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

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	
Ending Spending Action Fund	FEC IDENTIFICATION NUMBER ▼
	C C00489856
Check if Z 24-hour report 48-hour report New report Amends re	eport filed on M = M / D = D / Y = Y = Y
Full Name of Payee	Date of Public Distribution/Dissemination
Advantage Direct	M M / D D / Y Y Y Y
Mailing Address 2300 Clarendon Blvd.	10 24 2014
Suite 303	Amount
City State Zip Code	68000.00
Alexandria VA 22201	Transaction ID : SE.6028  Date of Disbursement or Obligation
Purpose of Expenditure telephone calls  Category/ Type	10 22 / 2014
Name of Federal Candidate Support	Office Sought: House District:
Scott Brown Oppose	President Senate State: NH
Calendar Year-To-Date Per Election for Office Sought	Disbursement For:  Primary  General 2014  Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Crossroads Media, LLC	10 24 2014
Mailing Address 66 Canal Center Plaza	
Suite 555	Amount
City State Zip Code	200000.00
Alexandria VA 22314	Transaction ID : SE.6031  Date of Disbursement or Obligation
Purpose of Expenditure Category/ media placement	10 22 / Y Y Y Y Y
Type	10 22 2014
Name of Federal Candidate Support	Office Sought: House District:
Jeanne Shaheen Oppose	President Senate State: NH
Calendar Year-To-Date Per Election for Office Sought 2440811.11	Disbursement For: Primary General 2014
	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	268000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	····· <b>&gt;</b>
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein we with, or at the request or suggestion of, any candidate or authorized committee or agen party committee) any political party committee or its agent.	
Nancy H. Watkins [Electronically Filed]	ate 10 25 2014
Signature	

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	ar ENDITORIES	PAGE 2 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Ending Spending Action Fund		C C00489856
Check if X 24-hour report 48-hour report	New report Amends re	eport filed on
Full Name of Payee		Date of Public Distribution/Dissemination
Crossroads Media, LLC		10 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 66 Canal Center Plaza		Amount
Suite 555	7in Code	244550.00
City Stat Alexandria VA	'	341550.00  Transaction ID : SE.6032  Date of Disbursement or Obligation
Purpose of Expenditure media placement	Category/ Type	Date of Disbursement of Obligation  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support	Office Sought: House District:
Jeanne Shaheen	X Oppose	President Senate State: NH
Calendar Year-To-Date Per Election for Office Sought	2782361.11	Disbursement For:  Primary  General  Other (specify) ►
Full Name of Payee		Date of Public Distribution/Dissemination
Crossroads Media, LLC		10 24 2014
Mailing Address 66 Canal Center Plaza		Amount
Suite 555		
City State Alexandria VA	•	601825.00 Transaction ID : SE.6033
Purpose of Expenditure media placement	Category/ Type	Date of Disbursement or Obligation  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support	Office Sought: House District:
Jeanne Shaheen	∑ Oppose	
Calendar Year-To-Date Per Election for Office Sought	3384186.11	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures		943375.00
(b) SUBTOTAL of Unitemized Independent Expenditures		
		7 7 7
(c) TOTAL Independent Expenditures		····· <b>&gt;</b>
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.		
Nancy H. Watkins Signature	[Electronically Filed]	ate 10 25 2014
5.ga.a.		

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 3 OF 3 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Ending Spending Action Fund	C C00489856	
Check if X 24-hour report 48-hour report New report A	mends report filed on	
Full Name of Payee McCarthy Hennings Media, Inc.	Date of Public Distribution/Dissemination	
Mailing Address 1850 M Street, N.W., #235	10 24 2014	
	Amount	
City State Zip Code	12952.00	
Washington DC 20004	Transaction ID : SE.6030 Date of Disbursement or Obligation	
Purpose of Expenditure media production Category. Type	M M / D D / Y Y Y Y	
Name of Federal Candidate	Support Office Sought: House District:	
Jeanne Shaheen	Oppose President Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought 3397138.11	Disbursement For:  Primary  General  2014  Other (specify) ▶	
Full Name of Payee	Date of Public Distribution/Dissemination	
Spectrum Marketing Companies	10 24 2014	
Mailing Address 95 Eddy Road	Amount	
Suite 101	Amount	
City State Zip Code	159777.60	
Manchester NH 03102	Transaction ID : SE.6029  Date of Disbursement or Obligation	
Purpose of Expenditure direct mail Category.		
Name of Federal Candidate	Support Office Sought: House District:	
Jeanne Shaheen	Oppose President X Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought 2172811.	Disbursement For: Primary ☐ General  2014  Other (specify) ►	
_		
(a) SUBTOTAL of Itemized Independent Expenditures	172729.60	
(b) SUBTOTAL of Unitemized Independent Expenditures	• • • • • • • • • • • • • • • • • • •	
(c) TOTAL Independent Expenditures	1384104.60	
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.		
Nancy H. Watkins [Electronically Filed] Signature	Date 10 25 2014	
Gignataro		