

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

PAGE 1 OF 4
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) FAIR SHARE ACTION	FEC IDENTIFICATION NUMBER C C00526673
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 FAIR SHARE ALLIANCE		Date 10 / 24 / 2012
Mailing Address 218 D Street SE, Suite 205		Amount 6.87
City Washington	State DC	Zip Code 20003
Purpose of Expenditure INKIND-STAFFTIME FOR MESSAGE DEVELOPMENT	Category/Type 001	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 30006.87		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : SE.4514

Full Name (Last, First, Middle Initial) of Payee FAIR SHARE ALLIANCE		Date 10 / 29 / 2012
Mailing Address 218 D Street SE, Suite 205		Amount 31.96
City Washington	State DC	Zip Code 20003
Purpose of Expenditure INKIND-STAFFTIME FOR MESSAGE DEVELOPMENT	Category/Type 001	Office Sought: <input type="checkbox"/> House State: CO <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 646166.19		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : SE.4513

(a) SUBTOTAL of Itemized Independent Expenditures.....	38.83
(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.

BRAD MARTIN

Signature _____ [Electronically Filed] Date 10 / 30 / 2012

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

NAME OF COMMITTEE (In Full) FAIR SHARE ACTION	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00526673 </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 WORK FOR PROGRESS	Date <div style="border: 1px solid black; padding: 2px;"> 10 / 29 / 2012 </div>
Mailing Address 1543 WAZEE STREET STE 330	
City State Zip Code DENVER CO 80202	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">14000.00</div>
Purpose of Expenditure DOOR TO DOOR VOTER CONTACT	Category/Type 004
Name of Federal Candidate Supported or Opposed by Expenditure: ALFRED J JR LAWSON	Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">93522.60</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : SE.4510

Full Name (Last, First, Middle Initial) of Payee WORK FOR PROGRESS	Date <div style="border: 1px solid black; padding: 2px;"> 10 / 29 / 2012 </div>
Mailing Address 1543 WAZEE STREET STE 330	
City State Zip Code DENVER CO 80202	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3200.00</div>
Purpose of Expenditure DOOR TO DOOR VOTER CONTACT	Category/Type 004
Name of Federal Candidate Supported or Opposed by Expenditure: HEIDI HEITKAMP	Office Sought: <input type="checkbox"/> House State: ND <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">14000.00</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : SE.4511

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">17200.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>

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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 WORK FOR PROGRESS		Date 10 / 29 / 2012
Mailing Address 1543 WAZEE STREET STE 330		Amount 2000.00
City DENVER	State CO	Zip Code 80202
Purpose of Expenditure DOOR TO DOOR VOTER CONTACT	Category/Type 004	Transaction ID : SE.4512
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 32006.87		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		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		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.....	2000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	172238.83

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BRAD MARTIN
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