



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**National Association of Realtors Congressional Fund**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="2734.00"/>	<input type="text" value="2734.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1552039.61"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="323236.64"/>	<input type="text" value="2833880.32"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="1875276.25"/>	<input type="text" value="2836614.32"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1824027.64"/>	<input type="text" value="2785365.71"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="51248.61"/>	<input type="text" value="51248.61"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**National Association of Realtors Congressional Fund**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	300236.64	2810880.32
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	300236.64	2810880.32
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	300236.64	2810880.32
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	23000.00	23000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	323236.64	2833880.32
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	323236.64	2833880.32

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	415741.64	551463.32
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	415741.64	551463.32
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	1408286.00	2233902.39
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1824027.64	2785365.71
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1824027.64	2785365.71

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	300236.64	2810880.32
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	300236.64	2810880.32
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	415741.64	551463.32
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	415741.64	551463.32

: 97 `A-G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFH`ZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XN  
Transaction ID :

For Line 21b of this report, the disbursement to Majority Strategies on 9/28/12 represents advance costs for independent expenditures that were not publicly disseminated during this reporting period, but instead will be disseminated in future reporting periods. For the following items, a negative amount is reflected for each on Line 21b of this report and a corresponding positive amount is reflected on Line 24. For the Line 21b negative entries, the full purpose of disbursement should be noted as Transfer to Line 24, Independent Expenditures disseminated. For the Line 24 corresponding positive entries, the full purpose of disbursement for each is: Transfer polling costs from Line 21b to Line 24 due to public dissemination of independent expenditure communication. Items are: Tarrance Group \$15,854.00 on 9/27/12 for Gary Miller; Peter D hart Associates Inc \$27,000.00 on 9/28/12 for Brad Sherman; Public Opinion Strategies \$ 20,000.00 on 9/28/12 for Tom Latham.

Form/Schedule:  
Transaction ID:

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 24
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**National Association of Realtors Congressional Fund**

Full Name (Last, First, Middle Initial)  
**A. NATIONAL ASSOCIATION OF REALTORS**

Mailing Address 430 N Michigan Avenue

City	State	Zip Code
Chicago	IL	60611-4011

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Corporation	n/a

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2810643.68

Date of Receipt  
 09 / 07 / 2012  
**Transaction ID : A2770D97B5A0B42C385D**

Amount of Each Receipt this Period  
300000.00

Full Name (Last, First, Middle Initial)  
**B. NATIONAL ASSOCIATION OF REALTORS**

Mailing Address 430 N Michigan Avenue

City	State	Zip Code
Chicago	IL	60611-4011

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Corporation	n/a

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2810722.56

Date of Receipt  
 09 / 15 / 2012  
**Transaction ID : A9A7C56B170684D36893**

Amount of Each Receipt this Period  
78.88

In-Kind: Administrative & Compliance Support

Full Name (Last, First, Middle Initial)  
**C. NATIONAL ASSOCIATION OF REALTORS**

Mailing Address 430 N Michigan Avenue

City	State	Zip Code
Chicago	IL	60611-4011

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Corporation	n/a

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2810880.32

Date of Receipt  
 09 / 30 / 2012  
**Transaction ID : A5C21F0FC7D144E85AAC**

Amount of Each Receipt this Period  
157.76

In-Kind: Administrative & Compliance Support

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300236.64
<b>TOTAL</b> This Period (last page this line number only).....	300236.64

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: (check only one)	PAGE 8 OF 24
<input type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input checked="" type="checkbox"/> 12 <input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Association of Realtors Congressional Fund**

**A. Peter D Hart Research Associates Inc**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1724 Connecticut Ave NW  
 City Washington State DC Zip Code 20009-1103  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 23000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 11 / 2012  
**Transaction ID : A8036A8B46CA54F6A96D**  
 Amount of Each Receipt this Period  
 23000.00

**B.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	23000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	23000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**National Association of Realtors Congressional Fund**

Full Name (Last, First, Middle Initial)

**A. Peter D Hart Research Associates Inc**

Mailing Address 1724 Connecticut Ave NW

City Washington State DC Zip Code 20009-1103

Purpose of Disbursement  
Trsr to Line 24 (See memo text for detailed explanation)

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 28 / 2012

Transaction ID : B8D1602CD6FE74B48AA7

Amount of Each Disbursement this Period

-27000.00

Full Name (Last, First, Middle Initial)

**B. Majority Strategies**

Mailing Address 135 Professional Drive Suite 104

City Ponte Vedra Beach State FL Zip Code 32082

Purpose of Disbursement  
Advance Direct Mail Costs (See memo text for detailed explanation)

