

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CREDO SUPERPAC			FEC IDENTIFICATION NUMBER ▼ C C00507517		
Check If ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y					
Full Name (Last, First, Middle Initial) of Payee Alex McGriff			Date M M M / D D D / Y Y Y Y Y Y Y Y 10 / 23 / 2012		
Mailing Address 1400 Eden Ridge Cir.			Amount 937.50		
City Hoover	State AL	Zip Code 35244	Transaction ID : SE.11727		
Purpose of Expenditure Payroll		Category/ Type 	Office Sought: ☒ House State: WI ☐ Senate District: 07 ☐ President		
Name of Federal Candidate Supported or Opposed by Expenditure: SEAN DUFFY			Check One: ☐ Support ☒ Oppose		
Calendar Year-To-Date Per Election for Office Sought 31915.22			Disbursement For: ☐ Primary ☒ General 2012 ☐ Other (specify) ▶		
Full Name (Last, First, Middle Initial) of Payee Emily Rinehardt			Date M M M / D D D / Y Y Y Y Y Y Y Y 10 / 23 / 2012		
Mailing Address 927 S. Washington # 508			Amount 1500.00		
City Lansing	State MI	Zip Code 48910	Transaction ID : SE.11725		
Purpose of Expenditure Payroll		Category/ Type 	Office Sought: ☒ House State: WI ☐ Senate District: 07 ☐ President		
Name of Federal Candidate Supported or Opposed by Expenditure: SEAN DUFFY			Check One: ☐ Support ☒ Oppose		
Calendar Year-To-Date Per Election for Office Sought 30040.22			Disbursement For: ☐ Primary ☒ General 2012 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			2437.50		
(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. Becky Bond [Electronically Filed] Signature _____ Date M M M / D D D / Y Y Y Y Y Y Y Y 10 / 23 / 2012					

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Check If ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name (Last, First, Middle Initial) of Payee Keith Simmonds			Date M M / D D / Y Y Y Y Y Y 10 / 23 / 2012		
Mailing Address 7064 N. Greenview Ave			Amount 937.50		
City Chicago State IL Zip Code 60626		Transaction ID : SE.11726			
Purpose of Expenditure Payroll		Category/Type 	Office Sought: ☒ House ☐ Senate ☐ President State: WI District: 07		Check One: ☐ Support ☒ Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: SEAN DUFFY			Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought 30977.72					
Full Name (Last, First, Middle Initial) of Payee			Date M M / D D / Y Y Y Y Y Y		
Mailing Address			Amount 		
City State Zip Code					
Purpose of Expenditure		Category/Type 	Office Sought: ☐ House ☐ Senate ☐ President State: District:		Check One: ☐ Support ☐ Oppose
Name of Federal Candidate Supported or Opposed by Expenditure:			Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought 					
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			937.50		
(b) SUBTOTAL of Unitemized Independent Expenditures▶					
(c) TOTAL Independent Expenditures.....▶			3375.00		
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. Becky Bond [Electronically Filed] Signature _____ Date M M / D D / Y Y Y Y Y Y 10 / 23 / 2012					