## 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full) RESTORE AMERICA'S VOICE PAC	FEC IDENTIFICATION NUMBER ▼
	C C00489807
Check If 24-hour report 48-hour report New report Amends report filed of	on Mam / Dad / Yayayay
Full Name (Last, First, Middle Initial) of Payee Infocision	Date
Mailing Address 325 Springside Dr	10 / 17 / 2012 Amount
City State Zip Code	
Akron OH 44333	33000.00
	Sought: House State: Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———
	⟨ One: Support
Calendar Year-To-Date Per Election for Office Sought 1522335.78 Disbut 2012	rsement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
	M   M
Mailing Address	Amount
City State Zip Code	
Purpose of Expenditure  Category/ Type  Office	Sought: House State: Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———
Check	k One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	rsement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	33000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	33000.00
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.	
Maureen E Otis [Electronically Filed] Date 10	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	