SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

FEC IDENTIFICATION NUMBER ▼

C | C00075820

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Date of Public Distribution/Dissemination
M M / D D / Y Y Y Y

Mailing Address 815 SLATERS LANE

Amount

City	State	Zip Code
ALEXANDRIA	VA	22314

125397.90

Transaction ID : SE24-0.031611
Date of Disbursement or Obligation

Purpose of Expenditure
MEDIA

Category/Type

M M	D D	Y Y Y Y
10	05	2012

Name of Federal Candidate
GARY J MCDOWELL

☐ Support
☒ Oppose

Office Sought: ☒ House District: 01
☐ President ☐ Senate State: MI

Calendar Year-To-Date
Per Election for Office Sought 1056339.84

Disbursement For: ☐ Primary ☒ General
2012
☐ Other (specify) ▶ _____

Full Name of Payee
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Date of Public Distribution/Dissemination
M M / D D / Y Y Y Y

Mailing Address 815 SLATERS LANE

Amount

City	State	Zip Code
ALEXANDRIA	VA	22314

64146.23

Transaction ID : SE24-0.031612
Date of Disbursement or Obligation

Purpose of Expenditure
MEDIA

Category/Type

M M	D D	Y Y Y Y
10	05	2012

Name of Federal Candidate
KATHY COURTNEY HOCHUL

☐ Support
☒ Oppose

Office Sought: ☒ House District: 27
☐ President ☐ Senate State: NY

Calendar Year-To-Date
Per Election for Office Sought 248936.38

Disbursement For: ☐ Primary ☒ General
2012
☐ Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures... ▶ 189544.13

(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.

Keith A Davis

_____ *[Electronically Filed]*
Signature

Date

M M	D D	Y Y Y Y
10	23	2012