

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

PAGE 1 OF 2  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>CLUB FOR GROWTH ACTION</b>	FEC IDENTIFICATION NUMBER <b>C</b> C00487470
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>Club for Growth</b>		Date 01 / 03 / 2012
Mailing Address 2001 L St., NW, Ste. 600		Amount 100.19
City Washington	State DC	Zip Code 20036
Purpose of Expenditure press release (from advance Line 21)	Category/Type	Office Sought: <input type="checkbox"/> House State: TX <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID H DEWHURST		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 100.19		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee <b>Club for Growth</b>		Date 01 / 03 / 2012
Mailing Address 2001 L St., NW, Ste. 600		Amount 370.54
City Washington	State DC	Zip Code 20036
Purpose of Expenditure tv ad production costs (from advance Line 21)	Category/Type	Office Sought: <input type="checkbox"/> House State: TX <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID H DEWHURST		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 470.73		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	470.73
(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.

*Chris Chocola*  
Signature

[Electronically Filed] Date 01 / 05 / 2012

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

NAME OF COMMITTEE (In Full) <b>CLUB FOR GROWTH ACTION</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black;">C</span> C00487470       </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>Red Sea, LLC</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 0.8em;">M M</span> / <span style="font-size: 0.8em;">D D</span> / <span style="font-size: 0.8em;">Y Y Y Y</span>          01 / 03 / 2012       </div>
Mailing Address 4550 Montgomery Ave. #906		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 0.8em;">263400.00</span> </div>
City Bethesda State MD Zip Code 20814	<b>Transaction ID : SE.21300</b>	
Purpose of Expenditure tv ad air buy, production costs	Category/Type	Office Sought: <input type="checkbox"/> House State: TX <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID H DEWHURST		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		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		Amount
City State Zip Code	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Purpose of Expenditure		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		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;"> <span style="font-size: 0.8em;">263400.00</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 0.8em;"> </span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 0.8em;">263870.73</span> </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.

*Chris Chocola*  
 Signature [Electronically Filed] Date 

M M / D D / Y Y Y Y  
 01 / 05 / 2012