

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

PAGE 1 OF 2  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>New Virginia PAC</b>	FEC IDENTIFICATION NUMBER <b>C</b> C00515452
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Abar Hutton Media</b>		Date 11 / 02 / 2012
Mailing Address 6190 Grovedale Ct Ste 200		Amount 10000.00
City Alexandrai      State VA      Zip Code 22310	Transaction ID : SE.4308	
Purpose of Expenditure Media Buy - 'Direction'	Category/Type	Office Sought: <input type="checkbox"/> House      State: VA <input checked="" type="checkbox"/> Senate      District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: GEORGE ALLEN		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 63873.92		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee <b>Abar Hutton Media</b>		Date 11 / 03 / 2012
Mailing Address 6190 Grovedale Ct Ste 200		Amount 10000.00
City Alexandrai      State VA      Zip Code 22310	Transaction ID : SE.4309	
Purpose of Expenditure Media Buy - 'Much'	Category/Type	Office Sought: <input type="checkbox"/> House      State: VA <input checked="" type="checkbox"/> Senate      District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TIMOTHY MICHAEL KAINE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 73873.92		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	20000.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> 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.

Judith Zamore

[Electronically Filed]

Date

11 / 03 / 2012

Signature

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

NAME OF COMMITTEE (In Full) <b>New Virginia PAC</b>	FEC IDENTIFICATION NUMBER <b>C</b> C00515452
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Abar Hutton Media</b>		Date MM / DD / YYYY <b>11 / 03 / 2012</b>
Mailing Address 6190 Grovedale Ct Ste 200		Amount <b>10000.00</b>
City Alexandria	State VA	Zip Code 22310
Purpose of Expenditure Media Buy - 'Much'	Category/Type	Transaction ID : <b>SE.4310</b>
Name of Federal Candidate Supported or Opposed by Expenditure: GEORGE ALLEN		Office Sought: <input type="checkbox"/> House    State: VA <input checked="" type="checkbox"/> Senate    District: <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <b>83873.92</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee		Date
Mailing Address		MM / DD / YYYY
City	State	Zip Code
Purpose of Expenditure	Category/Type	Amount
Name of Federal Candidate Supported or Opposed by Expenditure:		Office Sought: <input type="checkbox"/> House    State: <input type="checkbox"/> Senate    District: <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<b>10000.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures.....	<b>30000.00</b>

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.

*Judith Zamore*

Signature \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY **11 / 03 / 2012**