

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 2  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (in Full) <b>Democratic Senatorial Campaign Committee</b>	FEC IDENTIFICATION NUMBER <b>C 00042366</b>
--	--

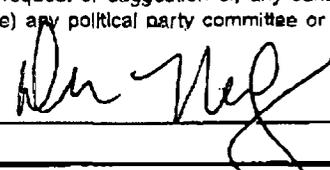
Check if  24-hour report  48-hour report  New report  Amends report filed on

Full Name (Last, First, Middle Initial) of Payee <b>Grunwald Communications</b>	Date MM / DD / YYYY <b>10 / 27 / 2012</b>
Mailing Address <b>1306 30th Street, N.W.</b>	Amount <b>11374.00</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20007</b>	Transaction ID: <b>SE-79355</b>
Purpose of Expenditure <b>Media Production Estimate</b> Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <b>CT</b> District: <b>00</b>
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Linda McMahon</b>	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>3263600.60</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee <b>Ralston Lapp Media</b>	Date MM / DD / YYYY <b>10 / 27 / 2012</b>
Mailing Address <b>1054 31st Street, NW</b> <b>Suite 430</b>	Amount <b>12877.12</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20007</b>	Transaction ID: <b>SE-79395</b>
Purpose of Expenditure <b>Media Production Estimate</b> Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <b>WI</b> District: <b>00</b>
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Tommy Thompson</b>	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>5685774.91</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>24251.12</b>
(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  Date **10 / 28 / 2012**

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 2 OF 2  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Democratic Senatorial Campaign Committee</b>	FEC IDENTIFICATION NUMBER <b>C00042366</b>
--	---

Check If  24-hour report  48-hour report  New report  Amends report filed on

Full Name (Last, First, Middle Initial) of Payee <b>Ralston Lapp Media</b>	Date MM / DD / YYYY <b>10 / 27 / 2012</b>
---	---

Mailing Address **1054 31st Street, NW  
Suite 430**

City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20007</b>	Amount <b>2709.00</b>
---------------------------	--------------------	--------------------------	--------------------------

Purpose of Expenditure <b>Media Production Estimate</b>	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: <b>WI</b> District: <b>00</b>
--	---------------	---	---

Name of Federal Candidate Supported or Opposed by Expenditure:  
**Tommy Thompson**

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought <b>5685774.91</b>	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
--	------

Mailing Address

City	State	Zip Code	Amount
------	-------	----------	--------

Purpose of Expenditure	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:
------------------------	---------------	---	---------------------

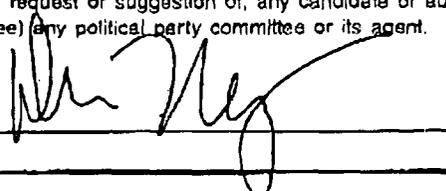
Name of Federal Candidate Supported or Opposed by Expenditure:

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
--	---

(a) SUBTOTAL of Itemized Independent Expenditures.....	2709.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures.....	26960.12

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 

Date **10 / 28 / 2012**

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE  
 FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked Delivery Confirmation™ Label <input type="checkbox"/>
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt

<input checked="" type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
--	-------------------------------

The document preceding this page was received by FAX at the FEC. The receiving FAX machine has printed at the bottom of each page the date and time of receipt, the phone number of the transmitting machine and the sequential page numbers.

N/A  
 PREPARER

N/A  
 DATE PREPARED