

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CREDO SUPERPAC			FEC IDENTIFICATION NUMBER ▼ C C00507517		
Check If ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y					
Full Name (Last, First, Middle Initial) of Payee Alliance Graphics			Date M M / D D / Y Y Y Y Y Y Y Y 10 / 18 / 2012		
Mailing Address 1101 8th Street, Suite 100			Amount 3101.12		
City Berkeley	State CA	Zip Code 94710	Transaction ID : SE.10561		
Purpose of Expenditure Printing		Category/ Type 	Office Sought: ☒ House State: IL ☐ Senate District: 08 ☐ President		
Name of Federal Candidate Supported or Opposed by Expenditure: JOE WALSH			Check One: ☐ Support ☒ Oppose		
Calendar Year-To-Date Per Election for Office Sought 42757.50			Disbursement For: ☐ Primary ☒ General 2012 ☐ Other (specify) ▶		
Full Name (Last, First, Middle Initial) of Payee Alliance Graphics			Date M M / D D / Y Y Y Y Y Y Y Y 10 / 18 / 2012		
Mailing Address 1101 8th Street, Suite 100			Amount 3485.79		
City Berkeley	State CA	Zip Code 94710	Transaction ID : SE.10562		
Purpose of Expenditure Bags		Category/ Type 	Office Sought: ☒ House State: IL ☐ Senate District: 08 ☐ President		
Name of Federal Candidate Supported or Opposed by Expenditure: JOE WALSH			Check One: ☐ Support ☒ Oppose		
Calendar Year-To-Date Per Election for Office Sought 46243.29			Disbursement For: ☐ Primary ☒ General 2012 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			6586.91		
(b) SUBTOTAL of Unitemized Independent Expenditures▶			 		
(c) TOTAL Independent Expenditures.....▶			6586.91		
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. Becky Bond [Electronically Filed] Signature _____ Date M M / D D / Y Y Y Y Y Y Y Y 10 / 19 / 2012					