

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

PAGE 1 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC		FEC IDENTIFICATION NUMBER C C00502849
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		MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee Lewis Advertising		Date MM / DD / YYYY 03 / 17 / 2012
Mailing Address PO Box 544		Amount 35000.00
City Wetumpka	State FL	Zip Code 36092
Purpose of Expenditure TV Broadcast	Category/Type 004	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 16
Name of Federal Candidate Supported or Opposed by Expenditure: DONALD A. MANZULLO		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 168531.68		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Lewis Advertising		Date MM / DD / YYYY 03 / 17 / 2012
Mailing Address PO Box 544		Amount 25000.00
City Wetumpka	State FL	Zip Code 36092
Purpose of Expenditure Television advertisement	Category/Type 004	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 16
Name of Federal Candidate Supported or Opposed by Expenditure: DONALD A. MANZULLO		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 193531.68		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	60000.00
(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.

Jonathan Martin
Signature _____ [Electronically Filed] Date MM / DD / YYYY
03 / 18 / 2012

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

NAME OF COMMITTEE (In Full) CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00502849 </div>
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 Lewis Advertising		Date MM / DD / YYYY <div style="border: 1px solid black; padding: 2px;">03 / 17 / 2012</div>
Mailing Address PO Box 544		Amount <div style="border: 1px solid black; padding: 2px;">18000.00</div>
City Wetumpka	State FL	Zip Code 36092
Purpose of Expenditure Radio advertisement	Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 16 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DONALD A. MANZULLO		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;">211531.68</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : SE.4548

Full Name (Last, First, Middle Initial) of Payee Lewis Advertising		Date MM / DD / YYYY <div style="border: 1px solid black; padding: 2px;">03 / 17 / 2012</div>
Mailing Address PO Box 544		Amount <div style="border: 1px solid black; padding: 2px;">15000.00</div>
City Wetumpka	State FL	Zip Code 36092
Purpose of Expenditure Television advertisement	Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 16 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DONALD A. MANZULLO		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;">211531.68</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : SE.4549

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;">33000.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> </div>

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Jonathan Martin

Signature _____ [Electronically Filed] Date MM / DD / YYYY
03 / 18 / 2012

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

NAME OF COMMITTEE (In Full)
CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC

FEC IDENTIFICATION NUMBER ▼

C C00502849

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
Message & Media

Date

MM / DD / YYYY
03 / 17 / 2012

Mailing Address 3101 Lee Highway
Suite 18 #136

Amount

600.00

City State Zip Code
Bristol VA 24202

Transaction ID : SE.4541

Purpose of Expenditure
Email correspondance

Category/
Type 004

Office Sought: House State: IL
 Senate District: 16
 President

Name of Federal Candidate Supported or Opposed by Expenditure:
DENNIS J KUCINICH

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought 168531.68

Disbursement For: Primary General
 Other (specify) ▶

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

Date

MM / DD / YYYY

Mailing Address

Amount

City State Zip Code

Purpose of Expenditure

Category/
Type

Office Sought: House State:
 Senate District:
 President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought

Disbursement For: Primary General
 Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	600.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	93600.00

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Jonathan Martin

[Electronically Filed]

Date

MM / DD / YYYY
03 / 18 / 2012

Signature