24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (5

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
IAME OF COMMITTEE (In Full) AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES PEOPLE	FEC IDENTIFICATION NUMBER ▼ C C00011114
Check if 24-hour report 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y
Full Name of Payee DIXON/DAVIS MEDIA GROUP, LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1028 33rd Street NW Suite 300	Amount
	4052.00
City State Zip Code Washington DC 20007	1653.00 Transaction ID: WFT20141021051-1 Date of Disbursement or Obligation
Purpose of Expenditure Production cost - TV Ads "Seniors" Category/ Type 004	10 31 2014
Name of Federal Candidate Support Office	Sought: House District: 00
ERNST K JONI Oppose	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought Disbut 2014	orsement For: Primary
Full Name of Payee	Date of Public Distribution/Dissemination
Mailing Address	Amount
City State Zip Code	
Purpose of Expenditure Category/ Type	Date of Disbursement or Obligation
Name of Federal Candidate Support Office Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	ursement For: Primary General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	1653.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	1653.00
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.	
REYES LAURA [Electronically Filed] Date Signature	1 02 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y