

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

PAGE 1 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND	FEC IDENTIFICATION NUMBER C C00524454
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date 09 / 16 / 2012
Mailing Address 325 SPRINGSIDE DR		Amount 286.86
City AKRON	State OH	Zip Code 44321
Purpose of Expenditure VOTER CONTACT CALLS	Category/Type 004	Office Sought: <input type="checkbox"/> House State: AL <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 286.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : SE.5936

Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date 09 / 16 / 2012
Mailing Address 325 SPRINGSIDE DR		Amount 41.70
City AKRON	State OH	Zip Code 44321
Purpose of Expenditure VOTER CONTACT CALLS	Category/Type 004	Office Sought: <input type="checkbox"/> House State: AK <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 41.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : SE.5937

(a) SUBTOTAL of Itemized Independent Expenditures.....	328.56
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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.

SCOTT B MACKENZIE

Signature

[Electronically Filed]

Date

09 / 17 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00524454 </div>
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date <div style="border: 1px solid black; padding: 2px;"> 09 / 16 / 2012 </div>
Mailing Address 325 SPRINGSIDE DR		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">379.10</div>
City AKRON State OH Zip Code 44321		
Purpose of Expenditure VOTER CONTACT CALLS	Category/Type 004	Office Sought: <input type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 379.10		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : SE.5938

Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date <div style="border: 1px solid black; padding: 2px;"> 09 / 16 / 2012 </div>
Mailing Address 325 SPRINGSIDE DR		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">173.85</div>
City AKRON State OH Zip Code 44321		
Purpose of Expenditure VOTER CONTACT CALLS	Category/Type 004	Office Sought: <input type="checkbox"/> House State: AR <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 173.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : SE.5939

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">552.95</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </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.

SCOTT B MACKENZIE

[Electronically Filed]

Signature _____ Date 09 / 17 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND	FEC IDENTIFICATION NUMBER C C00524454
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date MM / DD / YYYY 09 / 16 / 2012
Mailing Address 325 SPRINGSIDE DR		Amount 1175.60
City AKRON	State OH	Zip Code 44321
Purpose of Expenditure VOTER CONTACT CALLS	Category/Type 004	Office Sought: <input type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1175.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : SE.5944

Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date MM / DD / YYYY 09 / 16 / 2012
Mailing Address 325 SPRINGSIDE DR		Amount 571.71
City AKRON	State OH	Zip Code 44321
Purpose of Expenditure VOTER CONTACT CALLS	Category/Type 004	Office Sought: <input type="checkbox"/> House State: GA <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 571.71		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : SE.5945

(a) SUBTOTAL of Itemized Independent Expenditures.....	1747.31
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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 SCOTT B MACKENZIE [Electronically Filed] Date MM / DD / YYYY
09 / 17 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00524454 </div>
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date <div style="border: 1px solid black; padding: 2px;"> 09 / 16 / 2012 </div>
Mailing Address 325 SPRINGSIDE DR		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">182.46</div>
City AKRON State OH Zip Code 44321		
Purpose of Expenditure VOTER CONTACT CALLS	Category/Type 004	Office Sought: <input type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 182.46		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : SE.5950

Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date <div style="border: 1px solid black; padding: 2px;"> 09 / 16 / 2012 </div>
Mailing Address 325 SPRINGSIDE DR		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">167.59</div>
City AKRON State OH Zip Code 44321		
Purpose of Expenditure VOTER CONTACT CALLS	Category/Type 004	Office Sought: <input type="checkbox"/> House State: KS <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 167.59		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : SE.5951

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">350.05</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </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.

SCOTT B MACKENZIE

Signature [Electronically Filed] Date 09 / 17 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND		FEC IDENTIFICATION NUMBER C C00524454
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee
INFOCISION MANAGEMENT CORP

Date
MM / DD / YYYY
09 / 16 / 2012

Mailing Address 325 SPRINGSIDE DR

Amount
107.90

City State Zip Code
AKRON OH 44321

Transaction ID : SE.5962

Purpose of Expenditure
VOTER CONTACT CALLS

Category/Type 004

Office Sought: House State: NE
 Senate District: 00
 President

Name of Federal Candidate Supported or Opposed by Expenditure:
BARAK HUSSEIN OBAMA

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
107.90

Disbursement For: Primary General
2012 Other (specify)

Full Name (Last, First, Middle Initial) of Payee
INFOCISION MANAGEMENT CORP

Date
MM / DD / YYYY
09 / 16 / 2012

Mailing Address 325 SPRINGSIDE DR

Amount
160.74

City State Zip Code
AKRON OH 44321

Transaction ID : SE.5963

Purpose of Expenditure
VOTER CONTACT CALLS

Category/Type 004

Office Sought: House State: NV
 Senate District: 00
 President

Name of Federal Candidate Supported or Opposed by Expenditure:
BARAK HUSSEIN OBAMA

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
160.74

Disbursement For: Primary General
2012 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	268.64
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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.

