

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) INDEPENDENT MAJORITY GROUP	FEC IDENTIFICATION NUMBER ▼ C C00566638
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on	

Full Name of Payee SwiftKurrent			Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2014		
Mailing Address 83 Cabot Street			Amount 5000.00		
City Beverly	State MA	Zip Code 01915	Transaction ID : SE.4107 Date of Disbursement or Obligation MM / DD / YYYY 11 / 03 / 2014		
Purpose of Expenditure Media Buy		Category/ Type 004	Name of Federal Candidate KATHLEEN RICE		
Calendar Year-To-Date Per Election for Office Sought 455000.00		Office Sought: ☒ House District: 04 ☐ President ☐ Senate State: NY Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶			

Full Name of Payee			Date of Public Distribution/Dissemination MM / DD / YYYY		
Mailing Address			Amount 		
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY		
Purpose of Expenditure		Category/ Type 	Name of Federal Candidate		
Calendar Year-To-Date Per Election for Office Sought 		Office Sought: ☐ House District: _____ ☐ President ☐ Senate State: _____ Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶			

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	5000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	5000.00

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.

Nick Connors

[Electronically Filed]

Date

MM / DD / YYYY
11 / 03 / 2014

Signature