

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

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) SEIU COPE (Service Employees International Union Committee On Political Education)	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00004036 </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 Mission Control Inc	Date <div style="border: 1px solid black; padding: 2px;"> 11 / 03 / 2012 </div>
Mailing Address 114A Mansfield Hollow Road	
City Mansfield Center State CT Zip Code 06250	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">4430.50</div>
Transaction ID : D301414	
Purpose of Expenditure Voter Canvass Literature	Category/Type 006
Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA	
Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 4935536.92	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name (Last, First, Middle Initial) of Payee Mission Control Inc	Date <div style="border: 1px solid black; padding: 2px;"> 11 / 03 / 2012 </div>
Mailing Address 114A Mansfield Hollow Road	
City Mansfield Center State CT Zip Code 06250	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">4430.50</div>
Transaction ID : D301416	
Purpose of Expenditure Voter Canvass Literature	Category/Type 006
Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: SHERROD BROWN	
Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 950090.19	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	8861.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	8861.00

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.

Eliseo Medina
 Signature _____ [Electronically Filed] Date 11 / 03 / 2012