

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

PAGE 1 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) FSA PAC	FEC IDENTIFICATION NUMBER C C00526673
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 SARAH BLACKADAR		Date 09 / 13 / 2012
Mailing Address 345 LONGWOOD LANE		Amount 278.65
City EASTSOUND	State WA	Zip Code 98245
Purpose of Expenditure POSTERS AND FLYERS	Category/Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: CO District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 270278.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Transaction ID : SE.4118

Full Name (Last, First, Middle Initial) of Payee SARAH BLACKADAR		Date 09 / 13 / 2012
Mailing Address 345 LONGWOOD LANE		Amount 280.76
City EASTSOUND	State WA	Zip Code 98245
Purpose of Expenditure POSTERS AND FLYERS	Category/Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: CO District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 270559.41		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Transaction ID : SE.4119

(a) SUBTOTAL of Itemized Independent Expenditures.....	559.41
(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.

BRAD MARTIN

Signature

[Electronically Filed]

Date

09 / 15 / 2012

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

NAME OF COMMITTEE (In Full) FSA PAC	FEC IDENTIFICATION NUMBER ▼ C C00526673
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 M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee SARAH BLACKADAR		Date M M / D D / Y Y Y Y Y Y 09 / 13 / 2012
Mailing Address 345 LONGWOOD LANE		Amount 276.02
City EASTSOUND	State WA	
Zip Code 98245	Transaction ID : SE.4120	
Purpose of Expenditure POSTERS AND FLYERS	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: <u>CO</u> <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 270835.43		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee ALI BLUMENSTOCK		Date M M / D D / Y Y Y Y Y Y 09 / 13 / 2012
Mailing Address 1608 WOODMERE WAY		Amount 360.00
City HAVERTOWN	State PA	
Zip Code 19083	Transaction ID : SE.4121	
Purpose of Expenditure PRINT AD	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: <u>CO</u> <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 271195.43		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	636.02
(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.

BRAD MARTIN

Signature _____ [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
09 / 15 / 2012

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

NAME OF COMMITTEE (In Full) FSA PAC	FEC IDENTIFICATION NUMBER ▼ C C00526673
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 M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee JOEY MELNICK		Date M M M / D D D / Y Y Y Y Y Y 09 / 13 / 2012
Mailing Address 211 OXBOW RD		Amount 75.00
City WAYLAND	State MA	
Zip Code 01778	Transaction ID : SE.4122	
Purpose of Expenditure ONLINE AD	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: <u>CO</u> <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 271270.43		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee WORK FOR PROGRESS		Date M M M / D D D / Y Y Y Y Y Y 09 / 13 / 2012
Mailing Address 1543 WAZEE STREET STE 330		Amount 270000.00
City DENVER	State CO	
Zip Code 80202	Transaction ID : SE.4123	
Purpose of Expenditure DOOR TO DOOR VOTRE CONTACT	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: <u>CO</u> <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 270000.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	270075.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	271270.43

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.

BRAD MARTIN

Signature

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2012