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 28 / 2012

Transaction ID : B23D832CADABF4790A23

Amount of Each Disbursement this Period

478359.00

Full Name (Last, First, Middle Initial)

**C. NATIONAL ASSOCIATION OF REALTORS**

Mailing Address 430 N Michigan Avenue

City Chicago State IL Zip Code 60611-4011

Purpose of Disbursement  
In-Kind: Administrative & Compliance Support

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2012

Transaction ID : BBEB1573AB38C454482A

Amount of Each Disbursement this Period

78.88

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

451437.88

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**National Association of Realtors Congressional Fund**

Full Name (Last, First, Middle Initial)

**A. NATIONAL ASSOCIATION OF REALTORS**

Mailing Address 430 N Michigan Avenue

City Chicago State IL Zip Code 60611-4011

Purpose of Disbursement  
In-Kind: Administrative & Compliance Support

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2012

**Transaction ID : B9112B5748C3A4BF4A58**

Amount of Each Disbursement this Period

157.76

Full Name (Last, First, Middle Initial)

**B. Tarrance Group Inc**

Mailing Address 201 N Union Street, Ste 410

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Trsr to Line 24 (See memo text for detailed explanation)

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 27 / 2012

**Transaction ID : B2FBFF5F172B4426695B**

Amount of Each Disbursement this Period

-15854.00

Full Name (Last, First, Middle Initial)

**C. Public Opinion Strategies, LLC**

Mailing Address 214 North Fayette Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Trsr to Lin e24 (See memo text for detailed explanation)

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 28 / 2012

**Transaction ID : BD6467F6108C14F3BA8E**

Amount of Each Disbursement this Period

-20000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

-35696.24

415741.64





**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>National Association of Realtors Congressional Fund</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00488742
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Majority Strategies</b>		Date MM / DD / YYYY 09 / 28 / 2012
Mailing Address 135 Professional Drive Suite 104		Amount 302000.00
City Ponte Vedra Beach	State FL	Zip Code 32082
Purpose of Expenditure Direct Mail Costs	Category/ Type	<b>Transaction ID : EBB2F75B54B704BDAB7C</b>
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Tom Latham		Office Sought: <input checked="" type="checkbox"/> House    State: IA <input type="checkbox"/> Senate    District: 03 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
351885.00		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)    General 2012

Full Name (Last, First, Middle Initial) of Payee <b>Terris Barnes &amp; Walters</b>		Date MM / DD / YYYY 09 / 28 / 2012
Mailing Address 400 Montgomery Street Ste 900		Amount 555567.00
City San Francisco	State CA	Zip Code 94104
Purpose of Expenditure Direct Mail Costs	Category/ Type	<b>Transaction ID : EBEAFC5F20B344511BF8</b>
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Brad Sherman		Office Sought: <input checked="" type="checkbox"/> House    State: CA <input type="checkbox"/> Senate    District: 30 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
615767.00		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)    General 2012

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	857567.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> 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.

*William Armstrong*  
Signature

[Electronically Filed]

Date

MM / DD / YYYY  
10 / 19 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>National Association of Realtors Congressional Fund</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00488742
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>National Association of REALTORS</b>		Date MM / DD / YYYY <b>09 / 14 / 2012</b>
Mailing Address <b>430 N. Michigan Avenue</b>		Amount <b>100.00</b>
City <b>Chicago</b>	State <b>IL</b>	
Zip Code <b>60611-4087</b>	<b>Transaction ID : E17A669FF42AA4F89868</b>	
Purpose of Expenditure <b>Consulting Services</b>	Category/Type	Office Sought: <input checked="" type="checkbox"/> House    State: <b>IA</b> <input type="checkbox"/> Senate    District: <b>03</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Rep. Tom Latham</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>29485.00</b>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input checked="" type="checkbox"/> Other (specify) <b>General 2012</b>

Full Name (Last, First, Middle Initial) of Payee <b>Public Opinion Strategies, LLC</b>		Date MM / DD / YYYY <b>09 / 28 / 2012</b>
Mailing Address <b>214 North Fayette Street</b>		Amount <b>20000.00</b>
City <b>Alexandria</b>	State <b>VA</b>	
Zip Code <b>22314</b>	<b>Transaction ID : EBD27D8A61683438DAAL</b>	
Purpose of Expenditure <b>Polling Expenses</b>	Category/Type	Office Sought: <input checked="" type="checkbox"/> House    State: <b>IA</b> <input type="checkbox"/> Senate    District: <b>03</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Rep. Tom Latham</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>351885.00</b>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input checked="" type="checkbox"/> Other (specify) <b>General 2012</b>

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>20100.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	
(c) <b>TOTAL</b> 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.

