Image# 12960564564 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

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SCHEDULE E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full) AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES PEOPLE	FEC IDENTIFICATION NUMBER ▼ C C000011114
Check If 24-hour report X 48-hour report New report Amends report	t filed on
Full Name (Last, First, Middle Initial) of Payee RED HORSE STRATEGIES	Date
Mailing Address 55 WASHINGTON STREET	
SUITE 624	Amount
CityStateZip CodeBROOKLYNNY11201	35750.00 Transaction ID : SE.273693
Purpose of Expenditure Mail 'NY-27' 'Collins 3' Category/ Type 004	Office Sought: House State: NY Senate District: 27 President
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTOPHER CARL COLLINS	Check One: Support X Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary
Full Name (Last, First, Middle Initial) of Payee	Date
Mailing Address	Amount
City State Zip Code	
Purpose of Expenditure Category/ Type Name of Federal Candidate Supported or Opposed by Expenditure:	Office Sought: House State: Senate District: President
	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	▶ 35750.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	▶ 35750.00
Under penalty of perjury I certify that the independent expenditures reported herein were r with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	
LAURA REYES [Electronically Filed] Date Signature	10 / 19 / 2012