| Image# 13961254833  |   |  |                                |                              |                      |                | PA                   | GE 1 / 14   |
|---|---|--|--------------------------------|------------------------------|----------------------|----------------|----------------------|---|
| FEC<br>FORM 3X  |   | ID DIS   | OF RE<br>BURSE<br>An Authorize | MENT                         | s                    |                | Office Use Only      | Г   |
| 1. NAME OF<br>COMMITTEE (in 1   |   | e or print 🔻   |                                | ample: If typiner the lines. | ng, type             | 12FE4M5        |                      |   |
| Service Employ  | vees Interna  | ational Uni  | on PEA - Fe                    | ederal                       |                      |                |                      |   |
|   |   |  |                                |                              |                      |                |                      |   |
| ADDRESS (number and   |   | 800 Massachuse   | tts Ave NW                     |                              |                      |                |                      |   |
| Check if diffe  | rent  |  |                                |                              |                      |                |                      |   |
| than previous reported. (AC   | sly M   | ashington  |                                |                              |                      |                | 20036                | -   |
| 2. FEC IDENTIFICA   | ATION NUMB  | ER 🔻   |                                |                              | S                    |                | ZIP CC               |   |
| C C00523621   |   |  | 3. IS THIS<br>REPOR            |                              | NEW<br>(N) <b>OR</b> | × AM<br>(A)    | ENDED                |   |
| July 15<br>Quarterly<br>October<br>Quarterly<br>X<br>January 3<br>Year-End<br>July 31 | orts:<br>Report (Q1)<br>Report (Q2)<br>15<br>Report (Q3)<br>31<br>Report (YE)<br><i>I</i> id-Year | b) Monthly<br>Report<br>Due On:<br>(c) 12-Day<br>PRE-Ele<br>Report<br>(d) 30-Day |                                | 3)                           | (12C)                | Sep            |                      | Nov 20 (M11)<br>(Non-Election<br>Year Only)<br>Dec 20 (M12)<br>(Non-Election<br>Year Only)<br>Jan 31 (YE)<br>Runoff (12R) |
| Year Only   | Non-election<br>y) (MY)<br>on Report  | POST-E<br>Report   |                                | General (300                 |                      | Runoff (3      | 0R) in the State of  | Special (30S)   |
| 5. Covering Period  | 11 /  | 27 / Y   | 2012                           | through                      | 12<br>12             | / D D /<br>31  | 2012                 |   |
| I certify that I have ex<br>Type or Print Name of                                     |   | eport and to the   | e best of my kn                | owledge and                  | belief it is true    | e, correct and | l complete.          |   |
| Signature of Treasurer  | Eliseo Med  | ina  |                                | [Electronicall               | y Filed] Da          | ate 04         | / D D /<br>08        | 2013  |
| NOTE: Submission of fa  | alse, erroneous,  | or incomplete i  | nformation may                 | subject the per              | son signing thi      | s Report to th | e penalties of 2     | U.S.C. §437g.   |
| Office<br>Use<br>Only   |   |  |                                |                              |                      |                | FEC FOF<br>Rev. 12/2 |   |
|   |   |  |                                |                              |                      |                |                      |   |

### 04/08/2013 21 : 53

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

| Pao | e | 2 |
|-----|---|---|
|     |   |   |

Write or Type Committee Name

FEC Form 3X (Rev. 02/2003)

# Service Employees International Union PEA - Federal

| R   | eport Covering the Period: From:   | 1 27 2012 To            | : 12 / D D / Y Y Y Y<br>31 2012   |
|-----|--|-------------------------|-----------------------------------|
|     |  | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
| 6.  | (a) Cash on Hand<br>January 1, 2012  |                         | 0.00                              |
|     | (b) Cash on Hand at<br>Beginning of Reporting Period   | 2563970.80              |                                   |
|     | (c) Total Receipts (from Line 19)  | 242707.67               | 16264036.52                       |
|     | <ul> <li>(d) Subtotal (add Lines 6(b) and</li> <li>6(c) for Column A and Lines</li> <li>6(a) and 6(c) for Column B)</li> </ul> | 2806678.47              | 16264036.52                       |
| 7.  | Total Disbursements (from Line 31)   | 9300.30                 | 13466658.35                       |
| 8.  | Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d))   | 2797378.17              | 2797378.17                        |
| 9.  | Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D)                         | 0.00                    |                                   |
| 10. | Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D)                         | 9048590.19              |                                   |

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

X

| 1  | TAILED SUMMARY PAGE<br>of Receipts | Page <b>3</b>                          |
|--|------------------------------------|--|
| FEC Form 3X (Rev. 06/2004)<br>Write or Type Committee Name   |                                    | raye J                                 |
| Service Employees International Unio   | on PEA - Federal                   |  |
| Report Covering the Period: From:  | / D D / Y Y Y Y<br>27 2012 To      | : 12 <sup>/</sup> 31 <sup>/</sup> 2012 |
| I. Receipts  | COLUMN A<br>Total This Period      | COLUMN B<br>Calendar Year-to-Date      |
| 11. Contributions (other than loans) From:         (a) Individuals/Persons Other   |                                    |  |
| Than Political Committees<br>(i) Itemized (use Schedule A)   | 0.00                               | 0.00                                   |
| (ii) Unitemized<br>(iii) TOTAL (add  | , 242707.67                        | 16264036.52                            |
| Lines 11(a)(i) and (ii)  | 242707.67                          | 16264036.52                            |
| <ul><li>(b) Political Party Committees</li><li>(c) Other Political Committees</li></ul>  | 0.00                               | 0.00                                   |
| <ul> <li>(c) Other Political Committees</li> <li>(such as PACs)</li> <li>(d) Total Contributions (add Lines</li> </ul>   | 0.00                               | 0.00                                   |
| 11(a)(iii), (b), and (c)) (Carry<br>Totals to Line 33, page 5)   | 242707.67                          | 16264036.52                            |
| 12. Transfers From Affiliated/Other<br>Party Committees  | 0.00                               | 0.00                                   |
| 13. All Loans Received   | 0.00                               | 0.00                                   |
| <ol> <li>Loan Repayments Received</li> <li>Offsets To Operating Expenditures</li> </ol>  | 0.00                               | 0.00                                   |
| <ul> <li>(Refunds, Rebates, etc.)</li> <li>(Carry Totals to Line 37, page 5)</li> <li>16. Refunds of Contributions Made<br/>to Federal Candidates and Other</li> </ul> | 0.00                               | 0.00                                   |
| Political Committees   | 0.00                               | 0.00                                   |
| <ul><li>(Dividends, Interest, etc.)</li><li>18. Transfers from Non-Federal and Levin Funds</li></ul>   | 0.00                               | 0.00                                   |
| (a) Non-Federal Account<br>(from Schedule H3)  | 0.00                               | 0.00                                   |
| (b) Levin Funds (from Schedule H5)   | 0.00                               | 0.00                                   |
| (c) Total Transfers (add 18(a) and 18(b))  | 0.00                               | 0.00                                   |
| <ol> <li>Total Receipts (add Lines 11(d),<br/>12, 13, 14, 15, 16, 17, and 18(c))</li> </ol>  | 242707.67                          | 16264036.52                            |
|  | 242101.01                          | 1020+030.32                            |
| 20. Total Federal Receipts<br>(subtract Line 18(c) from Line 19)►  | 242707.67                          | 16264036.52                            |