*William Armstrong*  
Signature

[Electronically Filed]      Date **10 / 19 / 2012**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>National Association of Realtors Congressional Fund</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00488742
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>720 Strategies LLC</b>		Date MM / DD / YYYY <b>09 / 14 / 2012</b>
Mailing Address <b>1111 19th St NW</b>		Amount <b>5800.00</b>
City <b>Washington</b>	State <b>DC</b>	
Zip Code <b>20036</b>	<b>Transaction ID : E65FE6A16664645E79D6</b>	
Purpose of Expenditure <b>Website Infrastructure Costs</b>	Category/Type	Office Sought: <input checked="" type="checkbox"/> House    State: <b>IA</b> <input type="checkbox"/> Senate    District: <b>03</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Rep. Tom Latham</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>29485.00</b>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input checked="" type="checkbox"/> Other (specify) <b>General 2012</b>

Full Name (Last, First, Middle Initial) of Payee <b>National Association of REALTORS</b>		Date MM / DD / YYYY <b>09 / 27 / 2012</b>
Mailing Address <b>430 N. Michigan Avenue</b>		Amount <b>100.00</b>
City <b>Chicago</b>	State <b>IL</b>	
Zip Code <b>60611-4087</b>	<b>Transaction ID : E5610D04ADAEC4D1E99E</b>	
Purpose of Expenditure <b>Consulting Services</b>	Category/Type	Office Sought: <input checked="" type="checkbox"/> House    State: <b>CA</b> <input type="checkbox"/> Senate    District: <b>30</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Rep. Brad Sherman</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>32600.00</b>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input checked="" type="checkbox"/> Other (specify) <b>General 2012</b>

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<b>5900.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> 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.

*William Armstrong*  
Signature

[Electronically Filed]      Date **10 / 19 / 2012**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>National Association of Realtors Congressional Fund</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00488742
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>JKM CONSULTING</b>		Date MM / DD / YYYY 09 / 27 / 2012
Mailing Address 4441 KLINGLE ST NW		Amount 23200.00
City WASHINGTON	State DC	
Zip Code 20016	<b>Transaction ID : E93E88E14B8414CA4ABF</b>	
Purpose of Expenditure Online Video Production Costs	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 30 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Brad Sherman		Check One: <input checked="" 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 2012 <input checked="" type="checkbox"/> Other (specify) <u>General 2012</u>

Full Name (Last, First, Middle Initial) of Payee <b>720 Strategies LLC</b>		Date MM / DD / YYYY 09 / 27 / 2012
Mailing Address 1111 19th St NW		Amount 5800.00
City Washington	State DC	
Zip Code 20036	<b>Transaction ID : EFBA42710C6C04F77A74</b>	
Purpose of Expenditure Website Infrastructure Costs	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 30 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Brad Sherman		Check One: <input checked="" 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 2012 <input checked="" type="checkbox"/> Other (specify) <u>General 2012</u>

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	29000.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> 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.

*William Armstrong*
[Electronically Filed]
Date

Signature MM / DD / YYYY  
10 / 19 / 2012



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>National Association of Realtors Congressional Fund</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00488742
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>720 Strategies LLC</b>		Date <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>09 / 27 / 2012</b>
Mailing Address <b>1111 19th St NW</b>		Amount <span style="margin-left: 20px;">5800.00</span>
City <b>Washington</b>	State <b>DC</b>	
Zip Code <b>20036</b>	<b>Transaction ID : EE5730B437672401F886</b>	
Purpose of Expenditure <b>Website Infrastructure Costs</b>	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: <b>PA</b> <input type="checkbox"/> Senate District: <b>08</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Rep. Michael G. Fitzpatrick</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;"><b>34840.00</b></span>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input checked="" type="checkbox"/> Other (specify) <b>General 2012</b>

Full Name (Last, First, Middle Initial) of Payee <b>National Association of REALTORS</b>		Date <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>09 / 21 / 2012</b>
Mailing Address <b>430 N. Michigan Avenue</b>		Amount <span style="margin-left: 20px;">100.00</span>
City <b>Chicago</b>	State <b>IL</b>	
Zip Code <b>60611-4087</b>	<b>Transaction ID : E28307F07309F415C88B</b>	
Purpose of Expenditure <b>Consulting Services</b>	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: <b>IL</b> <input type="checkbox"/> Senate District: <b>11</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Rep. Judy Biggert</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;"><b>30840.00</b></span>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input checked="" type="checkbox"/> Other (specify) <b>General 2012</b>

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="margin-left: 20px;"><b>5900.00</b></span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures..... ▶	
(c) <b>TOTAL</b> 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.

