

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 1 OF 3
 FOR LINE 24 OF FORM 3X

RECEIVED

NAME OF COMMITTEE (In Full) <i>GRASSROOTS EAST-FEDERAL</i>	FEC IDENTIFICATION NUMBER <i>C 004 9 2280</i>
Check if <input checked="" type="checkbox"/> 24-hour report <input 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 <i>WINY Radio</i>		Date <i>10 25 2012</i>
Mailing Address <i>45 POMEROY ST.</i>		Amount <i>520.00</i>
City <i>POTOM</i>	State <i>CT</i>	Zip Code <i>06260</i>
Purpose of Expenditure <i>POLITICAL ADVERTISING</i>	Category/Type <i>004</i>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: <i>BARACK OBAMA</i>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Calendar Year-To-Date Per Election for Office Sought <i>520.00</i>		

Full Name (Last, First, Middle Initial) of Payee <i>WBMW Radio</i>		Date <i>10 25 2012</i>
Mailing Address <i>758 COLONEL LEDYARD HWY</i>		Amount <i>1,190.00</i>
City <i>LEDYARD</i>	State <i>CT</i>	Zip Code <i>06335</i>
Purpose of Expenditure <i>ADVERTISING</i>	Category/Type <i>004</i>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: <i>BARACK OBAMA</i>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Calendar Year-To-Date Per Election for Office Sought <i>2,010.00</i>		

(a) SUBTOTAL of Itemized Independent Expenditures.....	<i>2,010.00</i>
(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.

[Signature]
 Signature

Date *10 25 2012*

12030944657

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 2 OF 3
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <i>GRASSROOTS EAST - FEDERAL</i>	FEC IDENTIFICATION NUMBER ▼ <i>C 00492280</i>
Check if <input checked="" type="checkbox"/> 24-hour report <input 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 <i>WCTY Radio</i>		Date <i>10 / 29 / 2012</i>
Mailing Address <i>P.O. Box 551</i>		Amount <i>1,680.00</i>
City <i>NORWICH</i>	State <i>CT</i> Zip Code <i>06360</i>	
Purpose of Expenditure <i>ADVERTISING</i>	Category/Type <i>004</i>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <i>BARACK OBAMA</i>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <i>3,690.00</i>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <i>WMRD / WLIS Radio</i>		Date <i>10 / 29 / 2012</i>
Mailing Address <i>777 RIVER RD</i>		Amount <i>1,190.00</i>
City <i>MIDDLETOWN</i>	State <i>CT</i> Zip Code <i>06457</i>	
Purpose of Expenditure <i>ADVERTISING</i>	Category/Type <i>004</i>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <i>BARACK OBAMA</i>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <i>4,880.00</i>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<i>2,870.00</i>
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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[Signature]
 Signature

Date *10 / 29 / 2012*

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 3 OF 3
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <i>GRASSROOTS EAST-FEDERAL</i>	FEC IDENTIFICATION NUMBER ▼ <i>C 00492280</i>
Check if <input checked="" type="checkbox"/> 24-hour report <input 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 <i>WILLI TRADIS</i>		Date <i>10/29/2012</i>
Mailing Address <i>720 MAIN ST.</i>		Amount <i>952.00</i>
City <i>WILLIMANTIC</i>	State <i>CT</i> Zip Code <i>06226</i>	
Purpose of Expenditure <i>ADVERTISING</i>	Category/Type <i>004</i>	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <i>5,832.00</i>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <i>NORTHEAST PRINTING NETWORK LLC</i>		Date <i>10/29/2012</i>
Mailing Address <i>135 SEBETH DRIVE, SUITE 8</i>		Amount <i>1,042.23</i>
City <i>CROMWELL</i>	State <i>CT</i> Zip Code <i>06416</i>	
Purpose of Expenditure <i>SIGNS</i>	Category/Type <i>004</i>	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <i>MITT ROMNEY</i>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <i>2,374.80</i>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<i>1,994.23</i>
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	<i>6,874.23</i>

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.

[Signature]
 Signature

Date *10/29/2012*

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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> USPS First Class Mail	Postmarked
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<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) <i>10/29/12</i>
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<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	

<input type="checkbox"/> USPS Express Mail	Postmarked
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<input type="checkbox"/> Postmark Illegible	
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<input type="checkbox"/> No Postmark	
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<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	

<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
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<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
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<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
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Am H
PREPARER
(3/2005)

11/5/12
DATE PREPARED

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