## DETAILED SUMMARY PAGE

of Disbursements

| FEC Form 3X (Rev. 02/2003)   | of Disbursements                        | Page 4                            |
|--|---|-----------------------------------|
| II. Disbursements  | COLUMN A<br>Total This Period           | COLUMN B<br>Calendar Year-to-Date |
| <ol> <li>Operating Expenditures:         <ul> <li>(a) Allocated Federal/Non-Federal<br/>Activity (from Schedule H4)</li> </ul> </li> </ol> |   |                                   |
| (i) Federal Share  | 0.00                                    | 0.00                              |
| (ii) Non-Federal Share   | 0.00                                    | 0.00                              |
| (b) Other Federal Operating<br>Expenditures  | 4650.30                                 | 2844521.15                        |
| (c) Total Operating Expenditures   | 4650.30                                 | 2844521.15                        |
| (add 21(a)(i), (a)(ii), and (b)) ►<br>. Transfers to Affiliated/Other Party  | 7 | 2044321.13                        |
| Committees<br>Contributions to   | 0.00                                    | 0.00                              |
| Federal Candidates/Committees<br>and Other Political Committees  | 0.00                                    | 4270902.02                        |
| Independent Expenditures     (use Schedule E)     Coordinated Party Expenditures   | 4650.00                                 | 5465635.31                        |
| . Coordinated Party Expenditures<br>(2 U.S.C. §441a(d))<br>(use Schedule F)  | 0.00                                    | 0.00                              |
| . Loan Repayments Made   | 0.00                                    | 0.00                              |
|  |   |                                   |
| Loans Made<br>Refunds of Contributions To:<br>(a) Individuals/Persons Other  | 0.00                                    | 0.00                              |
| Than Political Committees  | 0.00                                    | 0.00                              |
| (b) Political Party Committees   | 0.00                                    | 0.00                              |
| (c) Other Political Committees<br>(such as PACs)   | 0.00                                    | 0.00                              |
| (d) Total Contribution Refunds   | 0.00                                    |                                   |
| (add Lines 28(a), (b), and (c))►   |   | 0.00                              |
| . Other Disbursements  | 0.00                                    | 885599.87                         |
| Federal Election Activity (2 U.S.C. §431(20))<br>(a) Allocated Federal Election Activity   |   |                                   |
| (from Schedule H6)   |   | 0.00                              |
| (i) Federal Share  | 0.00                                    | 0.00                              |
| (ii) "Levin" Share   | 0.00                                    | 0.00                              |
| (b) Federal Election Activity Paid Entirely<br>With Federal Funds  | 0.00                                    | 0.00                              |
| (c) Total Federal Election Activity (add<br>Lines 30(a)(i), 30(a)(ii) and 30(b))►  | 0.00                                    | 0.00                              |
| Total Disbursements (add Lines 21(c), 22,  |   |                                   |
| 23, 24, 25, 26, 27, 28(d), 29 and 30(c))   | 9300.30                                 | 13466658.35                       |
| Total Federal Disbursements  |   |                                   |
| (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)  | 9300.30                                 | 13466658.35                       |
|  |   | 7 7 7                             |

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## DETAILED SUMMARY PAGE

of Disbursements

| III. Net Contributions/Operating Ex-<br>penditures  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 3. Total Contributions (other than loans)<br>(from Line 11(d), page 3)                          | 242707.67                     | 16264036.52                       |
| <ol> <li>Total Contribution Refunds<br/>(from Line 28(d))</li> </ol>                            | 0.00                          | 0.00                              |
| 5. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33)                      | 242707.67                     | 16264036.52                       |
| <ol> <li>Total Federal Operating Expenditures<br/>(add Line 21(a)(i) and Line 21(b))</li> </ol> | 4650.30                       | 2844521.15                        |
| <ol> <li>Offsets to Operating Expenditures<br/>(from Line 15, page 3)</li> </ol>                | 0.00                          | 0.00                              |
| 3. Net Operating Expenditures<br>(subtract Line 37 from Line 36)                                | 4650.30                       | 2844521.15                        |

