

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

PAGE 1 OF 5
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER C C00523621
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		MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee SEIU Missouri Kansas State Council		Date MM / DD / YYYY 10 / 15 / 2012
Mailing Address 5585 Pershing Ave. Ste 120		Amount 1738.86
City Saint Louis	State MO	Zip Code 63112
Purpose of Expenditure Est. payment for canvass-related expenses	Category/Type 001	Transaction ID : D298364
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 Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 5394260.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee SEIU Missouri Kansas State Council		Date MM / DD / YYYY 10 / 15 / 2012
Mailing Address 5585 Pershing Ave. Ste 120		Amount 1738.86
City Saint Louis	State MO	Zip Code 63112
Purpose of Expenditure Est. payment for canvass related-expenses	Category/Type 001	Transaction ID : D298365
Name of Federal Candidate Supported or Opposed by Expenditure: Claire McCaskill		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 53963.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	3477.72
(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.

Eliseo Medina
Signature

[Electronically Filed] Date MM / DD / YYYY
10 / 16 / 2012

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

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00523621 </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 Our DC		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 1800 Massachusetts Ave NW		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">34537.50</div>
City Washington State DC Zip Code 20036	Transaction ID : D298368	
Purpose of Expenditure Est. payment for rally expenses	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">007</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;">5394260.35</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 One Pennsylvania		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 1500 North Second Street, Suite 11		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1815.00</div>
City Harrisburg State PA Zip Code 17102		Transaction ID : D298369
Purpose of Expenditure Est. payment for rally expenses	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">007</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;">5394260.35</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;">36352.50</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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 Signature [Electronically Filed] Date

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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: 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 One Pennsylvania	Date <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">M M</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">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>
Mailing Address 1500 North Second Street, Suite 11	Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">1815.00</div>
City Harrisburg State PA Zip Code 17102	Transaction ID : D298370
Purpose of Expenditure Est. payment for rally expenses	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; width: 100%; text-align: right;">5394260.35</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 Fieldworks	Date <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">M M</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">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>
Mailing Address 2852 Connecticut Ave., NW	Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">46835.93</div>
City Washington State DC Zip Code 20008	Transaction ID : D298361
Purpose of Expenditure Payment for Canvassing Services	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; width: 100%; text-align: right;">5394260.35</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">48650.93</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>

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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		MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee Fieldworks		Date MM / DD / YYYY 10 / 14 / 2012
Mailing Address 2852 Connecticut Ave., NW		Amount 23417.96
City Washington	State DC	Zip Code 20008
Purpose of Expenditure Payment for Canvassing Services	Category/Type 001	Transaction ID : D298362
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MIKLOSI		Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 348314.08		Check One: <input checked="" type="checkbox"/> Support <input 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 Fieldworks		Date MM / DD / YYYY 10 / 14 / 2012
Mailing Address 2852 Connecticut Ave., NW		Amount 23417.96
City Washington	State DC	Zip Code 20008
Purpose of Expenditure Payment for Canvassing Services	Category/Type 001	Transaction ID : D298363
Name of Federal Candidate Supported or Opposed by Expenditure: Edwin Perlmutter		Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 23417.96		Check One: <input checked="" type="checkbox"/> Support <input 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.....	46835.92
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER C C00523621
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		MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee Wisconsin Jobs Now		Date MM / DD / YYYY 10 / 15 / 2012
Mailing Address PO BOX 511506		Amount 1500.00
City Milwaukee	State WI	Zip Code 53203
Purpose of Expenditure Voter Outreach Literature	Category/Type 006	Transaction ID : D298366
Name of Federal Candidate Supported or Opposed by Expenditure: ROB ZERBAN		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 01
Calendar Year-To-Date Per Election for Office Sought 3000.00		Check One: <input checked="" type="checkbox"/> Support <input 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 Wisconsin Jobs Now		Date MM / DD / YYYY 10 / 15 / 2012
Mailing Address PO BOX 511506		Amount 1500.00
City Milwaukee	State WI	Zip Code 53203
Purpose of Expenditure Voter Outreach Literature	Category/Type 006	Transaction ID : D298367
Name of Federal Candidate Supported or Opposed by Expenditure: PAUL D. RYAN		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 01
Calendar Year-To-Date Per Election for Office Sought 3000.00		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.....	3000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	138317.07

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.

Signature Eliseo Medina [Electronically Filed] Date MM / DD / YYYY 10 / 16 / 2012