

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 1
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) AMERICAN VALUES COALITION			FEC IDENTIFICATION NUMBER ▼ C C00512871		
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 Y Y					
Full Name (Last, First, Middle Initial) of Payee Mammen Group			Date M M M / D D D / Y Y Y Y Y Y Y Y 10 / 30 / 2012		
Mailing Address 1901 L Street, NW			Amount 7799.74		
City Washington State DC Zip Code 20036		Transaction ID : SE.4132			
Purpose of Expenditure Mailing Expenses		Category/ Type 	Office Sought: ☒ House ☐ Senate ☐ President State: CA District: 15		Check One: ☒ Support ☐ Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: FORTNEY HILLMAN JR STARK			Disbursement For: ☐ Primary ☒ General ☐ Other (specify) _____		
Calendar Year-To-Date Per Election for Office Sought 7799.74					
Full Name (Last, First, Middle Initial) of Payee			Date M M M / D D D / Y Y Y Y Y Y Y Y		
Mailing Address			Amount 		
City State Zip Code					
Purpose of Expenditure		Category/ Type 	Office Sought: ☐ House ☐ Senate ☐ President State: District:		Check One: ☐ Support ☐ Oppose
Name of Federal Candidate Supported or Opposed by Expenditure:			Disbursement For: ☐ Primary ☐ General ☐ Other (specify) _____		
Calendar Year-To-Date Per Election for Office Sought 					
(a) SUBTOTAL of Itemized Independent Expenditures.....			7799.74		
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures.....			7799.74		
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 OOMMEN P. MAMMEN		[Electronically Filed]		Date M M M / D D D / Y Y Y Y Y Y Y Y 11 / 06 / 2012	