| SCHEDULE B (FEC Form 3X)  | FOR LINE NUMBER:                                  |            |             | PA        | AGE (     | 6 OF          | 14        |           |         |          |           |
|---|---|------------|-------------|-----------|-----------|---------------|-----------|-----------|---------|----------|-----------|
| ITEMIZED DISBURSEMENTS  | Use separate schedule(s) for each category of the |            | hec         | k only    | y one)    |               |           |           |         |          |           |
|   | Detailed Summary Page                             |            | ×           | 21b<br>27 | 22<br>28a |               | 23<br>28b | 24<br>28c |         | 25<br>29 | 26<br>30b |
| Any information copied from such Reports and State<br>or for commercial purposes, other than using the na |   |            |             |           |           |               |           |           |         |          |           |
| NAME OF COMMITTEE (In Full)   |   |            |             |           |           |               |           |           |         |          |           |
| Service Employees International L   | Inion PEA - Federal                               |            |             |           |           |               |           |           |         |          |           |
| Full Name (Last, First, Middle Initial)<br>A. Mission Control Inc   |   |            |             |           | Date      | of Di         | sburse    | ment      |         |          |           |
|   |   |            |             |           | M         |               | D         |           | Y Y     | Y Y      |           |
| Mailing Address 114A Mansfield Hollow Road  |   |            |             |           | 12        |               | 2         | 8         | 201     | 2        |           |
| City  | State Zip Code                                    |            |             |           | Tran      | sact          | ion ID    | : D3076   | 97      |          |           |
| Mansfield Center Purpose of Disbursement  | CT 06250  |            |             |           | i an      | 0401          |           |           |         |          |           |
| Partial Debt Payment for Voter Canvass Literature   | Disclosed on Schedules D                          |            |             |           | Amou      | nt of         | Each      | Disburse  | ement t | his Pe   | riod      |
| Candidate Name  |   | Cate<br>T  | egor<br>/pe | ry/       |           |               |           |           |         | 4650.0   | 0         |
| Office Sought: House Disburse   | ment For:   |            | / 1         |           | [MEM      | о п           |           | ,         |         |          |           |
| Senate  | Primary General                                   |            |             |           |           |               |           |           |         |          |           |
| State: District:  | Other (specify)                                   |            |             |           |           |               |           |           |         |          |           |
| Full Name (Last, First, Middle Initial)   |   |            |             |           |           |               |           |           |         |          |           |
| В.  |   |            |             |           | Date      | of Di         | sburse    | ement     |         |          |           |
| Mailing Address   |   |            |             |           | M         | /             | D         | D /       | ΥΥ      | Y Y      | 1         |
| Mailing Address   |   |            |             |           |           |               |           |           |         |          |           |
| City  | State Zip Code                                    |            |             |           |           |               |           |           |         |          |           |
| Purpose of Disbursement   | 1   | -          | -           |           | Amou      | nt of         | Fach      | Disburse  | ment t  | his Pe   | riod      |
| Candidate Name  | I   | Cate       |             | 21/       | , inica   |               | Eaon      | Biobaroc  |         |          |           |
|   |   |            | /pe         | y,        |           |               | 7         |           |         |          |           |
| Office Sought: House Disburse<br>Senate President   | ment For:<br>Primary General<br>Other (specify) ▼ |            |             |           |           |               |           |           |         |          |           |
| State: District:  |   |            |             |           |           |               |           |           |         |          |           |
| Full Name (Last, First, Middle Initial)   |   |            |             |           | Data      | - <b>(</b> D: | - h       |           |         |          |           |
| C.  |   |            |             |           | Date      |               | sburse    |           | Y Y     | X X      |           |
| Mailing Address   |   |            |             |           |           |               |           |           | т — т — | Y = Y    |           |
| City  | State Zip Code                                    |            |             |           |           |               |           |           |         |          |           |
| Purpose of Disbursement   | 1   | -          |             |           |           |               |           |           |         |          |           |
| Candidate Name  |   | Cate<br>Ty | egor<br>/pe | γ/        | Amou      | nt of         | Each      | Disburse  | ement t | his Pe   | riod      |
| Office Sought: House Disburse<br>Senate President   | ment For:<br>Primary General<br>Other (specify) v |            |             |           |           |               | ,         | ,         |         |          |           |
| State: District:  |   |            |             |           |           |               |           |           |         |          |           |
| SUBTOTAL of Disbursements This Page (optional).   |   |            |             |           | E         |               | 7         | 7         | _       | 0.00     | ÷.        |
| TOTAL This Period (last page this line number only  | )   |            |             |           |           |               | 7         |           |         | 0.00     | ·         |

| CHEDULE D (FEC Form 3X)  |                     | (Use separate    | PAGE 7 OF 14<br>FOR LINE NUMBER:          |  |  |  |
|--|---------------------|------------------|---|--|--|--|
| EBTS AND OBLIGATIONS<br>cluding Loans  |                     |                  | schedule(s)<br>for each<br>numbered line) | (check only one) 9<br>X 10               |  |  |
| AME OF COMMITTEE (In Full)<br>Service Employees International Un                         | ion PEA - Fede      | eral             |   | · · · ·                                  |  |  |
| A. Full Name (Last, First, Middle Initial) of Debte                                      | or or Creditor      |                  |   | ebt (Purpose):                           |  |  |
| Action United  |                     |                  | Canvass, E                                | Bird-dogging & Rallies                   |  |  |
| Mailing Address 846 N Broad St.  |                     |                  |   |  |  |  |
| City State<br>Philadelphia   | Zip Code<br>PA      | 19130-2234       |   |  |  |  |
| Outstanding Balance Beginning This Period  |                     |                  | Transacti                                 | on ID : D300061                          |  |  |
| 44130.20   |                     |                  |   |  |  |  |
| Amount Incurred This Period  | Payment             | This Period      | Outstandi                                 | ng Balance at Close of This Period       |  |  |
| 0.00   |                     | 0.               | 00  | 44130.20                                 |  |  |
| B. Full Name (Last, First, Middle Initial) of Debto<br>Alliance for Californians for Con |                     | verment          |   | ebt (Purpose):<br>Bird-dogging & Rallies |  |  |
| Mailing Address 3655 S. Grand Ave.   |                     |                  |   |  |  |  |
| City State<br>Los Angeles  | Zip Code<br>CA S    | 90007-4316       |   |  |  |  |
| Outstanding Balance Beginning This Period  |                     |                  | Transact                                  | tion ID : D300059                        |  |  |
| 30591.32   |                     |                  |   |  |  |  |
| Amount Incurred This Period  | Payment             | This Period      | Outstandi                                 | ng Balance at Close of This Period       |  |  |
| 0.00   |                     | 0.0              | 00  | 30591.32                                 |  |  |
| C. Full Name (Last, First, Middle Initial) of Debt<br>Centaur North Strategic Comm       |                     |                  |   | lebt (Purpose):<br>vass Literature       |  |  |
| Mailing Address PO Box 1474  |                     |                  |   |  |  |  |
| City<br>Whittier   |                     | o Code<br>0609   |   |  |  |  |
| Outstanding Balance Beginning This Period  |                     |                  | Transact                                  | tion ID : D304193                        |  |  |
| 9240.00  |                     |                  |   |  |  |  |
| Amount Incurred This Period  | Payment             | This Period      | Outstandi                                 | ng Balance at Close of This Perio        |  |  |
| 0.00   |                     | 0.               | 00  | 9240.00                                  |  |  |
| SUBTOTALS This Period This Page (optional)   |                     |                  |   | 83961.52                                 |  |  |
| TOTALS This Period (last page this line numbe  | r only)             |                  |   |  |  |  |
| TOTAL OUTSTANDING LOANS from Schedule  | C (last page only)  |                  |   | 7 1 7 1 7 1                              |  |  |
| ADD 2) and 3) and carry forward to appropriate   | line of Summary Pag | ge (last page on | ly) 🕨                                     |  |  |  |
|  |                     |                  |   | , , ,                                    |  |  |

