

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

PAGE 1 OF 1
FOR SE OF FORM 24/48

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|--|--|
| NAME OF COMMITTEE (In Full) Campaign to Defeat Barack Obama | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00495010 </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; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div> | |

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|---|--|
| Full Name (Last, First, Middle Initial) of Payee Russo Marsh & Associates, Inc. | Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">/</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">/</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> |
| Mailing Address 8795 Folsom Boulevard Suite 103 | Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">16514.27</div> |
| City Sacramento State CA Zip Code 95826-3720 | Transaction ID : 10332 |
| Purpose of Expenditure Blast Emails and Production | Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div> |
| Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama | Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President |
| Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">274267.46</div> | 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 <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">/</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">/</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> |
| Mailing Address | Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> |
| City State Zip Code | Transaction ID : 10332 |
| Purpose of Expenditure | Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div> |
| Name of Federal Candidate Supported or Opposed by Expenditure: | Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President |
| Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> | Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____ |

| | |
|---|---|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | <div style="border: 1px solid black; padding: 2px; text-align: right;">16514.27</div> |
| (b) SUBTOTAL of Unitemized Independent Expenditures▶ | <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> |
| (c) TOTAL Independent Expenditures.....▶ | <div style="border: 1px solid black; padding: 2px; text-align: right;">16514.27</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.

Kelly Lawler
 Signature [Electronically Filed] Date

M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2011