

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

PAGE 1 OF 2  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>CONNECTICUT'S FUTURE PAC INC</b>		FEC IDENTIFICATION NUMBER <b>C</b> C00524751	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		MM / DD / YYYY	MM / DD / YYYY
		10 / 11 / 2012	

Full Name (Last, First, Middle Initial) of Payee  
**GSG Communications LLC**

Date  
MM / DD / YYYY  
09 / 20 / 2012

Mailing Address 895 Broadway, 5th Floor

Amount  
20250.00

City State Zip Code  
New York NY 10003

Transaction ID : WFT2012821166-1

Purpose of Expenditure  
Digital media strategy & buy

Category/Type  
004

Office Sought:  House State: CT  
 Senate District:  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Murphy Chris

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought

Disbursement For:  Primary  General  
2012  Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
**Waterfront Strategies**

Date  
MM / DD / YYYY  
09 / 21 / 2012

Mailing Address 3050 K Street, NW  
Suite 100

Amount  
99687.70

City State Zip Code  
Washington DC 20007

Transaction ID : WFT2012821169-1

Purpose of Expenditure  
Television advertisement

Category/Type  
004

Office Sought:  House State: CT  
 Senate District:  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Murphy Chris

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought

Disbursement For:  Primary  General  
2012  Other (specify)

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	119937.70
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> 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.

*Taborsak Joseph*

[Electronically Filed]

Date MM / DD / YYYY  
10 / 11 / 2012

Signature

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

NAME OF COMMITTEE (In Full) <b>CONNECTICUT'S FUTURE PAC INC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; border: 1px solid black;">C</span> C00524751                 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on	
M M / D D / Y Y Y Y Y Y 10 / 11 / 2012	

Full Name (Last, First, Middle Initial) of Payee <b>MD Tech Team</b>		Date <div style="border: 1px solid black; padding: 2px;">                     M M / D D / Y Y Y Y Y Y                      08 / 10 / 2012                 </div>
Mailing Address 18 Hendee Road		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">525.99</div>
City State Zip Code Manchester CT 06040		
Purpose of Expenditure Website	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Office Sought: <input type="checkbox"/> House State: CT <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy Chris		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

**Transaction ID : WFT20128211610-1**

Full Name (Last, First, Middle Initial) of Payee <b>SKD Knickerbocker</b>		Date <div style="border: 1px solid black; padding: 2px;">                     M M / D D / Y Y Y Y Y Y                      09 / 21 / 2012                 </div>
Mailing Address 1818 N Street, NW Suite 450		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">11263.11</div>
City State Zip Code Washington DC 20036		
Purpose of Expenditure Production cost for advertisement	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Office Sought: <input type="checkbox"/> House State: CT <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy Chris		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

**Transaction ID : WFT20129111450-1**

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">11789.10</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;"> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">131726.80</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.

*Taborsak Joseph*  
 Signature [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
10 / 11 / 2012