

2010 LEADERSHIP COUNCIL

517 WEST ORMSBY AVENUE

LOUISVILLE

KY

40203

FEC ID No. C00490003

☒ 24-Hour Notice ☐ 48-Hour Notice

## SCHEDULE E (FEC Form 3X)

## ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 1 / 5

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)  
2010 LEADERSHIP COUNCIL

FEC IDENTIFICATION NUMBER

C C00490003

Check if ☒ 24-hour notice ☐ 48-hour notice

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

Buying Time Media, LLC

Date

M M / D D / Y Y Y Y  
1 0 / 2 8 / 2 0 1 0

Amount

8000.00

Mailing Address

650 Massachusetts Ave., NW

City

Washington

State

DC

Zip Code

20004

Purpose of Expenditure

Advertising

Category/  
TypeOffice Sought: ☒ House

State: NY

☐ Senate

District: 20

☐ PresidentialCheck One: ☐ Support ☒ OpposeDisbursement For: ☐ Primary ☒ General 2010☐ Other (specify) : \_\_\_\_\_

Transaction ID: SE.4141

Calendar Year-To-Date Per Election

63950.00

for Office Sought

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

Buying Time Media, LLC

Date

M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 1 0

Amount

7000.00

Mailing Address

650 Massachusetts Ave., NW

City

Washington

State

DC

Zip Code

20004

Purpose of Expenditure

Advertising

Category/  
TypeOffice Sought: ☒ House

State: ID

☐ Senate

District: 01

☐ PresidentialCheck One: ☐ Support ☒ OpposeDisbursement For: ☐ Primary ☒ General 2010☐ Other (specify) : \_\_\_\_\_

Transaction ID: SE.4143

Calendar Year-To-Date Per Election

9600.00

for Office Sought

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

15000.00

(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.

ANDREW HORNE

Signature

M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 1 0

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**PAGE OF 2 / 5  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) 2010 LEADERSHIP COUNCIL			FEC IDENTIFICATION NUMBER <b>C</b> C00490003	
Check if <input checked="" type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice				
Full Name (Last, First, Middle, Initial) of Payee Buying Time Media, LLC			Date M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0	
Mailing Address 650 Massachusetts Ave., NW			Amount 24000.00	
City Washington	State DC	Zip Code 20004	Office Sought: <input checked="" type="checkbox"/> House State: WI <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Purpose of Expenditure Advertising		Category/ Type	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: RON KIND			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought			Transaction ID: SE.4146	
Full Name (Last, First, Middle, Initial) of Payee Buying Time Media, LLC			Date M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0	
Mailing Address 650 Massachusetts Ave., NW			Amount 10000.00	
City Washington	State DC	Zip Code 20004	Office Sought: <input checked="" type="checkbox"/> House State: MS <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> Presidential	
Purpose of Expenditure Ad Production		Category/ Type	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: GENE TAYLOR			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought			Transaction ID: SE.4147	

(a) SUBTOTAL of Itemized Independent Expenditures .....	34000.00
(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.	
ANDREW HORNE Signature	
M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0	

**24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :****FEC ID No.**☐ 24-Hour Notice ☐ 48-Hour Notice**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**PAGE OF 3 / 5  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) 2010 LEADERSHIP COUNCIL			<b>FEC IDENTIFICATION NUMBER</b> <b>C</b> C00490003		
Check if <input checked="" type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice					
Full Name (Last, First, Middle, Initial) of Payee Buying Time Media, LLC			Date M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0		
Mailing Address 650 Massachusetts Ave., NW			Amount 15000.00		
City Washington	State DC	Zip Code 20004	Office Sought: <input checked="" type="checkbox"/> House State: KY <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> Presidential		
Purpose of Expenditure TV Advertising		Category/ Type	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Name of Federal Candidate supported or Opposed by expenditure: GARLAND "ANDY" BARR			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) : _____		
Calendar Year-To-Date Per Election for Office Sought			Transaction ID: SE.4148		
Full Name (Last, First, Middle, Initial) of Payee Mullen & Co.			Date M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 1 0		
Mailing Address 1101 Pennsylvania Ave., NW			Amount 2000.00		
City Wahsington	State DC	Zip Code 20004	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 20 <input type="checkbox"/> Presidential		
Purpose of Expenditure Ad Production		Category/ Type	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Name of Federal Candidate supported or Opposed by expenditure: CHRIS P GIBSON			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) : _____		
Calendar Year-To-Date Per Election for Office Sought			Transaction ID: SE.4142		

(a) SUBTOTAL of Itemized Independent Expenditures .....	<b>17000.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures .....	
<p>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.</p> <p>ANDREW HORNE Signature</p>	
M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0	

## 24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**PAGE OF 4 / 5  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) 2010 LEADERSHIP COUNCIL		FEC IDENTIFICATION NUMBER <b>C</b> C00490003	
Check if <input checked="" type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Mullen & Co.		Date M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0	
Mailing Address 1101 Pennsylvania Ave., NW		Amount 2600.00	
City Wahsington	State DC	Zip Code 20004	Office Sought: <input checked="" type="checkbox"/> House State: ID <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential
Purpose of Expenditure Ad Production	Category/ Type		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate supported or Opposed by expenditure: RAUL RAFAEL LABRADOR		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		Transaction ID: SE.4144	
9600.00			
Full Name (Last, First, Middle, Initial) of Payee Mullen & Co.		Date M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0	
Mailing Address 1101 Pennsylvania Ave., NW		Amount 3600.00	
City Wahsington	State DC	Zip Code 20004	Office Sought: <input checked="" type="checkbox"/> House State: WI <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential
Purpose of Expenditure Ad Production	Category/ Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate supported or Opposed by expenditure: RON KIND		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		Transaction ID: SE.4145	
27600.00			

(a) SUBTOTAL of Itemized Independent Expenditures .....	6200.00
(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.	
ANDREW HORNE Signature	M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0

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NAME OF COMMITTEE (In Full)  
2010 LEADERSHIP COUNCIL

FEC IDENTIFICATION NUMBER

C C00490003

Check if ☒ 24-hour notice ☐ 48-hour notice

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

Mullen &amp; Co.

Date

M M  
1 0D D  
2 9Y Y Y Y  
2 0 1 0

Amount

5600.00

City

Wahsington

State

DC

Zip Code

20004

Purpose of Expenditure

Advertising

Category/  
TypeOffice Sought: ☒ House

State: AR

☐ Senate

District: 01

☐ PresidentialCheck One: ☒ Support ☐ OpposeDisbursement For: ☐ Primary ☒ General 2010☐ Other (specify) : \_\_\_\_\_

Transaction ID: SE.4149

Calendar Year-To-Date Per Election

5600.00

for Office Sought

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

5600.00

(b) SUBTOTAL of Unitemized Independent Expenditures .....

(c) TOTAL Independent Expenditures .....

77800.00

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ANDREW HORNE

Signature

M M  
1 0D D  
2 9Y Y Y Y  
2 0 1 0