

24 / 48 HOUR NOTICE OF INDEPENDENT EXPENDITURE, on :

10/27/2008 22 : 51

The National Republican Trust PAC

2100 M Street, NW, Suite 170-340

Washington

DC

20037-1233

FEC ID No. C00455378☒ 24-Hour Notice ☐ 48-Hour Notice**SCHEDULE E (FEC Form 3X)****ITEMIZED INDEPENDENT EXPENDITURES**

PAGE OF 1 / 4

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
The National Republican Trust PAC**FEC IDENTIFICATION NUMBER****C** C00455378Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

Eagle Publishing, Inc.

Date

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Amount

6000.00

Mailing Address

One Massachusetts Ave., NW

City

Washington

State

DC

Zip Code

20001

Purpose of Expenditure

Email Communication

Category/
Type

Office Sought:

☐ House

State: _____

☐ Senate

District: 00

☒ Presidential

Check One:

☐ Support☒ Oppose

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____**Transaction ID: SE.4251**

Calendar Year-To-Date Per Election

1131404.17

for Office Sought

Full Name (Last, First, Middle, Initial) of Payee

Endeavor Media Group, LLC

Date

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Amount

6000.00

Mailing Address

2620 Sunday House Drive

City

Pearland

State

TX

Zip Code

77584

Purpose of Expenditure

Email Communication

Category/
Type

Office Sought:

☐ House

State: _____

☐ Senate

District: 00

☒ Presidential

Check One:

☐ Support☒ Oppose

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____**Transaction ID: SE.4250**

Calendar Year-To-Date Per Election

1125404.17

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

12000.00

(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.

Peter Leitner

Signature

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

24 / 48 HOUR NOTICE OF INDEPENDENT EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour NoticeSCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE OF 2 / 4
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The National Republican Trust PAC			FEC IDENTIFICATION NUMBER C C00455378		
Check if <input checked="" type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice					
Full Name (Last, First, Middle, Initial) of Payee Intrepid Media			Date M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 8		
Mailing Address 210 Mill Branch Road			Amount 11319.85		
City Tallahassee	State FL	Zip Code 32312	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> Presidential		
Purpose of Expenditure Media Production		Category/ Type	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Name of Federal Candidate supported or Opposed by expenditure: BARACK OBAMA			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) : _____		
Calendar Year-To-Date Per Election for Office Sought		1142724.02	Transaction ID: SE.4255		
Full Name (Last, First, Middle, Initial) of Payee Newsmax Media, Inc.			Date M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 8		
Mailing Address 560 Village Blvd., Suite 120			Amount 27450.00		
City West Palm Beach	State FL	Zip Code 33409	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> Presidential		
Purpose of Expenditure Email Communication		Category/ Type	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Name of Federal Candidate supported or Opposed by expenditure: BARACK OBAMA			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) : _____		
Calendar Year-To-Date Per Election for Office Sought		930054.17	Transaction ID: SE.4247		

(a) SUBTOTAL of Itemized Independent Expenditures	38769.85
(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.	
Peter Leitner Signature	M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 8

24 / 48 HOUR NOTICE OF INDEPENDENT EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour NoticeSCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE OF 3 / 4
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The National Republican Trust PAC		FEC IDENTIFICATION NUMBER C C00455378	
Check if <input checked="" type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Philips Brook Group, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 8	
Mailing Address 53 Philipse Brook Road		Amount 176000.00	
City Garrison	State NY	Zip Code 10524	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> Presidential
Purpose of Expenditure Media Buy	Category/ Type		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate supported or Opposed by expenditure: BARACK OBAMA			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) : _____
Calendar Year-To-Date Per Election for Office Sought		Transaction ID: SE.4248	
1109054.17			
Full Name (Last, First, Middle, Initial) of Payee Townhall.com		Date M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 8	
Mailing Address 1901 N. Moore Street, Suite 701		Amount 10350.00	
City Arlington	State VA	Zip Code 22209	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> Presidential
Purpose of Expenditure Email Communication	Category/ Type		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate supported or Opposed by expenditure: BARACK OBAMA			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) : _____
Calendar Year-To-Date Per Election for Office Sought		Transaction ID: SE.4249	
1119404.17			

(a) SUBTOTAL of Itemized Independent Expenditures	186350.00
(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.	
Peter Leitner Signature	M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 8

24 / 48 HOUR NOTICE OF INDEPENDENT EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour NoticeSCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE OF 4 / 4
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The National Republican Trust PAC	FEC IDENTIFICATION NUMBER C C00455378
Check if <input checked="" type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee

Triangulation Strategies

Date

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Amount

1500.00

Mailing Address

64 Twin Lakes Rd

City

South Salem

State

NY

Zip Code

10590

Purpose of Expenditure

Email Communication

Category/
Type

Office Sought:

☐ House

State: _____

☐ Senate

District: 00

☒ Presidential

Check One:

☐ Support☒ Oppose

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____

Transaction ID: SE.4256

Calendar Year-To-Date Per Election

1144224.02

for Office Sought

Full Name (Last, First, Middle, Initial) of Payee

Verafast Corporation

Date

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 0 8

Amount

3000.00

Mailing Address

20545 Center Ridge Rd, Ste 300

City

Rocky River

State

OH

Zip Code

44116

Purpose of Expenditure

Phone Communication

Category/
Type

Office Sought:

☐ House

State: _____

☐ Senate

District: 00

☒ Presidential

Check One:

☐ Support☒ Oppose

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____

Transaction ID: SE.4258

Calendar Year-To-Date Per Election

933054.17

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

4500.00

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

241619.85

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.

Peter Leitner

Signature

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8