

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

PAGE 1 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) 1199 SERVICE EMPLOYEES INT'L UNION FEDERAL POLITICAL ACTION FUND	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00348540 </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: inline-block; margin-left: 10px;"> <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 BLUE AND READ	Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">10</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">09</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">2012</div> </div>			
Mailing Address 2610 15TH STREET	Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">21699.37</div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City TROY</td> <td style="width:33%;">State NY</td> <td style="width:33%;">Zip Code 12180</td> </tr> </table>		City TROY	State NY	Zip Code 12180
City TROY	State NY	Zip Code 12180		
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:45%;">Purpose of Expenditure CAMPAIGN MAIL</td> <td style="width:15%;">Category/Type</td> <td style="width:40%;">Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 25 <input type="checkbox"/> President</td> </tr> </table>	Purpose of Expenditure CAMPAIGN MAIL	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 25 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Purpose of Expenditure CAMPAIGN MAIL	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 25 <input type="checkbox"/> President		
Name of Federal Candidate Supported or Opposed by Expenditure: ANNE MARIE BUERKLE	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">21699.37</div>	Transaction ID : SE.11216			

Full Name (Last, First, Middle Initial) of Payee BLUE AND READ	Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">10</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">11</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">2012</div> </div>			
Mailing Address 2610 15TH STREET	Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">21699.37</div>			
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Purpose of Expenditure CAMPAIGN MAIL	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 25 <input type="checkbox"/> President		
Name of Federal Candidate Supported or Opposed by Expenditure: ANNE MARIE BUERKLE	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">43398.74</div>	Transaction ID : SE.11219			

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">43398.74</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>

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.

KEVIN FINNEGAN
 Signature _____ [Electronically Filed] Date

10

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17

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2012

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

NAME OF COMMITTEE (In Full) 1199 SERVICE EMPLOYEES INT'L UNION FEDERAL POLITICAL ACTION FUND	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00348540 </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 BLUE AND READ		Date <div style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2012</div>
Mailing Address 2610 15TH STREET		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">21699.37</div>
City TROY	State NY	
Zip Code 12180	Transaction ID : SE.11222	
Purpose of Expenditure CAMPAIGN MAIL	Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 25 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: ANNE MARIE BUERKLE		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;">65098.11</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 BLUE AND READ		Date <div style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y 10 / 17 / 2012</div>
Mailing Address 2610 15TH STREET		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">45438.97</div>
City TROY	State NY	
Zip Code 12180	Transaction ID : SE.11224	
Purpose of Expenditure CAMPAIGN MAIL	Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 25 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: ANNE MARIE BUERKLE		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;">110537.08</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	67138.34
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	110537.08

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.

KEVIN FINNEGAN

Signature

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
10 / 17 / 2012