*William Armstrong* [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**10 / 19 / 2012**

Signature





**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>National Association of Realtors Congressional Fund</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00488742
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>JKM CONSULTING</b>		Date <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>09 / 27 / 2012</b>
Mailing Address <b>4441 KLINGLE ST NW</b>		Amount <span style="margin-left: 20px;">M M M M M M . 0 0</span> <b>25440.00</b>
City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20016</b>
Purpose of Expenditure <b>Online Video Production Costs</b>	Category/Type <span style="margin-left: 20px;">M M M M M M</span>	Office Sought: <input checked="" type="checkbox"/> House State: <b>PA</b> <input type="checkbox"/> Senate District: <b>08</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Rep. Michael G. Fitzpatrick</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">M M M M M M . 0 0</span> <b>34840.00</b>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input checked="" type="checkbox"/> Other (specify) <b>General 2012</b>

**Transaction ID : ECDDEC89205AC461DBD**

Full Name (Last, First, Middle Initial) of Payee <b>720 Strategies LLC</b>		Date <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>09 / 27 / 2012</b>
Mailing Address <b>1111 19th St NW</b>		Amount <span style="margin-left: 20px;">M M M M M M . 0 0</span> <b>3500.00</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20036</b>
Purpose of Expenditure <b>Website Design Costs</b>	Category/Type <span style="margin-left: 20px;">M M M M M M</span>	Office Sought: <input checked="" type="checkbox"/> House State: <b>PA</b> <input type="checkbox"/> Senate District: <b>08</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Rep. Michael G. Fitzpatrick</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">M M M M M M . 0 0</span> <b>34840.00</b>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input checked="" type="checkbox"/> Other (specify) <b>General 2012</b>

**Transaction ID : EDB9CF5DC67924F9D938**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="margin-left: 20px;">M M M M M M . 0 0</span> <b>28940.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="margin-left: 20px;">M M M M M M . 0 0</span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="margin-left: 20px;">M M M M M M . 0 0</span>

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*William Armstrong*  
Signature [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**10 / 19 / 2012**



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>National Association of Realtors Congressional Fund</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00488742
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>720 Strategies LLC</b>		Date <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 09 / 21 / 2012
Mailing Address 1111 19th St NW		Amount <span style="border: 1px solid black; padding: 2px;">5800.00</span>
City Washington	State DC	
Zip Code 20036	<b>Transaction ID : E4888C0DB5F04428FA06</b>	
Purpose of Expenditure Website Infrastructure Costs	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 11 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Judy Biggert		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">30840.00</span>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input checked="" type="checkbox"/> Other (specify) <span style="border: 1px solid black; padding: 2px;">General 2012</span>

Full Name (Last, First, Middle Initial) of Payee <b>Majority Strategies</b>		Date <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 09 / 27 / 2012
Mailing Address 135 Professional Drive Suite 104		Amount <span style="border: 1px solid black; padding: 2px;">355000.00</span>
City Ponte Vedra Beach	State FL	
Zip Code 32082	<b>Transaction ID : E5BFAE90930AF422EBDE</b>	
Purpose of Expenditure Direct Mail Costs	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 31 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Gary G. Miller		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">371354.00</span>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input checked="" type="checkbox"/> Other (specify) <span style="border: 1px solid black; padding: 2px;">General 2012</span>

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">360800.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"> </span>

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.

*William Armstrong*
[Electronically Filed]
Date M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>National Association of Realtors Congressional Fund</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00488742
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>720 Strategies LLC</b>		Date <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>09 / 21 / 2012</b>
Mailing Address 1111 19th St NW		Amount <span style="margin-left: 20px;">3500.00</span>
City Washington	State DC	
Zip Code 20036	<b>Transaction ID : E36932CEA581E4328A89</b>	
Purpose of Expenditure Website Design Costs	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 11 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Judy Biggert		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">30840.00</span>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input checked="" type="checkbox"/> Other (specify) <span style="margin-left: 20px;">General 2012</span>

Full Name (Last, First, Middle Initial) of Payee <b>720 Strategies LLC</b>		Date <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>09 / 14 / 2012</b>
Mailing Address 1111 19th St NW		Amount <span style="margin-left: 20px;">3500.00</span>
City Washington	State DC	
Zip Code 20036	<b>Transaction ID : ECBC005B916434B48BE9</b>	
Purpose of Expenditure Website Design Costs	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Tom Latham		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">29485.00</span>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input checked="" type="checkbox"/> Other (specify) <span style="margin-left: 20px;">General 2012</span>

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="margin-left: 20px;">7000.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="margin-left: 20px;">1408286.00</span>

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*William Armstrong*  
Signature [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**10 / 19 / 2012**