| CHEDULE D (FEC Form 3X)  |                 | PAGE 8 OF           |                              |   |  |  |
|--|-----------------|---------------------|------------------------------|---|--|--|
|  |                 |                     | (Use separate<br>schedule(s) | te                                      |  |  |
| DEBTS AND OBLIGATIONS  |                 |                     | for each                     | (check only one) 9                      |  |  |
| Excluding Loans  |                 |                     | numbered line)               | X 10                                    |  |  |
| NAME OF COMMITTEE (In Full)<br>Service Employees International Uni | ion PEA - Fe    | deral               |                              |   |  |  |
| A. Full Name (Last, First, Middle Initial) of Debto                | or or Creditor  |                     |                              | ebt (Purpose):                          |  |  |
| Citizen Action of NY   |                 |                     | Canvass, E                   | Bird-dogging & Rallies                  |  |  |
| Mailing Address 94 Central Avenue                                  |                 |                     |                              |   |  |  |
| City State   | Zip Code        |                     |                              |   |  |  |
| Albany   | NY              | 12206-3002          |                              |   |  |  |
| Outstanding Balance Beginning This Period                          |                 |                     | Transacti                    | on ID : D300056                         |  |  |
| 6042.60  |                 |                     |                              |   |  |  |
| Amount Incurred This Period  | Payme           | nt This Period      | Outstandir                   | ng Balance at Close of This Period      |  |  |
|  | Fayine          |                     |                              |   |  |  |
| 0.00   |                 | 0.0                 | 00                           | 6042.60                                 |  |  |
| B. Full Name (Last, First, Middle Initial) of Debtor               | or Creditor     |                     | Nature of D                  | ebt (Purpose):                          |  |  |
| Fair Share Alliance, Inc.  |                 |                     |                              | Bird-dogging & Rallies                  |  |  |
| Mailing Address 218 D Street, SE                                   |                 |                     |                              |   |  |  |
| City State   | Zip Code        |                     |                              |   |  |  |
| Washington   | DC              | 20003-1900          |                              |   |  |  |
| Outstanding Balance Beginning This Period                          |                 |                     | Transact                     | ion ID : D300057                        |  |  |
| 37892.26   |                 |                     |                              |   |  |  |
| Amount Incurred This Period  | Payme           | nt This Period      | Outstandir                   | ng Balance at Close of This Period      |  |  |
| 0.00   | ,               | 0.0                 | 00                           | 37892.26                                |  |  |
| C. Full Name (Last, First, Middle Initial) of Debto                | or or Creditor  |                     | Nature of D                  | ebt (Purpose):                          |  |  |
| Florida Consumer Action Netwo                                      |                 |                     |                              | Bird-dogging & Rallies                  |  |  |
| Mailing Address 3006 W Kennedy Blvd.                               |                 |                     |                              |   |  |  |
| Ste B<br>City  | State           | Zip Code            |                              |   |  |  |
| Татра  | FL              | 33609-3289          |                              |   |  |  |
| Outstanding Balance Beginning This Period                          |                 |                     | Transact                     | ion ID : D300058                        |  |  |
| 34884.00   |                 |                     |                              |   |  |  |
| Amount Incurred This Period  | Payme           | nt This Period      | Outstandir                   | ng Balance at Close of This Period      |  |  |
| 0.00   |                 | 0.0                 | 00                           | 34884.00                                |  |  |
| 1) SUBTOTALS This Period This Page (optional)                      |                 |                     |                              | 78818.86                                |  |  |
|  |                 |                     | _                            | , |  |  |
| 2) TOTALS This Period (last page this line number                  |                 |                     | _                            | 7                                       |  |  |
| 3) TOTAL OUTSTANDING LOANS from Schedule                           |                 |                     |                              | 7                                       |  |  |
| 4) ADD 2) and 3) and carry forward to appropriate                  | line of Summary | Page (last page onl | y) 🕨                         | - m - m - m - m - m - m - m - m - m - m |  |  |

| HEDULE D (FEC Form 3X)   |                      | (Lleo constate       | PAGE 9 OF 14               |   |
|--|----------------------|----------------------|----------------------------|---|
| EBTS AND OBLIGATIONS   |                      |                      | (Use separate schedule(s)  | FOR LINE NUMBER:  |
| cluding Loans  |                      |                      | for each<br>numbered line) | (check only one) 9<br>X 10  |
| ME OF COMMITTEE (In Full)  |                      |                      | · · ·                      |   |
| ervice Employees International U   | nion PEA - Fe        | ederal               |                            |   |
| A. Full Name (Last, First, Middle Initial) of Det                            | otor or Creditor     |                      |                            | ebt (Purpose):<br>Bird-dogging & Rallies  |
| Florida New Majority   |                      |                      | Carivass, I                | Sird-dogging & Rames  |
| Mailing Address 6127 NW 7th Avenue   |                      |                      |                            |   |
| City State   | Zip Code             |                      |                            |   |
| Miami  | FL                   | 33127-1111           |                            |   |
| Outstanding Balance Beginning This Period                                    |                      |                      | Transacti                  | on ID : D300060   |
| 39776.09   |                      |                      |                            |   |
| Amount Incurred This Period  | Payme                | ent This Period      | Outstandi                  | ng Balance at Close of This Perio   |
| 0.00   |                      | 0.0                  | 0                          | 39776.09  |
|  |                      |                      |                            |   |
| B. Full Name (Last, First, Middle Initial) of Debr<br>Mack/Crounse Group LLC | for or Creditor      |                      |                            | ebt (Purpose):<br>/ass Literature   |
| •  |                      |                      |                            |   |
| Mailing Address 4900 Seminary Road Suite 10                                  | 20                   |                      |                            |   |
| City State   | Zip Code             |                      |                            |   |
| Alexandria   | VA                   | 22311                |                            |   |
| Outstanding Balance Beginning This Period                                    |                      |                      | Transac                    | tion ID : D304184   |
| 29301.92   |                      |                      |                            |   |
| Amount Incurred This Period  | Payme                | ent This Period      | Outstandi                  | ng Balance at Close of This Period  |
| 0.00   |                      | 0.0                  | 0                          | 29301.92  |
| C. Full Name (Last, First, Middle Initial) of Del                            | otor or Creditor     | ,                    | Naturo of D                | ebt (Purpose):  |
| Mission Control Inc  |                      |                      |                            | vass Literature   |
| Mailing Address 114A Mansfield Hollow Road                                   |                      |                      |                            |   |
|  |                      |                      |                            |   |
| City<br>Mansfield Center   | State<br>CT          | Zip Code<br>06250    |                            |   |
| Outstanding Balance Beginning This Period                                    |                      |                      | Transac                    | tion ID : D304195   |
| 7190.83  |                      |                      |                            |   |
| Amount Incurred This Period  | Paym                 | ent This Period      | Outstandi                  | ng Balance at Close of This Perio   |
| 0.00   |                      | 4650.0               |                            | 2540.83   |
| 0.00   |                      | 4050.0               |                            | 2040.00   |
|  |                      |                      |                            | 71010.07  |
| SUBTOTALS This Period This Page (optional)                                   |                      |                      |                            | 71618.84  |
| TOTALS This Period (last page this line numb                                 | er only)             |                      |                            |   |
| TOTAL OUTSTANDING LOANS from Schedul   | e C. (last nace only | )                    |                            |   |
| TOTAL OUTSTANDING LOANS from Schedul   | o o viasi paye ully  | ,                    |                            | J         I         J         I |
| ADD 2) and 3) and carry forward to appropria                                 | te line of Summary   | Page (last page only | /) ▶                       |   |

