

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

PAGE 1 OF 15  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</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> C00004036         </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="float: right; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M M / D D D / Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Gold Communications</b>	Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>
Mailing Address 113 S. Asaph St.	<div style="border: 1px solid black; padding: 2px; display: inline-block;">09 / 14 / 2012</div>
City State Zip Code Alexandria VA 22314	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2953.00</div>
<b>Transaction ID : D292709</b>	
Purpose of Expenditure Voter Canvass Literature	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">006</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ 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; display: inline-block;">2892454.20</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>Gold Communications</b>	Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>
Mailing Address 113 S. Asaph St.	<div style="border: 1px solid black; padding: 2px; display: inline-block;">09 / 14 / 2012</div>
City State Zip Code Alexandria VA 22314	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2264.50</div>
<b>Transaction ID : D292710</b>	
Purpose of Expenditure Voter Canvass Literature	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">006</div>
Name of Federal Candidate Supported or Opposed by Expenditure: TIMOTHY MICHAEL KAINE	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: _____ 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; display: inline-block;">2264.50</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.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">5217.50</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </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.

*Eliseo Medina*

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

M M / D D / Y Y Y Y Y Y

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

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</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> C00004036         </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: flex; justify-content: space-around; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px;">M M M /</div> <div style="border: 1px solid black; padding: 2px;">D D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Gold Communications</b>		Date <div style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y Y 09 / 14 / 2012</div>
Mailing Address 113 S. Asaph St.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">688.50</div>
City Alexandria	State VA	
Zip Code 22314	<b>Transaction ID : D292713</b>	
Purpose of Expenditure Voter Canvass Literature	Category/ Type <div style="border: 1px solid black; padding: 2px;">006</div>	Office Sought: <input checked="" type="checkbox"/> House State: VA <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PAUL ODELL HIRSCHBIEL JR		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;">688.50</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>Mission Control Inc</b>		Date <div style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y Y 09 / 15 / 2012</div>
Mailing Address 114A Mansfield Hollow Road		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">366.06</div>
City Mansfield Center	State CT	
Zip Code 06250	<b>Transaction ID : D292725</b>	
Purpose of Expenditure Voter Canvass Literature	Category/ Type <div style="border: 1px solid black; padding: 2px;">006</div>	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Amerish Bera		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;">193724.45</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">1054.56</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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*Eliseo Medina*
[Electronically Filed]
Date 

M M M / D D D / Y Y Y Y Y Y Y  
09 / 17 / 2012

Signature \_\_\_\_\_

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

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 2em; font-weight: bold;">C</span> C00004036         </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: flex; justify-content: space-around; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Mission Control Inc</b>	Date <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em;">M M M / D D D / Y Y Y Y Y Y</span> </div>
Mailing Address 114A Mansfield Hollow Road	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">366.06</div>
City Mansfield Center State CT Zip Code 06250	<b>Transaction ID : D292727</b>
Purpose of Expenditure Voter Canvass Literature	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">006</div>
Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL E. LUNGREN	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President 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;">193724.45</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>Mission Control Inc</b>	Date <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em;">M M M / D D D / Y Y Y Y Y Y</span> </div>
Mailing Address 114A Mansfield Hollow Road	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">366.06</div>
City Mansfield Center State CT Zip Code 06250	<b>Transaction ID : D292735</b>
Purpose of Expenditure Voter Canvass Literature	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">006</div>
Name of Federal Candidate Supported or Opposed by Expenditure: JESSICA D EHRLICH	Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 13 <input type="checkbox"/> President 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;">732.12</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.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">732.12</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>

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*Eliseo Medina*  
 Signature [Electronically Filed] Date 

