## 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full) AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES PEOPLE	FEC IDENTIFICATION NUMBER ▼  C C00011114
Check If 24-hour report	ed on Mam / Dab / Yayayay
Full Name (Last, First, Middle Initial) of Payee THE CAMPAIGN GROUP  Mailing Address 1600 Locust Street	Date 09 / 27 / 2012
City State Zip Code Philadelphia PA 19103  Purpose of Expenditure Category/ Off	Amount  500000.00  Transaction ID : SE.269657  fice Sought: House State: OH
Radio TV & Online ads 'Republicans'  Name of Federal Candidate Supported or Opposed by Expenditure:	Senate District: 00  President  Support  Oppose
Calendar Year-To-Date Per Election for Office Sought Dis	Sbursement For: Primary General  Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Mailing Address	Amount
City State Zip Code	7 7 7
Type	fice Sought: House State:  Senate District:  President
Name of Federal Candidate Supported or Opposed by Expenditure:	eck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Sbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	500000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	500000.00
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.	
LAURA REYES  [Electronically Filed] Date	09 28 2012
- Organization	