| CHEDULE D (FEC Form 3X)  |                      |                    | (Use separate PAGE 10 OF   |   |  |  |  |  |
|--|----------------------|--------------------|----------------------------|---|--|--|--|--|
| EBTS AND OBLIGATIONS   |                      |                    | schedule(s)                | FOR LINE NUMBER:  |  |  |  |  |
| cluding Loans  |                      |                    | for each<br>numbered line) | (check only one) 9<br>X 10  |  |  |  |  |
| AME OF COMMITTEE (In Full)<br>Service Employees International Uni        | on PEA - Feder       | ral                |                            | · · · ·   |  |  |  |  |
| A. Full Name (Last, First, Middle Initial) of Debto                      | r or Creditor        |                    |                            | )<br>Debt (Purpose):  |  |  |  |  |
| One Pennsylvania   |                      |                    | Advocacy)                  | Bird-dogging & Rallies (Non-Express   |  |  |  |  |
| Mailing Address 1500 North Second Street, Suite                          | 11                   |                    |                            |   |  |  |  |  |
| City State   | Zip Code             |                    |                            |   |  |  |  |  |
| Harrisburg   | PA 17                | 7102               |                            |   |  |  |  |  |
| Outstanding Balance Beginning This Period<br>19605.00                    |                      |                    | Transacti                  | on ID : D298042   |  |  |  |  |
|  | Dermont T            | This Devied        | O data a d                 | Delegando de Classo de This Desis   |  |  |  |  |
| Amount Incurred This Period Payment This Period                          |                      |                    |                            | ng Balance at Close of This Perio   |  |  |  |  |
| 0.00   |                      | 0.00               |                            | 19605.00  |  |  |  |  |
| B. Full Name (Last, First, Middle Initial) of Debtor<br>Our DC           | or Creditor          |                    |                            | ebt (Purpose):<br>3ird-dogging & Rallies (Non-Expres  |  |  |  |  |
|  |                      |                    | Advocacy)                  |   |  |  |  |  |
| Mailing Address 1800 Massachusetts Ave NW                                |                      |                    |                            |   |  |  |  |  |
| City State   | Zip Code             |                    |                            |   |  |  |  |  |
| Washington   | DC 20                | 0036               | <b></b>                    |   |  |  |  |  |
| Outstanding Balance Beginning This Period<br>45453.00                    |                      |                    | Iransac                    | tion ID : D297985   |  |  |  |  |
| Amount Incurred This Period  | Payment T            | his Period         | Outstandi                  | ng Balance at Close of This Perio   |  |  |  |  |
| 0.00   |                      | 0.00               |                            | 45453.00  |  |  |  |  |
|  |                      |                    |                            | -/J   |  |  |  |  |
| C. Full Name (Last, First, Middle Initial) of Debto<br>SEIU General Fund | r or Creditor        |                    |                            | bebt (Purpose):<br>ent for salary and other canvass-  |  |  |  |  |
|  |                      |                    |                            | penses from 6/20-9/30, bird-dogging   |  |  |  |  |
| Mailing Address 1800 Massachusetts Ave NW                                |                      |                    |                            |   |  |  |  |  |
| City<br>Washington   | State Zip<br>DC 200  | Code               |                            |   |  |  |  |  |
| Outstanding Balance Beginning This Period                                |                      |                    | Transaci                   | tion ID : D285704   |  |  |  |  |
| 5151676.40   |                      |                    | Tranouo                    |   |  |  |  |  |
| Amount Incurred This Period  | Payment T            | his Poriod         | Outstandi                  | ng Balance at Close of This Peric   |  |  |  |  |
|  |                      | 0.00               |                            | 5151676.40  |  |  |  |  |
|  |                      | 0.00               |                            | 5151070.40  |  |  |  |  |
| SUBTOTALS This Pariod This Page (optional)                               |                      |                    |                            | 5216734.40  |  |  |  |  |
| SUBTOTALS This Period This Page (optional)                               |                      |                    |                            |   |  |  |  |  |
| ) TOTALS This Period (last page this line number                         | only)                |                    | <u>►</u>                   | T         T <tht< th=""> <tht< th=""> <tht< th=""> <tht< th=""></tht<></tht<></tht<></tht<> |  |  |  |  |
| ) TOTAL OUTSTANDING LOANS from Schedule                                  | C (last page only)   |                    | <u> </u>                   |   |  |  |  |  |
| ADD 2) and 3) and carry forward to appropriate                           | line of Summary Page | e (last page only) | ►                          |   |  |  |  |  |

