	Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"></div>		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">70000.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">519086.20</div>

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.

Samuel Ashner
 Signature [Electronically Filed] Date MM / DD / YYYY

10 / 19 / 2012