Image# 12940747302

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Person Making the Disbursements/Obligations

(a) Name
REPUBLICAN STATE LEADERSHIP COMMITTEE

(b) Address (number and street) ☐ check if different than previously reported
1201 F STREET NW
SUITE 675

(c) City, State and ZIP Code
WASHINGTON DC 20004

2. FEC Identification Number
C C30002067

(d) Name of Employer or Principal Place of Business

(e) Occupation

3. Is This Statement ☒ New or ☐ Amended

4. Covering Period 10/30/2012 through 10/31/2012

5. (a) Date of Public Distribution(s) 10/31/2012 **(b) Communication Title** Just Like Washington

6. The filer is a(n): (a) ☐ Individual (b) ☐ Unincorporated Organization (c) ☐ Qualified Nonprofit Corporation (11 CFR 114.10)

(d) ☐ Corporation, Labor Organization or Qualified Nonprofit Corporation making communications under 11 CFR 114.15

(e) ☒ Other, specify: Non-Fed 527 Pol Org

7. If the filer is an individual, unincorporated organization or qualified nonprofit corporation, were the disbursements made exclusively from donations to a segregated bank account? Yes ☐ No ☐

8. Custodian of Records

(a) Name
Staci Goede

(b) Address (number and street)
1201 F Street, NW
Suite 675

(c) City, State and ZIP Code
Washington DC 20004

(d) Name of Employer or Principal Place of Business
Republican State Leadership Committee

(e) Occupation
CFO

9. Total Donations This Statement .00

10. Total Disbursements/Obligations This Statement 24880.00

Under penalty of perjury, I certify that this statement is true, correct and complete.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM Staci Goede

SIGNATURE *Staci Goede* ***[Electronically Filed]*** **DATE** 11/01/2012

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalties of 2 U.S.C. §437g.

List of Person(s) Sharing/Exercising Control
(use additional pages as necessary)

11. Person(s) Sharing/Exercising Control

A.
(a) Name — **Transaction ID : F91.000001**
J Christopher Jankowski
(b) Address (number and street) 1201 F Street, NW
Suite 675
(c) City, State and ZIP Code
Washington DC 20004
(d) Name of Employer or Principal Place of Business — (e) Occupation
Republican State Leadership Committee — President

B.
(a) Name — **Transaction ID : F91.000002**
Staci Goede
(b) Address (number and street) 1201 F Street, NW
Suite 675
(c) City, State and ZIP Code
Washington DC 20004
(d) Name of Employer or Principal Place of Business — (e) Occupation
Republican State Leadership Committee — CFO

C.
(a) Name
(b) Address (number and street)
(c) City, State and ZIP Code
(d) Name of Employer or Principal Place of Business — (e) Occupation

D.
(a) Name
(b) Address (number and street)
(c) City, State and ZIP Code
(d) Name of Employer or Principal Place of Business — (e) Occupation

E.
(a) Name
(b) Address (number and street)
(c) City, State and ZIP Code
(d) Name of Employer or Principal Place of Business — (e) Occupation

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SCHEDULE 9-B
Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee
OnMessage Inc.

Mailing Address of Payee
815 Slaters Lane

City: Alexandria | State: VA | Zip Code: 22314

Name of Employer | Occupation

Date of Disbursement or Obligation: 10 / 30 / 2012

Amount: 24880.00

Communication Date: 10 / 31 / 2012

Purpose of Disbursement (Including title(s) of communication(s))
Radio Placement and Production - Just Like Washington

Transaction ID : F93.000001

Name of Federal Candidate: Barack Obama
Office Sought: [ ] House [ ] Senate [X] President | State: | District:
Disbursement/Obligation For: 2012 [ ] Primary [X] General [ ] Other (specify) ▶

Transaction ID : F94.000002

Name of Federal Candidate
Office Sought: [ ] House [ ] Senate [ ] President | State: | District:
Disbursement/Obligation For: [ ] Primary [ ] General [ ] Other (specify) ▶

Name of Federal Candidate
Office Sought: [ ] House [ ] Senate [ ] President | State: | District:
Disbursement/Obligation For: [ ] Primary [ ] General [ ] Other (specify) ▶

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

Mailing Address of Payee

City | State | Zip Code

Name of Employer | Occupation

Date of Disbursement or Obligation: M M / D D / Y Y Y Y

Amount

Communication Date: M M / D D / Y Y Y Y

Purpose of Disbursement (Including title(s) of communication(s))

Name of Federal Candidate
Office Sought: [ ] House [ ] Senate [ ] President | State: | District:
Disbursement/Obligation For: [ ] Primary [ ] General [ ] Other (specify) ▶

Name of Federal Candidate
Office Sought: [ ] House [ ] Senate [ ] President | State: | District:
Disbursement/Obligation For: [ ] Primary [ ] General [ ] Other (specify) ▶

Name of Federal Candidate
Office Sought: [ ] House [ ] Senate [ ] President | State: | District:
Disbursement/Obligation For: [ ] Primary [ ] General [ ] Other (specify) ▶

SUBTOTAL of Disbursements/Obligations This Page (optional) ▶ 24880.00

TOTAL This Period (last page this line number only) ▶ 24880.00
(carry total from last page to Line 10)