

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 1
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) INTERNATIONAL ASSOCIATION OF FIREFIGHTERS INTERESTED IN REGISTRATION AND EDUCATION PAC		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00029447 </div>
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>		

Full Name of Payee Waterfront Strategies		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y 08 / 22 / 2014 </div>	
Mailing Address 3050 K Street, NW Suite 100		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> 14555.00 </div>	
City Washington	State DC	Zip Code 20007	Transaction ID : D27071 Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y 08 / 13 / 2014 </div>
Purpose of Expenditure Television Advertising Production		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate DAN SULLIVAN		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> 164000.00 </div>	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate		District: _____ State: AK	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		2014 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee Waterfront Strategies		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y 08 / 22 / 2014 </div>	
Mailing Address 3050 K Street, NW Suite 100		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> 149445.00 </div>	
City Washington	State DC	Zip Code 20007	Transaction ID : D27070 Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y 08 / 21 / 2014 </div>
Purpose of Expenditure Television Advertising Buy		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate DAN SULLIVAN		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> 164000.00 </div>	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate		District: _____ State: AK	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		2014 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">164000.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">164000.00</div>

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.

Thomas H Miller

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2014

Signature