M M M / D D D / Y Y Y Y Y Y

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

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</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> C00004036         </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: flex; justify-content: space-around; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px;">M M M /</div> <div style="border: 1px solid black; padding: 2px;">D D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Mission Control Inc</b>	Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M /</div> <div style="border: 1px solid black; padding: 2px;">D D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>
Mailing Address 114A Mansfield Hollow Road	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">366.06</div>
City Mansfield Center State CT Zip Code 06250	<b>Transaction ID : D292737</b>
Purpose of Expenditure Voter Canvass Literature	Category/Type <span style="border: 1px solid black; padding: 2px;">006</span>
Name of Federal Candidate Supported or Opposed by Expenditure: C W BILL YOUNG	Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 13 <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">732.12</span>	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>Mission Control Inc</b>	Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M /</div> <div style="border: 1px solid black; padding: 2px;">D D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>
Mailing Address 114A Mansfield Hollow Road	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">366.06</div>
City Mansfield Center State CT Zip Code 06250	<b>Transaction ID : D292749</b>
Purpose of Expenditure Voter Canvass Literature	Category/Type <span style="border: 1px solid black; padding: 2px;">006</span>
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID MICHAEL GILL	Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 13 <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">732.12</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	732.12
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	

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*Eliseo Medina* [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y

Signature

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

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</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> C00004036       </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" 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>Mission Control Inc</b>	Date <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em;">09</span> / <span style="font-size: 1.2em;">15</span> / <span style="font-size: 1.2em;">2012</span> </div>		
Mailing Address 114A Mansfield Hollow Road	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">366.06</div>		
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City Mansfield Center</td> <td style="width:33%;">State CT</td> <td style="width:33%;">Zip Code 06250</td> </tr> </table>		City Mansfield Center	State CT
City Mansfield Center	State CT	Zip Code 06250	
Purpose of Expenditure Voter Canvass Literature	Category/Type <span style="border: 1px solid black; padding: 2px;">006</span>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <u>IL</u> District: <u>13</u>	
Name of Federal Candidate Supported or Opposed by Expenditure: RODNEY DAVIS		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">732.12</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : D292750

Full Name (Last, First, Middle Initial) of Payee <b>Mission Control Inc</b>	Date <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em;">09</span> / <span style="font-size: 1.2em;">15</span> / <span style="font-size: 1.2em;">2012</span> </div>		
Mailing Address 114A Mansfield Hollow Road	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">366.06</div>		
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City Mansfield Center</td> <td style="width:33%;">State CT</td> <td style="width:33%;">Zip Code 06250</td> </tr> </table>		City Mansfield Center	State CT
City Mansfield Center	State CT	Zip Code 06250	
Purpose of Expenditure Voter Canvass Literature	Category/Type <span style="border: 1px solid black; padding: 2px;">006</span>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <u>IL</u> District: <u>17</u>	
Name of Federal Candidate Supported or Opposed by Expenditure: CHERI BUSTOS		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">732.12</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : D292751

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;">732.12</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>

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*Eliseo Medina*

Signature \_\_\_\_\_ [Electronically Filed] Date 09 / 17 / 2012

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

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</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> C00004036         </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: flex; justify-content: space-around; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px;">M M M /</div> <div style="border: 1px solid black; padding: 2px;">D D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Mission Control Inc</b>	Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M /</div> <div style="border: 1px solid black; padding: 2px;">D D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y Y</div> </div>
Mailing Address 114A Mansfield Hollow Road	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">366.06</div>
City Mansfield Center State CT Zip Code 06250	<b>Transaction ID : D292752</b>
Purpose of Expenditure Voter Canvass Literature	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">006</div>
Name of Federal Candidate Supported or Opposed by Expenditure: ROBERT T. SCHILLING	Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 17 <input type="checkbox"/> President 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;">732.12</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>Mission Control Inc</b>	Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M /</div> <div style="border: 1px solid black; padding: 2px;">D D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y Y</div> </div>
Mailing Address 114A Mansfield Hollow Road	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">366.06</div>
City Mansfield Center State CT Zip Code 06250	<b>Transaction ID : D292753</b>
Purpose of Expenditure Voter Canvass Literature	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">006</div>
Name of Federal Candidate Supported or Opposed by Expenditure: GARY J. MCDOWELL	Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President 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;">732.12</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..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">732.12</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>

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*Eliseo Medina*  
 Signature [Electronically Filed] Date

