

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

PAGE 1 OF 6  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)  
**INTERNATIONAL ASSOCIATION OF FIREFIGHTERS INTERESTED  
IN REGISTRATION AND EDUCATION PAC**

FEC IDENTIFICATION NUMBER  
**C** C00029447

Check If  24-hour report  48-hour report  New report  Amends report filed on **10** / **12** / **2012**

Full Name (Last, First, Middle Initial) of Payee  
**Mack/Crouse Group**

Date  
**10** / **12** / **2012**

Mailing Address **4900 Seminary Road**

Amount  
**1382.00**

City State Zip Code  
**Alexandria VA 22311**

Transaction ID : **D22611**

Purpose of Expenditure  
**Flyer Production** Category/Type **006**

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Name of Federal Candidate Supported or Opposed by Expenditure:  
**MITT ROMNEY**

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought **270042.13**

Disbursement For:  Primary  General  
 Other (specify) \_\_\_\_\_

Full Name (Last, First, Middle Initial) of Payee  
**Sun Mountain Media Services, LLC**

Date  
**10** / **10** / **2012**

Mailing Address **2500 Wilson Blvd.  
Suite 250**

Amount  
**13725.00**

City State Zip Code  
**Arlington VA 22201**

Transaction ID : **D22604**

Purpose of Expenditure  
**Online Advertising Production** Category/Type **004**

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Name of Federal Candidate Supported or Opposed by Expenditure:  
**BARACK OBAMA**

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought **270042.13**

Disbursement For:  Primary  General  
 Other (specify) \_\_\_\_\_

(a) **SUBTOTAL** of Itemized Independent Expenditures..... **15107.00**

(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.

*Thomas H Miller*

[Electronically Filed]

Date **10** / **17** / **2012**

Signature

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

NAME OF COMMITTEE (In Full) <b>INTERNATIONAL ASSOCIATION OF FIREFIGHTERS INTERESTED          IN REGISTRATION AND EDUCATION PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 2em; font-weight: bold; margin-right: 5px;">C</span> C00029447         </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <span style="margin-left: 20px;"><input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on</span>	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 10 / 12 / 2012</div> </div>

Full Name (Last, First, Middle Initial) of Payee <b>Sun Mountain Media Services, LLC</b>		Date <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 10 / 10 / 2012</div>
Mailing Address 2500 Wilson Blvd. Suite 250		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">13725.00</div>
City Arlington State VA Zip Code 22201		
Purpose of Expenditure Online Advertising Production	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		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; text-align: right;">270042.13</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

**Transaction ID : D22609**

Full Name (Last, First, Middle Initial) of Payee <b>Tricom Associates</b>		Date <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 10 / 10 / 2012</div>
Mailing Address 2009 North 14th Street Suite 407		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">44800.00</div>
City Arlington State VA Zip Code 22201		
Purpose of Expenditure Online Advertising Buy	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">270042.13</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

**Transaction ID : D22605**

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;">58525.00</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </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.

*Thomas H Miller*

Signature \_\_\_\_\_ [Electronically Filed] Date

M M / D D / Y Y Y Y Y Y  
10 / 17 / 2012

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

NAME OF COMMITTEE (In Full) <b>INTERNATIONAL ASSOCIATION OF FIREFIGHTERS INTERESTED          IN REGISTRATION AND EDUCATION PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 2em; font-weight: bold; border: 1px solid black;">C</span> C00029447         </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report	<input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on
M M / D D / Y Y Y Y Y Y <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">12</div> <div style="border: 1px solid black; padding: 2px;">2012</div> </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Tricom Associates</b>		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">2012</div> </div>	
Mailing Address 2009 North 14th Street Suite 407		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">44800.00</div>	
City Arlington	State VA	Zip Code 22201	<b>Transaction ID : D22608</b>
Purpose of Expenditure Online Advertising Production	Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		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; text-align: right;">270042.13</div>		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>Tricom Associates</b>		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">11</div> <div style="border: 1px solid black; padding: 2px;">2012</div> </div>	
Mailing Address 2009 North 14th Street Suite 407		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">25000.00</div>	
City Arlington	State VA	Zip Code 22201	<b>Transaction ID : D22608</b>
Purpose of Expenditure Online Advertising Buy	Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">270042.13</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....▶	69800.00
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	
<b>(c) TOTAL</b> 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.

