

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) CONNECTICUT'S FUTURE PAC INC	FEC IDENTIFICATION NUMBER C C00524751
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on MM / DD / YYYY 09 / 21 / 2012	

Full Name (Last, First, Middle Initial) of Payee GSG Communications LLC		Date MM / DD / YYYY 09 / 20 / 2012
Mailing Address 895 Broadway, 5th Floor		Amount 20250.00
City New York	State NY	Zip Code 10003
Purpose of Expenditure Digital media strategy & buy	Category/Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Chris Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : WFT2012821166-1

Full Name (Last, First, Middle Initial) of Payee Waterfront Strategies		Date MM / DD / YYYY 09 / 21 / 2012
Mailing Address 3050 K Street, NW Suite 100		Amount 99687.70
City Washington	State DC	Zip Code 20007
Purpose of Expenditure Television advertisement	Category/Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Chris Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : WFT2012821169-1

(a) SUBTOTAL of Itemized Independent Expenditures.....	119937.70
(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.

Joseph Taborsak

Signature

[Electronically Filed]

Date

MM / DD / YYYY 10 / 11 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) CONNECTICUT'S FUTURE PAC INC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00524751 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on	
<div style="display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y Y Y 09 / 21 / 2012 </div>	

Full Name (Last, First, Middle Initial) of Payee MD Tech Team	Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 08 / 10 / 2012 </div>
Mailing Address 18 Hendee Road	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 525.99 </div>
City State Zip Code Manchester CT 06040	Transaction ID : WFT20128211610-1
Purpose of Expenditure Website	Office Sought: <input type="checkbox"/> House State: CT <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Chris Murphy	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee SKD Knickerbocker	Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 09 / 21 / 2012 </div>
Mailing Address 1818 N Street, NW Suite 450	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 11263.11 </div>
City State Zip Code Washington DC 20036	Transaction ID : WFT20129111450-1
Purpose of Expenditure Production cost for advertisement	Office Sought: <input type="checkbox"/> House State: CT <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy Chris	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 11789.10 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 131726.80 </div>

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.

Joseph Taborsak
 Signature _____ Date
M M / D D / Y Y Y Y Y Y
10 / 11 / 2012

[Electronically Filed]