M M M /

D D D /

Y Y Y Y Y Y Y

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

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</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> C00004036         </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="float: right; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M M / D D D / Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Mission Control Inc</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M M / D D D / Y Y Y Y Y Y</div> 09 / 15 / 2012
Mailing Address 114A Mansfield Hollow Road		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">366.06</div>
City Mansfield Center	State CT	
Zip Code 06250	<b>Transaction ID : D292754</b>	
Purpose of Expenditure Voter Canvass Literature	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">006</div>	Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL J. BENISHEK		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; display: inline-block;">732.12</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>Mission Control Inc</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M M / D D D / Y Y Y Y Y Y</div> 09 / 15 / 2012
Mailing Address 114A Mansfield Hollow Road		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">366.06</div>
City Mansfield Center	State CT	
Zip Code 06250	<b>Transaction ID : D292755</b>	
Purpose of Expenditure Voter Canvass Literature	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">006</div>	Office Sought: <input checked="" type="checkbox"/> House State: MN <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: RICHARD MICHAEL NOLAN		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; display: inline-block;">732.12</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">732.12</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </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.

*Eliseo Medina*

Signature [Electronically Filed] Date

M M M / D D D / Y Y Y Y Y Y

  
09 / 17 / 2012

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

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</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> C00004036         </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" 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>Mission Control Inc</b>	Date <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em;">09</span> / <span style="font-size: 1.2em;">15</span> / <span style="font-size: 1.2em;">2012</span> </div>		
Mailing Address 114A Mansfield Hollow Road	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">366.06</div>		
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City Mansfield Center</td> <td style="width:33%;">State CT</td> <td style="width:33%;">Zip Code 06250</td> </tr> </table>		City Mansfield Center	State CT
City Mansfield Center	State CT	Zip Code 06250	
Purpose of Expenditure Voter Canvass Literature	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">006</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 08	
Name of Federal Candidate Supported or Opposed by Expenditure: RAYMOND J. CRAVAACK		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;">732.12</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : D292756

Full Name (Last, First, Middle Initial) of Payee <b>Mission Control Inc</b>	Date <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em;">09</span> / <span style="font-size: 1.2em;">15</span> / <span style="font-size: 1.2em;">2012</span> </div>		
Mailing Address 114A Mansfield Hollow Road	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">366.06</div>		
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City Mansfield Center</td> <td style="width:33%;">State CT</td> <td style="width:33%;">Zip Code 06250</td> </tr> </table>		City Mansfield Center	State CT
City Mansfield Center	State CT	Zip Code 06250	
Purpose of Expenditure Voter Canvass Literature	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">006</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 18	
Name of Federal Candidate Supported or Opposed by Expenditure: SEAN PATRICK MALONEY		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;">732.12</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : D292757

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;">732.12</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.

*Eliseo Medina*

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

09 / 17 / 2012



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

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</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; display: inline-block; width: 20px; height: 20px; vertical-align: middle;">C</span> <span style="font-size: 1.2em; padding-left: 5px;">C00004036</span> </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Mission Control Inc</b>	Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> </div>
Mailing Address 114A Mansfield Hollow Road	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">366.06</span> </div>
City Mansfield Center State CT Zip Code 06250	<b>Transaction ID : D292758</b>
Purpose of Expenditure Voter Canvass Literature	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 18 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: NAN HAYWORTH	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">732.12</span>	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>Mission Control Inc</b>	Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> </div>
Mailing Address 114A Mansfield Hollow Road	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">366.06</span> </div>
City Mansfield Center State CT Zip Code 06250	<b>Transaction ID : D292759</b>
Purpose of Expenditure Voter Canvass Literature	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: KATHRYN BOOCKVAR	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">732.12</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">732.12</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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.