*Thomas H Miller*

Signature \_\_\_\_\_ [Electronically Filed] Date

10

17

2012

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

NAME OF COMMITTEE (In Full) <b>INTERNATIONAL ASSOCIATION OF FIREFIGHTERS INTERESTED          IN REGISTRATION AND EDUCATION PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 2em; font-weight: bold; margin-right: 5px;">C</span> C00029447         </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <span style="margin-left: 20px;"><input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on</span>	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 10 / 12 / 2012</div> </div>

Full Name (Last, First, Middle Initial) of Payee <b>Tricom Associates</b>	Date <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 10 / 12 / 2012</div>	
Mailing Address 2009 North 14th Street Suite 407	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">18000.00</div>	
City State Zip Code Arlington VA 22201		
Purpose of Expenditure Online Advertising Buy	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">270042.13</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Transaction ID : D22607

Full Name (Last, First, Middle Initial) of Payee <b>Financial Innovations</b>	Date <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 10 / 03 / 2012</div>	
Mailing Address One Weingeroff Boulevard	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">9546.05</div>	
City State Zip Code Cranston RI 02910		
Purpose of Expenditure 4x8 Signs & Shipping Costs	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">006</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">270042.13</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Transaction ID : D22602

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;">27546.05</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </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.

*Thomas H Miller*

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
10 / 17 / 2012

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

NAME OF COMMITTEE (In Full) <b>INTERNATIONAL ASSOCIATION OF FIREFIGHTERS INTERESTED          IN REGISTRATION AND EDUCATION PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 2em; font-weight: bold; margin-right: 5px;">C</span> C00029447         </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on	
<div style="display: flex; justify-content: space-around;"> <span>M M / D D / Y Y Y Y Y Y 10 / 12 / 2012</span> </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Financial Innovations</b>		Date M M / D D / Y Y Y Y Y Y 10 / 10 / 2012
Mailing Address One Weingeroff Boulevard		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">15000.00</div>
City Cranston	State RI Zip Code 02910	
Purpose of Expenditure Motor Coach Wrapping	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">006</div>	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Sen. Claire McCaskill		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">58566.00</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

**Transaction ID : D22600**

Full Name (Last, First, Middle Initial) of Payee <b>Financial Innovations</b>		Date M M / D D / Y Y Y Y Y Y 10 / 10 / 2012
Mailing Address One Weingeroff Boulevard		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">4119.91</div>
City Cranston	State RI Zip Code 02910	
Purpose of Expenditure Yard Signs/Processing & Handling Charges	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">006</div>	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">270042.13</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

**Transaction ID : D22603**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;">19119.91</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; height: 20px;"></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.

*Thomas H Miller*

Signature \_\_\_\_\_ [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
10 / 17 / 2012

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

NAME OF COMMITTEE (In Full) <b>INTERNATIONAL ASSOCIATION OF FIREFIGHTERS INTERESTED IN REGISTRATION AND EDUCATION PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 2em; font-weight: bold; margin-right: 5px;">C</span> C00029447                 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on	
M M / D D / Y Y Y Y Y Y 10 / 12 / 2012	

Full Name (Last, First, Middle Initial) of Payee <b>Allstar Coaches</b>		Date <div style="border: 1px solid black; padding: 2px;">                     M M / D D / Y Y Y Y Y Y                      10 / 10 / 2012                 </div>
Mailing Address 131 NW 73 Ter		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">                     32430.00                 </div>
City Ft. Lauderdale	State FL Zip Code 33317	
Purpose of Expenditure Motor Coach Rental	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">006</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Sen. Claire McCaskill		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">58566.00</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

**Transaction ID : D22599**

Full Name (Last, First, Middle Initial) of Payee <b>Mark Woolbright</b>		Date <div style="border: 1px solid black; padding: 2px;">                     M M / D D / Y Y Y Y Y Y                      10 / 10 / 2012                 </div>
Mailing Address 5540 Wooded Creek Dr.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">                     11136.00                 </div>
City Saint Charles	State MO Zip Code 63304	
Purpose of Expenditure Estimated Payment for Transportation Services	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Sen. Claire McCaskill		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">58566.00</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

**Transaction ID : D22601**

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">43566.00</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; height: 20px;"> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">233663.96</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.

*Thomas H Miller*  
 Signature [Electronically Filed] Date

M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012