

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 1
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC)

FEC IDENTIFICATION NUMBER ▼

C C00364158

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

MAMMEN GROUP, INC.

Date

M M M / D D D / Y Y Y Y Y Y
09 / 26 / 2012

Mailing Address 1901 L STREET, NW

City
WASHINGTONState
DCZip Code
20036

Amount

28999.68

Transaction ID : SE.28188

Purpose of Expenditure
MAILINGCategory/
Type

Office Sought:

☒ House

State: CA

☐ Senate

District: 15

☐ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

FORTNEY H. 'PETE' STARK

Calendar Year-To-Date Per Election
for Office Sought

28999.68

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Date

M M M / D D D / Y Y Y Y Y Y

Mailing Address

Amount

Purpose of Expenditure

Category/
Type

Office Sought:

☐ House

State:

☐ Senate

District:

☐ President

Check One:

☐ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Calendar Year-To-Date Per Election
for Office SoughtDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

28999.68

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

28999.68

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.

STACIE MONROE

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
10 / 23 / 2012

Signature