*Eliseo Medina*

Signature [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y

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

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</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> C00004036         </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: flex; justify-content: space-around; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px;">M M M /</div> <div style="border: 1px solid black; padding: 2px;">D D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Mission Control Inc</b>	Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M /</div> <div style="border: 1px solid black; padding: 2px;">D D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>
Mailing Address 114A Mansfield Hollow Road	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">366.06</div>
City Mansfield Center State CT Zip Code 06250	<b>Transaction ID : D292760</b>
Purpose of Expenditure Voter Canvass Literature	Category/Type <span style="border: 1px solid black; padding: 2px;">006</span>
Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL G. FITZPATRICK	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President 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;">732.12</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>The Pivot Group</b>	Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M /</div> <div style="border: 1px solid black; padding: 2px;">D D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>
Mailing Address 1720 I Street, NW Suite 550	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2012.75</div>
City Washington State DC Zip Code 20006	<b>Transaction ID : D292761</b>
Purpose of Expenditure Voter Canvass Literature	Category/Type <span style="border: 1px solid black; padding: 2px;">006</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President 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;">2892454.20</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	2378.81
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	
(c) <b>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.

*Eliseo Medina*  
 Signature [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
09 / 17 / 2012

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

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</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> C00004036         </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="float: right; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M M / D D D / Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee <b>The Pivot Group</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M M / D D D / Y Y Y Y Y Y</div> 09 / 15 / 2012
Mailing Address 1720 I Street, NW Suite 550		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2012.75</div>
City Washington	State DC	
Zip Code 20006	<b>Transaction ID : D292762</b>	
Purpose of Expenditure Voter Canvass Literature	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">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: 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; display: inline-block;">2892454.20</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>Mission Control Inc</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M M / D D D / Y Y Y Y Y Y</div> 09 / 15 / 2012
Mailing Address 114A Mansfield Hollow Road		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">366.06</div>
City Mansfield Center	State CT	
Zip Code 06250	<b>Transaction ID : D292763</b>	
Purpose of Expenditure Voter Canvass Literature	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">006</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 07
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK KREITLOW		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; display: inline-block;">732.12</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">2378.81</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) <b>TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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*Eliseo Medina*

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

M M M / D D D / Y Y Y Y Y Y

  
09 / 17 / 2012

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

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; border: 1px solid black; display: inline-block; width: 20px; height: 20px; vertical-align: middle;">C</span> <span style="font-size: 1.2em; padding-left: 5px;">C00004036</span> </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="float: right; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">M M M /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">D D D /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 80px; text-align: center;">Y Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Mission Control Inc</b>	Date <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">09 /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">15 /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 80px; text-align: center;">2012</div>		
Mailing Address 114A Mansfield Hollow Road	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">366.06</div>		
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:35%;">City Mansfield Center</td> <td style="width:15%;">State CT</td> <td style="width:50%;">Zip Code 06250</td> </tr> </table>		City Mansfield Center	State CT
City Mansfield Center	State CT	Zip Code 06250	
Purpose of Expenditure Voter Canvass Literature	Category/Type <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div>	Office Sought: <input checked="" type="checkbox"/> House State: WI <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: SEAN DUFFY		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; width: 150px; text-align: right;">732.12</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Transaction ID : D292764

Full Name (Last, First, Middle Initial) of Payee <b>Mission Control Inc</b>	Date <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">09 /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">15 /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 80px; text-align: center;">2012</div>		
Mailing Address 114A Mansfield Hollow Road	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">366.06</div>		
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:35%;">City Mansfield Center</td> <td style="width:15%;">State CT</td> <td style="width:50%;">Zip Code 06250</td> </tr> </table>		City Mansfield Center	State CT
City Mansfield Center	State CT	Zip Code 06250	
Purpose of Expenditure Voter Canvass Literature	Category/Type <div style="border: 1px solid black; width: 40px; text-align: center;">006</div>	Office Sought: <input checked="" type="checkbox"/> House State: WI <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: JAMES R WALL		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; width: 150px; text-align: right;">732.12</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Transaction ID : D292765

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">732.12</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> </div>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> </div>

