



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

NAME OF COMMITTEE (In Full) <b>Ending Spending Action Fund</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black;">C</span> C00489856       </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 <b>Nahigian Strategies, LLC</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold;">11</span> / <span style="font-size: 1.2em; font-weight: bold;">01</span> / <span style="font-size: 1.2em; font-weight: bold;">2012</span> </div>
Mailing Address 331 Cameron Station Blvd.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> <span style="float: right; font-weight: bold;">18000.00</span> </div>
City Alexandria      State VA      Zip Code 22304	<b>Transaction ID : SE.4969</b>	
Purpose of Expenditure media production	Category/Type	Office Sought: <input type="checkbox"/> House      State: OH <input checked="" type="checkbox"/> Senate      District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Josh Mandel		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		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>Smart Media Group, LLC</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold;">11</span> / <span style="font-size: 1.2em; font-weight: bold;">01</span> / <span style="font-size: 1.2em; font-weight: bold;">2012</span> </div>
Mailing Address 814 King Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> <span style="float: right; font-weight: bold;">270395.00</span> </div>
City Alexandria      State VA      Zip Code 22314	<b>Transaction ID : SE.4863</b>	
Purpose of Expenditure media placement	Category/Type	Office Sought: <input type="checkbox"/> House      State: NE <input checked="" type="checkbox"/> Senate      District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Debra S. Fischer		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> <span style="float: right; font-weight: bold;">288395.00</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> <span style="float: right;"> </span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> <span style="float: right;"> </span> </div>

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.

*Nancy H. Watkins*  
 Signature \_\_\_\_\_ [Electronically Filed]      Date 
11 / 02 / 2012

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

NAME OF COMMITTEE (In Full) <b>Ending Spending Action Fund</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black;">C</span> C00489856       </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 <b>Smart Media Group, LLC</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span>          11 / 02 / 2012       </div>
Mailing Address 814 King Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span>          155275.00       </div>
City Alexandria      State VA      Zip Code 22314	<b>Transaction ID : SE.4966</b>	
Purpose of Expenditure media placement	Category/Type	Office Sought: <input type="checkbox"/> House      State: NE <input checked="" type="checkbox"/> Senate      District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Debra S. Fischer		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		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		Amount
City      State      Zip Code	Office Sought: <input type="checkbox"/> House      State: <input type="checkbox"/> Senate      District: <input type="checkbox"/> President	
Purpose of Expenditure		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span>          155275.00       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span>          _____       </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span>          468592.19       </div>

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.

*Nancy H. Watkins*  
 Signature \_\_\_\_\_ [Electronically Filed]      Date 
M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2012