

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

PAGE 1 OF 2
FOR SE OF FORM 24/48

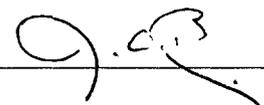
NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN SENATORIAL COMMITTEE	FEC IDENTIFICATION NUMBER C00027466				
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	<table border="1" style="width:100%"> <tr> <td>M M / D D / Y Y Y Y</td> <td>M M / D D / Y Y Y Y</td> </tr> <tr> <td> / / 2012</td> <td>09 / 17 / 2012</td> </tr> </table>	M M / D D / Y Y Y Y	M M / D D / Y Y Y Y	/ / 2012	09 / 17 / 2012
M M / D D / Y Y Y Y	M M / D D / Y Y Y Y				
/ / 2012	09 / 17 / 2012				

Full Name (Last, First, Middle Initial) of Payee STRATEGIC MEDIA SERVICES, INC.	Date 09 / 17 / 2012
Mailing Address 3299 K ST., NW SUITE 200	Amount 22959.06
City WASHINGTON State DC Zip Code 20007	Transaction ID : SE24-0.019149
Purpose of Expenditure MEDIA	Office Sought: <input type="checkbox"/> House State: IN <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOSEPH SIMON DONNELLY SR.	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 740073.64	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee STRATEGIC MEDIA SERVICES, INC.	Date 09 / 19 / 2012
Mailing Address 3299 K ST., NW SUITE 200	Amount 53000.00
City WASHINGTON State DC Zip Code 20007	Transaction ID : SE24-0.019273
Purpose of Expenditure PRODUCTION	Office Sought: <input type="checkbox"/> House State: IN <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOSEPH SIMON DONNELLY SR.	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 740073.64	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	675959.06
(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.

JAY C BANNING
Signature 

Date 09 / 20 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN SENATORIAL COMMITTEE	FEC IDENTIFICATION NUMBER C00027466
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Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee STRATEGIC MEDIA SERVICES, INC.		Date M M / D D / Y Y Y Y 09 / 20 / 2012
Mailing Address 3299 K ST., NW SUITE 200		Amount 37500.00
City WASHINGTON	State DC	Zip Code 20007
Purpose of Expenditure PRODUCTION	Category/Type	Office Sought: <input type="checkbox"/> House State: IN <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOSEPH SIMON DONNELLY SR.		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 740073.64		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : SE24-0.019292

Full Name (Last, First, Middle Initial) of Payee		Date
Mailing Address		Amount
City	State	Zip Code
Purpose of Expenditure	Category/Type	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		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	37500.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	713459.06

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.

JAY C BANNING

Signature Date M M / D D / Y Y Y Y
09 / 20 / 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.

Hand Delivered

Date of Receipt
8/20/2012

USPS First Class Mail

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USPS Registered/Certified

Postmarked (R/C)

USPS Priority Mail

Postmarked

Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail

Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify):

Shipping Date

Next Business Day Delivery

Received from House Records & Registration Office

Date of Receipt

Received from Senate Public Records Office

Date of Receipt

Received from Electronic Filing Office

Date of Receipt

Other (Specify):

Date of Receipt or Postmarked

PREPARER
(3/2005)

TV

8/20/2012
DATE PREPARED