SCOTT B MACKENZIE

[Electronically Filed]

Date MM / DD / YYYY
09 / 17 / 2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00524454 </div>
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 09 / 16 / 2012 </div>
Mailing Address 325 SPRINGSIDE DR		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 575.10 </div>
City AKRON State OH Zip Code 44321	Transaction ID : SE.5968	
Purpose of Expenditure VOTER CONTACT CALLS	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;"> 004 </div>	Office Sought: <input type="checkbox"/> House State: NC <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 575.10 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 09 / 16 / 2012 </div>
Mailing Address 325 SPRINGSIDE DR		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 41.58 </div>
City AKRON State OH Zip Code 44321	Transaction ID : SE.5969	
Purpose of Expenditure VOTER CONTACT CALLS	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;"> 004 </div>	Office Sought: <input type="checkbox"/> House State: ND <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 41.58 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 616.68 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </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.

SCOTT B MACKENZIE
 Signature _____ [Electronically Filed] Date
M M / D D / Y Y Y Y Y Y
09 / 17 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND	FEC IDENTIFICATION NUMBER C C00524454
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date MM / DD / YYYY 09 / 16 / 2012
Mailing Address 325 SPRINGSIDE DR		Amount 48.46
City AKRON	State OH	Zip Code 44321
Purpose of Expenditure VOTER CONTACT CALLS	Category/Type 004	Office Sought: <input type="checkbox"/> House State: SD <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 48.46		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : SE.5976

Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date MM / DD / YYYY 09 / 16 / 2012
Mailing Address 325 SPRINGSIDE DR		Amount 383.30
City AKRON	State OH	Zip Code 44321
Purpose of Expenditure VOTER CONTACT CALLS	Category/Type 004	Office Sought: <input type="checkbox"/> House State: TN <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 383.30		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : SE.5977

(a) SUBTOTAL of Itemized Independent Expenditures.....	431.76
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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.

SCOTT B MACKENZIE

Signature

[Electronically Filed]

Date

MM / DD / YYYY
09 / 17 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00524454 </div>
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date <div style="border: 1px solid black; padding: 2px;"> 09 / 16 / 2012 </div>
Mailing Address 325 SPRINGSIDE DR		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1460.53</div>
City AKRON State OH Zip Code 44321		
Purpose of Expenditure VOTER CONTACT CALLS	Category/Type 004	Office Sought: <input type="checkbox"/> House State: TX <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1460.53</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : SE.5978

Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date <div style="border: 1px solid black; padding: 2px;"> 09 / 16 / 2012 </div>
Mailing Address 325 SPRINGSIDE DR		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">151.17</div>
City AKRON State OH Zip Code 44321		
Purpose of Expenditure VOTER CONTACT CALLS	Category/Type 004	Office Sought: <input type="checkbox"/> House State: UT <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">151.17</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : SE.5979

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">1611.70</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </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.

SCOTT B MACKENZIE

Signature _____ [Electronically Filed] Date 09 / 17 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00524454 </div>
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date <div style="border: 1px solid black; padding: 2px;"> 09 / 16 / 2012 </div>
Mailing Address 325 SPRINGSIDE DR		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 40.01 </div>
City AKRON State OH Zip Code 44321	Transaction ID : SE.5986	
Purpose of Expenditure VOTER CONTACT CALLS	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;"> 004 </div>	Office Sought: <input type="checkbox"/> House State: DC <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 40.01 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee		Date <div style="border: 1px solid black; padding: 2px;"> / / </div>
Mailing Address		Amount <div style="border: 1px solid black; padding: 2px;"> </div>
City State Zip Code	Transaction ID : SE.5986	
Purpose of Expenditure	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;"> </div>	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"> </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 40.01 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 18548.03 </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.

SCOTT B MACKENZIE
 Signature _____

[Electronically Filed] Date 09 / 17 / 2012