24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

NAME OF COMMITTE (In Full) AMEDICAN EFFER ATION OF CTATE COUNTY & MUNICIPAL FEC IDENTIFICATION NUMBER FEC IDENTIFICATION NUMBE	
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES PEOPLE	R▼
Check If 24-hour report	Y
Full Name (Last, First, Middle Initial) of Payee THE CAMPAIGN GROUP Mailing Address 1600 Locust Street Date Manual Mailing Address 1600 Locust Street	Y
City State Zip Code 500000.0 Philadelphia PA 19103 Transaction ID : SE.269656 Transaction ID : SE.269656	0 VA
Radio TV & Online ads 'Republicans' Name of Federal Candidate Supported or Opposed by Expenditure: Category/ Type 004 Senate District: President	00
Check One: Support Opport Calendar Year-To-Date Per Election for Office Sought Support Opport Disbursement For: Primary 2012 Other (specify)	
Full Name (Last, First, Middle Initial) of Payee Date	Y
Mailing Address Amount	-
City State Zip Code	
Purpose of Expenditure Category/ Type Office Sought: House State: Senate District: President	
Name of Federal Candidate Supported or Opposed by Expenditure: Check One: Support Oppo	se
Calendar Year-To-Date Per Election for Office Sought Disbursement For: Primary Gene	ral
(a) SUBTOTAL of Itemized Independent Expenditures	
(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 corwith, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a pol party committee) any political party committee or its agent.	
LAURA REYES [Electronically Filed] Date	