

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

PAGE 1 OF 4
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Independence USA PAC	FEC IDENTIFICATION NUMBER C C00532705
Check If <input checked="" type="checkbox"/> 24-hour report <input 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 Connections Media LLC		Date 10 / 30 / 2012
Mailing Address 1428 U Street NW 3rd Floor		Amount 15000.00
City Washington	State DC	Zip Code 20009
Purpose of Expenditure Advertising - Internet (estimate) (also opposes Daniel Webster)		Category/Type 004
Name of Federal Candidate Supported or Opposed by Expenditure: VAL DEMINGS		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 10 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 2005376.68		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)

Transaction ID : SE.4213

Full Name (Last, First, Middle Initial) of Payee Mentzer Media Services, Inc.		Date 10 / 30 / 2012
Mailing Address 600 Fairmount Avenue		Amount 691250.00
City Towson	State MD	Zip Code 21286
Purpose of Expenditure Media Buy and Production		Category/Type 004
Name of Federal Candidate Supported or Opposed by Expenditure: ROBERT JAMES DOLD		Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 10 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 909964.44		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)

Transaction ID : SE.4218

(a) SUBTOTAL of Itemized Independent Expenditures.....	706250.00
(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.

Diane Gubelli
Signature

[Electronically Filed]

Date 10 / 31 / 2012

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

NAME OF COMMITTEE (In Full) Independence USA PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00532705 </div>
Check If <input checked="" type="checkbox"/> 24-hour report <input 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 SKDKnickerbocker		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 30 / 2012 </div>
Mailing Address 1818 N. St. NW Suite 450		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M M . C C C C C C C C 2350000.00 </div>
City Washington State DC Zip Code 20036	Transaction ID : SE.4219	
Purpose of Expenditure Media Buy and Production (also opposes Joe Baca)	Category/Type 004	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 35 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: GLORIA NEGRETE MCLEOD		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2675702.25		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 <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M M . C C C C C C C C </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
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M M . C C C C C C C C 2350000.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M M . C C C C C C C C </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M M . C C C C C C C C 4934228.74 </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.

Diane Gubelli
 Signature _____ [Electronically Filed] Date 10 / 31 / 2012