| CHEDULE D (FEC Form 3X)   |                   | (Use separate PAGE 11 C |                            |  |  |  |
|---|-------------------|-------------------------|----------------------------|--|--|--|
| EBTS AND OBLIGATIONS  |                   |                         | schedule(s)                |  |  |  |
| cluding Loans   |                   |                         | for each<br>numbered line) | (check only one) 9<br>X 10             |  |  |
| ME OF COMMITTEE (In Full)<br>ervice Employees International Un                  | ion PEA - F       | ederal                  | 1                          |  |  |  |
| A. Full Name (Last, First, Middle Initial) of Debt                              | or or Creditor    |                         |                            | ebt (Purpose):                         |  |  |
| SEIU General Fund   |                   |                         | from 6/11-                 | other canvass-related expenses<br>9/30 |  |  |
| Mailing Address 1800 Massachusetts Ave NW                                       |                   |                         |                            |  |  |  |
| City State  | Zip Code          |                         |                            |  |  |  |
| Washington  | DC                | 20036                   |                            |  |  |  |
| Outstanding Balance Beginning This Period                                       |                   |                         | Transact                   | on ID : D286612                        |  |  |
| 3371597.26  |                   |                         |                            |  |  |  |
| Amount Incurred This Period   | Paym              | ent This Period         | Outstandi                  | ng Balance at Close of This Peric      |  |  |
| 0.00  |                   | (                       | 0.00                       | 3371597.26                             |  |  |
| B. Full Name (Last, First, Middle Initial) of Debto                             | r or Creditor     |                         | Nature of D                | ebt (Purpose):                         |  |  |
| SEIU Healthcare Wisconsin   |                   |                         | Canvass, E<br>Advocacy)    | Bird-dogging & Rallies (Non-Expres     |  |  |
| Mailing Address 4513 Vernon Blvd Suite 300                                      |                   |                         |                            |  |  |  |
| City State  | Zip Code          |                         |                            |  |  |  |
| Madison   | WI                | 53705                   |                            |  |  |  |
| Outstanding Balance Beginning This Period                                       |                   |                         | Transac                    | tion ID : D298020                      |  |  |
| 91165.13  |                   |                         |                            |  |  |  |
| Amount Incurred This Period   | Paym              | ent This Period         | Outstandi                  | ng Balance at Close of This Peric      |  |  |
| 0.00  | ,                 | (                       | 0.00                       | 91165.13                               |  |  |
| C. Full Name (Last, First, Middle Initial) of Debt<br>SEIU Healthcare Wisconsin | or or Creditor    |                         |                            | Pebt (Purpose):<br>GOTV Activities     |  |  |
| SEIO Healthcare Wisconsin   |                   |                         | Canvass                    |  |  |  |
| Mailing Address 4513 Vernon Blvd Suite 300                                      |                   |                         |                            |  |  |  |
| City  | State             | Zip Code                |                            |  |  |  |
| Madison   | WI                | 53705                   |                            |  |  |  |
| Outstanding Balance Beginning This Period                                       |                   |                         | Transac                    | tion ID : D304201                      |  |  |
| 20000.00  |                   |                         |                            |  |  |  |
| Amount Incurred This Period   | Paym              | ent This Period         | Outstandi                  | ng Balance at Close of This Perio      |  |  |
| 0.00  |                   | 7                       | 0.00                       | 20000.00                               |  |  |
| SUBTOTALS This Period This Page (optional)                                      |                   |                         |                            | 3482762.39                             |  |  |
| TOTALS This Period (last page this line numbe                                   |                   |                         |                            | 7 7 7 7                                |  |  |
|   |                   |                         |                            | 7 1 7 1 1 7                            |  |  |
| TOTAL OUTSTANDING LOANS from Schedule   | C (last page only | /)                      |                            | ····································   |  |  |
| ADD 2) and 3) and carry forward to appropriate                                  | e line of Summary | Page (last page c       | only) 🕨                    |  |  |  |

| SCHEDULE D (FEC Form 3X)                                    |  |                         |  | PAGE 12 OF 14                                |  |  |  |
|---|--|-------------------------|--|--|--|--|--|
| ((  |  | Use separate            |  |  |  |  |  |
| DEBTS AND OBLIGATIONS                                       |  | schedule(s)<br>for each | FOR LINE NUMBER:<br>(check only one) 9 |  |  |  |  |
| Excluding Loans   |  | nı                      | umbered line)                          | (check only one) 9<br>X 10                   |  |  |  |
| NAME OF COMMITTEE (In Full)                                 |  |                         |  |  |  |  |  |
| Service Employees International Un                          | ion PEA - Fe   | deral                   |  |  |  |  |  |
| A. Full Name (Last, First, Middle Initial) of Debto         | A. Full Name (Last, First, Middle Initial) of Debtor or Creditor |                         |  |  |  |  |  |
| SEIU Local 1199 WOK   |  |                         | Canvass, E<br>Advocacy)                | Bird-dogging & Rallies (Non-Express          |  |  |  |
| Mailing Address 1395 Dublin Road                            |  |                         |  |  |  |  |  |
| City State  | Zip Code   |                         |  |  |  |  |  |
| Columbus  | OH   | 43215                   |  |  |  |  |  |
| Outstanding Balance Beginning This Period                   |  |                         | Transacti                              | on ID : D297979                              |  |  |  |
|   |  |                         |  |  |  |  |  |
| 14907.00  |  |                         |  |  |  |  |  |
| Amount Incurred This Period                                 | Payme  | nt This Period          | Outstandir                             | ng Balance at Close of This Period           |  |  |  |
| 0.00  |  | 0.00                    |  | 14907.00                                     |  |  |  |
|   |  | ,                       |  | 7  |  |  |  |
| B. Full Name (Last, First, Middle Initial) of Debtor        | or Creditor  |                         | Nature of D                            | ebt (Purpose):                               |  |  |  |
| SEIU Local 3  |  |                         |  | Canvass, Bird-dogging & Rallies (Non-Express |  |  |  |
|   |  |                         |  |  |  |  |  |
| Mailing Address 4 Bunker Hill Industrial Park               |  |                         |  |  |  |  |  |
| City State  | Zip Code   |                         |  |  |  |  |  |
| Boston  | MA   | 02129                   |  |  |  |  |  |
| Outstanding Balance Beginning This Period                   |  |                         | Transact                               | ion ID : D297935                             |  |  |  |
| 22595.00  |  |                         |  |  |  |  |  |
| 22395.00  |  |                         |  |  |  |  |  |
| Amount Incurred This Period                                 | Payme  | nt This Period          | Outstandir                             | ng Balance at Close of This Period           |  |  |  |
| 0.00  |  | 0.00                    |  | 22595.00                                     |  |  |  |
|   |  |                         |  | 7 7 7  |  |  |  |
| C. Full Name (Last, First, Middle Initial) of Debto         | C. Full Name (Last, First, Middle Initial) of Debtor or Creditor |                         |  | ebt (Purpose):                               |  |  |  |
| The Pivot Group   |  |                         | Voter Canv                             | Voter Canvass Literature                     |  |  |  |
|   | -  |                         |  |  |  |  |  |
| Mailing Address 1720 I Street, NW Suite 550                 | Mailing Address 1720 I Street, NW Suite 550                      |                         |  |  |  |  |  |
| City  | State  | Zip Code                |  |  |  |  |  |
| Washington  | DC   | 20006                   |  |  |  |  |  |
| Outstanding Balance Beginning This Period                   |  |                         | Transact                               | ion ID : D304200                             |  |  |  |
| 11986.66  |  |                         | Tunouot                                |  |  |  |  |
|   | _  |                         | -                                      |  |  |  |  |
| Amount Incurred This Period                                 | Payme  | nt This Period          | Outstandir                             | ng Balance at Close of This Period           |  |  |  |
| 0.00  |  | 0.00                    |  | 11986.66                                     |  |  |  |
|   |  |                         |  |  |  |  |  |
|   |  |                         |  | 49488.66                                     |  |  |  |
| 1) SUBTOTALS This Period This Page (optional)               |  | ····· •                 |  | 49400.00                                     |  |  |  |
| 2) TOTALS This Period (last page this line number           | (vluv)   |                         |  |  |  |  |  |
|   | 2) TOTALS This Period (last page this line number only)          |                         |  |  |  |  |  |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) |  |                         |  |  |  |  |  |
|   |  |                         |  |  |  |  |  |
| 4) ADD 2) and 3) and carry forward to appropriate           | line of Summary  | Page (last page only)   |  | -y   |  |  |  |