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*Eliseo Medina*

Signature [Electronically Filed] Date

09 /

17 /

2012

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

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</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; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">C</span> <span style="font-size: 1.2em; padding-left: 5px;">C00004036</span> </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="float: right; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;">M M M / D D D / Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Mission Control Inc</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;">M M M / D D D / Y Y Y Y Y Y</div> 09 / 15 / 2012
Mailing Address 114A Mansfield Hollow Road		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;">366.06</div>
City Mansfield Center	State CT	
Zip Code 06250	<b>Transaction ID : D292766</b>	
Purpose of Expenditure Voter Canvass Literature	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;">006</div>	Office Sought: <input checked="" type="checkbox"/> House State: WI <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: REID RIBBLE		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; display: inline-block; text-align: right;">732.12</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>Shorr Johnson Magnus Strategic Media</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;">M M M / D D D / Y Y Y Y Y Y</div> 09 / 17 / 2012
Mailing Address 1831 Chestnut St 6th Flr		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;">7400.19</div>
City Philadelphia	State PA	
Zip Code 19103	<b>Transaction ID : D292767</b>	
Purpose of Expenditure TV Advertising Production	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;">004</div>	Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOSEPH COORS JR		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; display: inline-block; text-align: right;">10365.19</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;">7766.25</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;"> </div>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; 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.

*Eliseo Medina* [Electronically Filed] Date

M M M / D D D / Y Y Y Y Y Y

  
09 / 17 / 2012

Signature

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

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</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; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">C</span> <span style="font-size: 1.2em; padding-left: 5px;">C00004036</span> </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; margin-left: 10px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">M M M</div> /            <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">D D D</div> /            <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Mack/Crouse Group LLC</b>	Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">09</div> /          <div style="border: 1px solid black; padding: 2px; width: 20%;">17</div> /          <div style="border: 1px solid black; padding: 2px; width: 40%;">2012</div> </div>
Mailing Address 4900 Seminary Road Suite 1020	Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">2675.00</div>
City Alexandria State VA Zip Code 22311	<b>Transaction ID : D292768</b>
Purpose of Expenditure Voter Canvass Literature	Category/Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">006</div>
Name of Federal Candidate Supported or Opposed by Expenditure: Betty Sutton	Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 16 <input type="checkbox"/> President 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; width: 100%; text-align: right;">5350.00</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>Mack/Crouse Group LLC</b>	Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">09</div> /          <div style="border: 1px solid black; padding: 2px; width: 20%;">17</div> /          <div style="border: 1px solid black; padding: 2px; width: 40%;">2012</div> </div>
Mailing Address 4900 Seminary Road Suite 1020	Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">2675.00</div>
City Alexandria State VA Zip Code 22311	<b>Transaction ID : D292769</b>
Purpose of Expenditure Voter Canvass Literature	Category/Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">006</div>
Name of Federal Candidate Supported or Opposed by Expenditure: JAMES B RENACCI	Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 16 <input type="checkbox"/> President 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; width: 100%; text-align: right;">5350.00</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.....	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">5350.00</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; width: 100%; 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.

*Eliseo Medina*  
 Signature [Electronically Filed] Date 

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2012

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

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</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; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">C</span> <span style="font-size: 1.2em; padding-left: 5px;">C00004036</span> </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="float: right; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">M M /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">D D /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 80px; text-align: center;">Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Chambers Lopez Strategies</b>	Date <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">09 /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">17 /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 80px; text-align: center;">2012</div>		
Mailing Address PO Box 5539	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">140650.00</div>		
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City Arlington</td> <td style="width:33%;">State VA</td> <td style="width:33%;">Zip Code 22205</td> </tr> </table>		City Arlington	State VA
City Arlington	State VA	Zip Code 22205	
Purpose of Expenditure TV Advertising Buy	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; 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; display: inline-block; width: 150px; text-align: right;">2892454.20</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

**Transaction ID : D292770**

Full Name (Last, First, Middle Initial) of Payee	Date <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">  /  /  </div>		
Mailing Address	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">  </div>		
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> </table>		City	State
City	State	Zip Code	
Purpose of Expenditure	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">  </div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">  </div>		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; width: 150px; text-align: right;">140650.00</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">  </div>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">170652.89</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.

*Eliseo Medina*  
 Signature [Electronically Filed] Date

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