

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 1
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

INTERNATIONAL ASSOCIATION OF FIREFIGHTERS INTERESTED
IN REGISTRATION AND EDUCATION PAC

FEC IDENTIFICATION NUMBER ▼

C C00029447

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

Tricom Associates

Date

MM / DD / YYYY

Mailing Address 2009 North 14th Street

Suite 407

Amount

City

Arlington

State

VA

Zip Code

22201

24500.00

Transaction ID : D22704

Purpose of Expenditure

Online Advertising Buy

Category/
Type

004

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election
for Office Sought

422924.69

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Financial Innovations

Date

MM / DD / YYYY

Mailing Address One Weingeroff Boulevard

Amount

City

Cranston

State

RI

Zip Code

02910

156.98

Transaction ID : D22705

Purpose of Expenditure

Yard Sign Shipping

Category/
Type

006

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election
for Office Sought

422924.69

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

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

24656.98

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

24656.98

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.

Thomas H Miller

[Electronically Filed]

Date

MM / DD / YYYY

Signature