

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

PAGE 1 OF 3
FOR SE OF FORM 24/48

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|--|---|
| NAME OF COMMITTEE (In Full) Majority PAC | FEC IDENTIFICATION NUMBER C C00484642 |
| 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 Shorr Johnson Magnus | | Date 10 / 01 / 2012 |
| Mailing Address 1831 Chestnut Street Sixth Floor | | Amount 13428.02 |
| City Philadelphia | State PA | Zip Code 19103 |
| Purpose of Expenditure Media Production Costs | Category/Type | Transaction ID : D419764 |
| Name of Federal Candidate Supported or Opposed by Expenditure: Jeff Flake | | Office Sought: <input type="checkbox"/> House State: AZ <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President |
| Calendar Year-To-Date Per Election for Office Sought 143298.02 | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) |

| | | |
|--|---------------|---|
| Full Name (Last, First, Middle Initial) of Payee Waterfront Strategies | | Date 10 / 01 / 2012 |
| Mailing Address 3050 K Street, NW Suite 100 | | Amount 129870.00 |
| City Washington | State DC | Zip Code 20007 |
| Purpose of Expenditure Media Buy | Category/Type | Transaction ID : D419765 |
| Name of Federal Candidate Supported or Opposed by Expenditure: Jeff Flake | | Office Sought: <input type="checkbox"/> House State: AZ <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President |
| Calendar Year-To-Date Per Election for Office Sought 143298.02 | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) |

| | |
|--|-----------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... | 143298.02 |
| (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.

Rebecca Lambe

[Electronically Filed]

Date

10 / 03 / 2012

Signature

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

| | |
|--|---|
| NAME OF COMMITTEE (In Full) Majority PAC | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00484642 </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 Civic Census Group | | Date <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">10 /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">01 /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 80px; text-align: center;">2012</div> |
| Mailing Address 888 16th Street, NW Suite 650 | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">150000.00</div> |
| City Washington | State DC | Zip Code 20006 |
| Purpose of Expenditure Voter Outreach & Printing | Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div> | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose |
| Name of Federal Candidate Supported or Opposed by Expenditure: Robert Menendez | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ |
| 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;">300000.00</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 | | Date |
| Mailing Address | | Amount |
| City | State | Zip Code |
| Purpose of Expenditure | Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div> | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ 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 <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></div> | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ |

| | |
|--|---|
| (a) SUBTOTAL of Itemized Independent Expenditures..... | <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">150000.00</div> |
| (b) SUBTOTAL of Unitemized Independent Expenditures | <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></div> |
| (c) TOTAL Independent Expenditures..... | <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">1007056.15</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.

Rebecca Lambe
 Signature _____ [Electronically Filed] Date

10 /

03 /

2012