

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

PAGE 1 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Citizens 4 Ethics in Government	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00524082 </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="float: right; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">M M M /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">D D D /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 80px; text-align: center;">Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee Gill Media		Date <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">07 /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">03 /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 80px; text-align: center;">2012</div>
Mailing Address 1616 Westgate Circle		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">18400.00</div>
City Brentwood	State TN	Zip Code 37027
Purpose of Expenditure Media-Radio	Category/ Type <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div>	Office Sought: <input checked="" type="checkbox"/> House State: TN <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DIANE L MRS. BLACK		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; display: inline-block; width: 150px; text-align: right;">31527.00</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : SE.4132

Full Name (Last, First, Middle Initial) of Payee Gill Media		Date <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">07 /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">14 /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 80px; text-align: center;">2012</div>
Mailing Address 1616 Westgate Circle		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">5875.00</div>
City Brentwood	State TN	Zip Code 37027
Purpose of Expenditure Media-Radio	Category/ Type <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div>	Office Sought: <input checked="" type="checkbox"/> House State: TN <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DIANE L MRS. BLACK		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; display: inline-block; width: 150px; text-align: right;">37402.00</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : SE.4133

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">24275.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; 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.

Michael Leisey

[Electronically Filed]

Date

07 /

23 /

2012

Signature

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

NAME OF COMMITTEE (In Full) Citizens 4 Ethics in Government	FEC IDENTIFICATION NUMBER C C00524082
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 Pete James		Date MM / DD / YYYY 07 / 16 / 2012
Mailing Address 500 Washington St.		Amount 50000.00
City Tullahoma	State TN	Zip Code 37388
Purpose of Expenditure Media-Cable	Category/Type	Transaction ID : SE.4134
Name of Federal Candidate Supported or Opposed by Expenditure: DIANE L MRS. BLACK		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 06
Calendar Year-To-Date Per Election for Office Sought 87402.00		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 WKRN TV		Date MM / DD / YYYY 07 / 20 / 2012
Mailing Address 441 Murfreesboro Pike		Amount 15640.00
City Nashville	State TN	Zip Code 37210
Purpose of Expenditure Media-Television	Category/Type	Transaction ID : SE.4135
Name of Federal Candidate Supported or Opposed by Expenditure: DIANE L MRS. BLACK		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 06
Calendar Year-To-Date Per Election for Office Sought 146970.00		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)

(a) SUBTOTAL of Itemized Independent Expenditures.....	65640.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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Michael Leisey
Signature

[Electronically Filed]

Date MM / DD / YYYY
07 / 23 / 2012

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

NAME OF COMMITTEE (In Full) Citizens 4 Ethics in Government	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00524082 </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	

Full Name (Last, First, Middle Initial) of Payee WSMV TV	Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y 07 / 18 / 2012 </div>
Mailing Address 5700 Knob Rd.	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 43928.00 </div>
City Nashville State TN Zip Code 37209	Transaction ID : SE.4136
Purpose of Expenditure Media-TV	Office Sought: <input checked="" type="checkbox"/> House State: TN <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DIANE L MRS. BLACK	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; display: inline-block;"> 131330.00 </div>	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
Mailing Address	Amount
City State Zip Code	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Purpose of Expenditure	Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Calendar Year-To-Date Per Election for Office Sought	Amount

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 43928.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 133843.00 </div>

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Michael Leisey
 Signature [Electronically Filed] Date

M M / D D / Y Y Y Y
 07 / 23 / 2012