

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

PAGE 1 OF 3  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>PATRIOT VOICES PAC</b>		FEC IDENTIFICATION NUMBER <b>C</b> C00528307	
Check If <input checked="" type="checkbox"/> 24-hour report <input 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>MORGAN LITHO</b>		Date 10 / 26 / 2012	
Mailing Address 4101 COMMERCE AVENUE		Amount 314.96	
City CLEVELAND	State OH	Zip Code 44130	Transaction ID : SE24.3011
Purpose of Expenditure RALLY SIGNS AND SHIPPING	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6630.19		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee <b>CMDI</b>		Date 10 / 27 / 2012	
Mailing Address 7704 LEESBURG PIKE		Amount 2.28	
City FALLS CHURCH	State VA	Zip Code 22043	Transaction ID : SE24.3012
Purpose of Expenditure EMAIL COMMUNICATION	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6630.19		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	317.24
(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.

*Nadine Maenza*  
Signature

[Electronically Filed]

Date 07 / 24 / 2013

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

NAME OF COMMITTEE (In Full) <b>PATRIOT VOICES PAC</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> C00528307       </div>
Check If <input checked="" type="checkbox"/> 24-hour report <input 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>CMDI</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>          10 / 31 / 2012       </div>
Mailing Address 7704 LEESBURG PIKE	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> <span style="float: right;">113.85</span> </div>
City FALLS CHURCH      State VA      Zip Code 22043	<b>Transaction ID : SE24.3013</b>
Purpose of Expenditure EMAIL COMMUNICATION	Office Sought: <input type="checkbox"/> House    State: PA <input checked="" type="checkbox"/> Senate    District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH	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; display: inline-block; width: 150px;"> <span style="float: right;">6630.19</span> </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 <b>CMDI</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>          11 / 02 / 2012       </div>
Mailing Address 7704 LEESBURG PIKE	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> <span style="float: right;">340.69</span> </div>
City FALLS CHURCH      State VA      Zip Code 22043	<b>Transaction ID : SE24.3014</b>
Purpose of Expenditure EMAIL COMMUNICATION	Office Sought: <input type="checkbox"/> House    State: PA <input checked="" type="checkbox"/> Senate    District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH	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; display: inline-block; width: 150px;"> <span style="float: right;">6630.19</span> </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	454.54
(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.

*Nadine Maenza*  
 Signature \_\_\_\_\_ [Electronically Filed]      Date 
M M / D D / Y Y Y Y  
 07 / 24 / 2013

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

NAME OF COMMITTEE (In Full) <b>PATRIOT VOICES PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <span style="border: 1px solid black; padding: 2px;">C C00528307</span>
Check If <input checked="" type="checkbox"/> 24-hour report <input 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>ACTIVE ENGAGEMENT, LLC</b>		Date <span style="border: 1px solid black; padding: 2px;">11 / 02 / 2012</span>
Mailing Address <b>44084 RIVERSIDE PARKWAY SUITE 350</b>		Amount <span style="border: 1px solid black; padding: 2px;">333.33</span>
City <b>LANSDOWN</b> State <b>VA</b> Zip Code <b>20176</b>	<b>Transaction ID : SE24.3015</b>	
Purpose of Expenditure <b>EMAIL COMMUNICATION</b>	Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Office Sought: <input type="checkbox"/> House      State: <b>PA</b> <input checked="" type="checkbox"/> Senate      District: <b>00</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>TOM SMITH</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">6630.19</span>		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 <span style="border: 1px solid black; padding: 2px;"></span>
Mailing Address		Amount <span style="border: 1px solid black; padding: 2px;"></span>
City      State      Zip Code	Office Sought: <input type="checkbox"/> House      State: _____ <input type="checkbox"/> Senate      District: _____ <input type="checkbox"/> President	
Purpose of Expenditure		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>
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 <span style="border: 1px solid black; padding: 2px;"></span>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">333.33</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">1105.11</span>

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.

*Nadine Maenza*  
 Signature [Electronically Filed]      Date 07 / 24 / 2013