

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) House Majority PAC		FEC IDENTIFICATION NUMBER ▼ C C00495028	
Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on		M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Murphy Vogel Askew Reilly LLC		Date M M M / D D D / Y Y Y Y Y Y 10 / 22 / 2013	
Mailing Address 1199 N Fairfax St Ste 220		Amount 9000.00	
City Alexandria	State VA	Zip Code 22314-1437	
Purpose of Expenditure Media Production Costs - Estimate		Category/Type	
Name of Federal Candidate Supported or Opposed by Expenditure: William S. Southerland		Office Sought: ☒ House ☐ Senate ☐ President State: FL District: 02	
Calendar Year-To-Date Per Election for Office Sought 131637.02		Check One: ☐ Support ☒ Oppose	
		Disbursement For: ☒ Primary ☐ General 2014 ☐ Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee Waterfront Strategies		Date M M M / D D D / Y Y Y Y Y Y 10 / 22 / 2013	
Mailing Address 3050 K St NW Ste 100		Amount 60465.60	
City Washington	State DC	Zip Code 20007-5108	
Purpose of Expenditure Television Advertising		Category/Type	
Name of Federal Candidate Supported or Opposed by Expenditure: William S. Southerland		Office Sought: ☒ House ☐ Senate ☐ President State: FL District: 02	
Calendar Year-To-Date Per Election for Office Sought 131637.02		Check One: ☐ Support ☒ Oppose	
		Disbursement For: ☒ Primary ☐ General 2014 ☐ Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	69465.60
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	69465.60

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.

Shannon Roche

[Electronically Filed]

Signature _____ Date M M M / D D D / Y Y Y Y Y Y **10 / 24 / 2013**