

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 1
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 / D D / Y Y Y Y Y Y					
Full Name (Last, First, Middle Initial) of Payee Mission Control, Inc.			Date 08 / 01 / 2012		
Mailing Address 114 A Mansfield Hollow Road			Amount 12674.96		
City Mansfield Center		State CT	Zip Code 06250		Transaction ID : D634013
Purpose of Expenditure Direct Mail		Category/Type 		Office Sought: ☒ House ☐ Senate ☐ President State: FL District: 09	
Name of Federal Candidate Supported or Opposed by Expenditure: John Quinones			Check One: ☐ Support ☒ Oppose		
Calendar Year-To-Date Per Election for Office Sought 25379.92			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) 		
Full Name (Last, First, Middle Initial) of Payee			Date / / 		
Mailing Address			Amount 		
City		State	Zip Code		
Purpose of Expenditure		Category/Type 		Office Sought: ☐ House ☐ Senate ☐ President State: District: 	
Name of Federal Candidate Supported or Opposed by Expenditure:			Check One: ☐ Support ☐ Oppose		
Calendar Year-To-Date Per Election for Office Sought 			Disbursement For: ☐ Primary ☐ General ☐ Other (specify) 		
(a) SUBTOTAL of Itemized Independent Expenditures.....			12674.96		
(b) SUBTOTAL of Unitemized Independent Expenditures			 		
(c) TOTAL Independent Expenditures.....			12674.96		
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 Shannon Roche		[Electronically Filed]		Date 08 / 02 / 2012	