

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

| | |
|--|---|
| NAME OF COMMITTEE (In Full) NRSC | FEC IDENTIFICATION NUMBER ▼ C C00027466 |
|--|---|

Check if 24-hour report 48-hour report New report Amends report filed on / /

| | | | |
|---|--------------------|---|---|
| Full Name of Payee NATIONAL MEDIA RESEARCH, PLANNING, & PLACEMENT | | Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/> | |
| Mailing Address 815 SLATERS LANE | | Amount <input type="text"/> | |
| City ALEXANDRIA | State VA | Zip Code 22314 | Transaction ID : SF24.95587492 |
| Purpose of Expenditure MEDIA PLACEMENT/PRODUCTION | | Category/Type <input type="text"/> | Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Name of Federal Candidate BRUCE LOWELL BRALEY | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IA |
| Calendar Year-To-Date Per Election for Office Sought <input type="text"/> | | 2439036.76 | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____ |

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| | |
|---|----------------------|
| (a) SUBTOTAL of Itemized Independent Expenditures... | <input type="text"/> |
| (b) SUBTOTAL of Unitemized Independent Expenditures... | <input type="text"/> |
| (c) TOTAL Independent Expenditures... | <input type="text"/> |

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.

JAY C BANNING
Signature

Date / /

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