| ~~                    |  |  |   |  |  |  |
|-----------------------|--|--|---|--|--|--|
| SC                    | HEDULE D (FEC Form 3X)   |  | (Use separate   | PAGE 13 OF 14  |  |  |
| DEBTS AND OBLIGATIONS |  |  | schedule(s)   | FOR LINE NUMBER:   |  |  |
|                       |  |  | for each  | (check only one) 9   |  |  |
|                       |  |  | numbered line)  | X 10   |  |  |
|                       | ME OF COMMITTEE (In Full)  |  |   |  |  |  |
| 12                    | ervice Employees International U   | nion PEA - Federal   |   |  |  |  |
|                       | A. Full Name (Last, First, Middle Initial) of De   | ptor or Creditor   | Nature of D   | ebt (Purpose):   |  |  |
|                       |  | Canvass, E   | Canvass, Bird-dogging & Rallies (Non-Express<br>Advocacy) |  |  |  |
|                       | United for New York, Inc.  | Advocacy)  |   |  |  |  |
|                       | Mailing Address 330 W 42nd Street, Suite 900   |  |   |  |  |  |
|                       |  |  |   |  |  |  |
|                       | City State   | Zip Code   |   |  |  |  |
|                       | New York   | NY 10036   |   |  |  |  |
|                       | Outstanding Balance Beginning This Period  |  | Transacti   | on ID : D298028  |  |  |
|                       |  |  |   |  |  |  |
|                       | 11101.00   |  |   |  |  |  |
|                       | Amount Incurred This Period  | Payment This Period  | Outstandir  | ng Balance at Close of This Period   |  |  |
|                       | 0.00   |  |   | 11101.00   |  |  |
|                       | 0.00   |  | 0.00  | 11101.00   |  |  |
|                       | B. Full Name (Last, First, Middle Initial) of Deb  | tor or Creditor  | Network of D  |  |  |  |
|                       |  |  |   | Nature of Debt (Purpose):<br>Canvass, Bird-dogging & Rallies   |  |  |
|                       | Working Families Organizatior  | 1, INC.  | Gairvass, E   |  |  |  |
|                       | Mailing Address 2 Nevins Street  |  |   |  |  |  |
|                       | 2 Nevins Street  |  |   |  |  |  |
|                       | City State   | Zip Code   |   |  |  |  |
|                       | Brooklyn   | NY 11217-1010  |   |  |  |  |
|                       |  |  |   |  |  |  |
|                       | Outstanding Balance Beginning This Period  |  | Transact  | ion ID + D200055   |  |  |
|                       | Outstanding Balance Beginning This Period  |  | Transact  | ion ID : D300055   |  |  |
|                       | Outstanding Balance Beginning This Period<br>54104.52  |  | Transact  | ion ID : D300055   |  |  |
|                       |  | Payment This Period  |   |  |  |  |
|                       | 54104.52<br>Amount Incurred This Period  |  | Outstandir  | ng Balance at Close of This Period   |  |  |
|                       | 54104.52   |  |   |  |  |  |
|                       | 54104.52<br>Amount Incurred This Period<br>0.00  | 0  | Outstandir  | ng Balance at Close of This Period<br>54104.52   |  |  |
|                       | 54104.52<br>Amount Incurred This Period  | 0  | Outstandir  | ng Balance at Close of This Period   |  |  |
|                       | 54104.52<br>Amount Incurred This Period<br>0.00  | 0  | Outstandir  | ng Balance at Close of This Period<br>54104.52   |  |  |
|                       | 54104.52<br>Amount Incurred This Period<br>0.00<br>C. Full Name (Last, First, Middle Initial) of De  | 0  | Outstandir  | ng Balance at Close of This Period<br>54104.52   |  |  |
|                       | 54104.52<br>Amount Incurred This Period<br>0.00  | 0  | Outstandir  | ng Balance at Close of This Period<br>54104.52   |  |  |
|                       | 54104.52<br>Amount Incurred This Period<br>0.00<br>C. Full Name (Last, First, Middle Initial) of De  | 0  | Outstandir  | ng Balance at Close of This Period<br>54104.52   |  |  |
|                       | C. Full Name (Last, First, Middle Initial) of De   | btor or Creditor   | Outstandir  | ng Balance at Close of This Period<br>54104.52   |  |  |
|                       | C. Full Name (Last, First, Middle Initial) of De<br>Mailing Address  | btor or Creditor   | Outstandir  | ng Balance at Close of This Period<br>54104.52   |  |  |
|                       | C. Full Name (Last, First, Middle Initial) of De   | btor or Creditor   | Outstandir  | ng Balance at Close of This Period<br>54104.52   |  |  |
|                       | C. Full Name (Last, First, Middle Initial) of De<br>Mailing Address  | btor or Creditor   | Outstandir  | ng Balance at Close of This Period<br>54104.52   |  |  |
|                       | C. Full Name (Last, First, Middle Initial) of De<br>Mailing Address  | btor or Creditor   | Outstandin  | ng Balance at Close of This Period<br>54104.52   |  |  |
|                       | 54104.52         Amount Incurred This Period         0.00         C. Full Name (Last, First, Middle Initial) of De         Mailing Address         City         Outstanding Balance Beginning This Period  | btor or Creditor State Zip Code  | Outstandin  | ebt (Purpose):   |  |  |
|                       | 54104.52         Amount Incurred This Period         0.00         C. Full Name (Last, First, Middle Initial) of De         Mailing Address         City         Outstanding Balance Beginning This Period  | btor or Creditor State Zip Code  | Outstandin  | ebt (Purpose):   |  |  |
|                       | 54104.52         Amount Incurred This Period         0.00         C. Full Name (Last, First, Middle Initial) of De         Mailing Address         City         Outstanding Balance Beginning This Period  | btor or Creditor State Zip Code  | Outstandin  | ebt (Purpose):   |  |  |
|                       | 54104.52         Amount Incurred This Period         0.00         C. Full Name (Last, First, Middle Initial) of De         Mailing Address         City         Outstanding Balance Beginning This Period         Amount Incurred This Period  | btor or Creditor           State         Zip Code           Payment This Period      | Outstandin  | ng Balance at Close of This Period<br>54104.52<br>ebt (Purpose):   |  |  |
| 1)                    | 54104.52         Amount Incurred This Period         0.00         C. Full Name (Last, First, Middle Initial) of De         Mailing Address         City         Outstanding Balance Beginning This Period  | btor or Creditor           State         Zip Code           Payment This Period      | Outstandin  | ebt (Purpose):   |  |  |
|                       | 54104.52         Amount Incurred This Period         0.00         C. Full Name (Last, First, Middle Initial) of De         Mailing Address         City         Outstanding Balance Beginning This Period         Amount Incurred This Period         SUBTOTALS This Period This Page (optional)   | btor or Creditor  State Zip Code  Payment This Period                                | Outstandin  | ng Balance at Close of This Period<br>54104.52<br>ebt (Purpose):   |  |  |
| 1)                    | 54104.52         Amount Incurred This Period         0.00         C. Full Name (Last, First, Middle Initial) of De         Mailing Address         City         Outstanding Balance Beginning This Period         Amount Incurred This Period         SUBTOTALS This Period This Page (optional)   | btor or Creditor  State Zip Code  Payment This Period                                | Outstandin  | ng Balance at Close of This Period<br>54104.52<br>ebt (Purpose):   |  |  |
| 2)                    | 54104.52         Amount Incurred This Period         0.00         C. Full Name (Last, First, Middle Initial) of De         Mailing Address         City         Outstanding Balance Beginning This Period         Amount Incurred This Period         SUBTOTALS This Period This Page (optional)         TOTALS This Period (last page this line number) | btor or Creditor           State         Zip Code           Payment This Period      | Outstandin  | ng Balance at Close of This Period<br>54104.52<br>ebt (Purpose):   |  |  |
| 2)                    | 54104.52         Amount Incurred This Period         0.00         C. Full Name (Last, First, Middle Initial) of De         Mailing Address         City         Outstanding Balance Beginning This Period         Amount Incurred This Period         SUBTOTALS This Period This Page (optional)   | btor or Creditor           State         Zip Code           Payment This Period      | Outstandin  | ng Balance at Close of This Period<br>54104.52<br>ebt (Purpose):<br>ng Balance at Close of This Period<br>65205.52<br>9048590.19 |  |  |
| 2)                    | 54104.52         Amount Incurred This Period         0.00         C. Full Name (Last, First, Middle Initial) of De         Mailing Address         City         Outstanding Balance Beginning This Period         Amount Incurred This Period         SUBTOTALS This Period This Page (optional)         TOTALS This Period (last page this line number) | State       Zip Code         Payment This Period         Der only)         ber only) | Outstandin  | ng Balance at Close of This Period<br>54104.52<br>ebt (Purpose):<br>ng Balance at Close of This Period<br>65205.52<br>9048590.19 |  |  |

## SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|   | MIZED INDEPENDENT EXPENDITORES  |                |                      |       | AGE 14<br>OR LINE 2   | OF 14<br>24 OF FORM 3X |  |
|---|---|----------------|----------------------|-------|---|------------------------|--|
| NAME OF COMMITTEE (In Full)                         |   |                |                      |       |   |                        |  |
| S   | ervice Employees International Union PEA - Federal  |                | С                    | ; C   | 00523621  |                        |  |
| Ch  | eck if24-hour report48-hour report New report Amends repo   | ort filed o    | on                   | 1     | D D /   | Y Y Y Y Y Y            |  |
|   | Full Name (Last, First, Middle Initial) of Payee  |                | Data                 |       |   |                        |  |
|   | Mission Control Inc   |                | Date                 |       |   | Y Y Y Y                |  |
|   | Malling Address   |                | 12                   | /     | 28  | 2012                   |  |
|   | Mailing Address 114A Mansfield Hollow Road  |                | Amount               |       |   |                        |  |
|   | City State Zip Code   |                | Amount               | _     |   |                        |  |
|   | City     State     Zip Code       Mansfield Center     CT     06250   |                |                      | -     |   | 2325.00                |  |
|   | Durpose of Expanditure  |                | ransactio<br>Sought: |       | D307698<br>House  | State:                 |  |
|   | Payment for Voter Canvass Literature Disclosed on 11/5 24-HR  | Onice          | Sought.              |       | Senate  |                        |  |
|   | Notice & Post-General Rpt.  | _              |                      |       | President   | District:              |  |
|   | Name of Federal Candidate Supported or Opposed by Expenditure:<br>BARACK OBAMA  | Check          | One:                 | ~ `   | Support   | Oppose                 |  |
|   |   |                |                      |       |   |                        |  |
|   | Calendar Year-To-Date Per Election  | Disbur<br>2012 | sement Fo            |       | Primary   | K General              |  |
|   | for Office Sought   |                | Other                | (spec | ify) ▶  |                        |  |
|   | Full Name (Last, First, Middle Initial) of Payee  |                | Date                 |       |   |                        |  |
|   | Mission Control Inc   |                | M                    | /     | D D /   | YYYYY                  |  |
|   | Mailing Address 114A Mansfield Hollow Road  |                | 12                   |       | 28  | 2012                   |  |
|   |   |                | Amount               |       |   |                        |  |
|   | City State Zip Code   |                |                      |       |   |                        |  |
|   | Mansfield Center CT 06250   | -              |                      | -7-   | D007000   | 2325.00                |  |
|   | Purpose of Expenditure  |                | ransactio<br>Sought: |       | House   | State: WI              |  |
|   | Payment for Voter Canvass Literature Disclosed on 11/5 24-HR Type 004   |                |                      | X     | Senate  | District:              |  |
|   | Name of Federal Candidate Supported or Opposed by Expenditure:  | -              |                      |       | President   |                        |  |
|   | Tammy Baldwin   | Check          | One:                 | Х     | Support   | Oppose                 |  |
|   |   | Disbur         | sement Fo            | or:   | Primary   | General                |  |
|   | Calendar Year-To-Date Per Election<br>for Office Sought 343406.51   | 2012           | Other                |       |   |                        |  |
|   |   |                | Other                | (spec | <sup>™y</sup> ) ►   |                        |  |
|   |   |                |                      | _     |   |                        |  |
|   | (a) SUBTOTAL of Itemized Independent Expenditures   | - •            |                      |       | -7-   | 4650.00                |  |
|   |   |                |                      | _     |   |                        |  |
| (b) SUBTOTAL of Unitemized Independent Expenditures |   |                |                      |       |   |                        |  |
|   |   |                |                      |       | , in the second s |                        |  |
|   | (c) TOTAL Independent Expenditures  |                |                      |       |   | 4650.00                |  |
|   |   |                |                      | ,     |   |                        |  |
| ١   | Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent o party committee) any political party committee or its agent. |                |                      |       |   |                        |  |
|   | Eliseo Medina   |                | M                    | D -   | /   | YY                     |  |
|   | [Electronically Filed] Date   | e 04           |                      | 8     | 201   |                        |  |
|   | Signature   |                |                      |       |   |                        |  |

FEC Schedule E (Form 3X) Rev. 07/2011