

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

PAGE 1 OF 3
FOR SE OF FORM 24/48

| | |
|--|---|
| NAME OF COMMITTEE (In Full) Campaign to Defeat Barack Obama | FEC IDENTIFICATION NUMBER C C00495010 |
| 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 MM / DD / YYYY 02 / 02 / 2012 | |

| | |
|---|--|
| Full Name (Last, First, Middle Initial) of Payee KDWN | Date MM / DD / YYYY 02 / 01 / 2012 |
| Mailing Address 1455 East Tropicana, Suite 800 | Amount 1515 |
| City State Zip Code Las Vegas NV 89119 | |
| Purpose of Expenditure Advertising 2/1 Nevada IE | Category/Type |
| 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: Newt Gingrich | |
| Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 3515 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ |

Transaction ID : 16636

| | |
|--|--|
| Full Name (Last, First, Middle Initial) of Payee Russo Marsh & Associates, Inc. | Date MM / DD / YYYY 02 / 01 / 2012 |
| Mailing Address 8795 Folsom Boulevard Suite 103 | Amount 2386.66 |
| City State Zip Code Sacramento CA 95826-3720 | |
| Purpose of Expenditure Radio Production 2/1 IE Nevada | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: CA District: _____ | |
| Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama | |
| Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 244729.8 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ |

Transaction ID : 16637

| | |
|--|---------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... | 3901.66 |
| (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.

Kelly Lawler
Signature [Electronically Filed] Date MM / DD / YYYY 05 / 21 / 2012

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F24A
Transaction ID :

Amendment to include state information.

Form/Schedule:
Transaction ID:

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

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| NAME OF COMMITTEE (In Full) Campaign to Defeat Barack Obama | | FEC IDENTIFICATION NUMBER C C00495010 |
| 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 | | MM / DD / YYYY 02 / 02 / 2012 |

| | | |
|--|-------------------|---|
| Full Name (Last, First, Middle Initial) of Payee Advantage, Inc | | Date MM / DD / YYYY 02 / 01 / 2012 |
| Mailing Address 2300 Clarendon Blvd,#1004 | | Amount 2093.72 |
| City Arlington | State VA | Zip Code 22201 |
| Purpose of Expenditure Automated Calls 2/1 Nevada IE | Category/ Type | Transaction ID : 16639 |
| Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama | | Office Sought: <input type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: <input checked="" type="checkbox"/> President |
| Calendar Year-To-Date Per Election for Office Sought 244729.8 | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |

| | | |
|--|-------------------|---|
| Full Name (Last, First, Middle Initial) of Payee | | Date |
| Mailing Address | | MM / DD / YYYY |
| City | State | Zip Code |
| Purpose of Expenditure | Category/ Type | Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: <input type="checkbox"/> President |
| 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 | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |

| | |
|---|---------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... | 2093.72 |
| (b) SUBTOTAL of Unitemized Independent Expenditures | |
| (c) TOTAL Independent Expenditures..... | 5995.38 |

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.

Kelly Lawler
Signature

[Electronically Filed]

Date MM / DD / YYYY
05 / 21 / 2012