12030921092

FEC FORM 3X

REPORT OF RECEIPTS **AND DISBURSEMENTS**

For Other Than An Authorized Committee

RECEIVED

2012 OCT 19 PM 12: 06

FEC FORM 3X Rev. 12/2004

	<u>l</u>							Office Us	e Only	
	AME OF OMMITTEE (in fu		E OR PRINT	▼	Example: If ty over the lines		12FE4N		MAIL	CENTER
Me	WI FINION	Tier	PAC			<u> </u>	1111		11.	
ــــــــــــــــــــــــــــــــــــــ										
ADDRE	ESS (number and	street)	35 B	riiarwi	araidi if	lace			1.1	
	Check if differ than previousl reported. (ACC	v .	akei	Foress			MC	275	<u>8.7</u>]-	
2. FE	EC IDENTIFICA	TION NUMB	ER ▼	CITY A			STATE A		ZIP COE	DE 🛦
Č	20052	9685	<u></u>	3. IS TH		NEW (N) OR	.: 1	AMENDED (A)		
	YPE OF REPO hoose One)	ORT (I	b) Monthly Report Due On:	Feb 20	Tendi Aris	May 20 (M5)	1() 1. (1)	ug 20 (M8) ep 20 (M9)	inty could temp	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12)
(a)	Quarterly Repa	rts:		.=	l kazd gan	` ,	ded) Tell			(Non-Election Year Only)
;	April 15			Apr 20	(M4)	Jul 20 (M7)	O	ct 20 (M10)	ļ.	Jan 31 (YE)
;	Quarterly July 15	Report (Q1)	(C) 12-Da	•		2P)	Gener	al (12G)	: = 1 : (Runoff (12R)
	Quarterly October 1			Election rt for the:	Convention	n (12C)	Specia	al (12S)		
· ;	January 3	Report (Q3) 1 Report (YE)		Election or	44 11		gh y huli ÿ =b yhd S George de od oe	•	in the State of	
:	July 31 M Report (N Year Only	on-election		r-Election	General (3	30G)	Runof	f (30R)	v-: .23	Special (30S)
į	Terminatio (TER)	n Report		Election or	· ·	/ [morates] /	"!	11	in the State of	e versione p Versione
5. Co	overing Period	M M /	20	20/2	through	n 09	3.0	7 Y Y) <u>1</u>	
I certify	that I have exa	mined this Re	eport and to	the best of my	,	1	ue, correct	and complet	e.	
Type or	r Print Name of	Treasurer	Kod	eFT D	Chure	<u> </u>			4	
Signatu	ure of Treasurer	Da	AD)	A		1	Date /	M / D	5	v v v v 20/2;
NOTE:	Submission of fal	se. erroneous.	or incomplete	e information ma	av subject the c	person signing i	this Report to	the penaltic	es of 2 U	S.C. 8437n

FE6AN026

Office

Use Only

12030921093

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
(a) Cash on Hand		
(b) Cash on Hand at Beginning of Reporting Period		
(c) Total Receipts (from Line 19)	1.74.4.23	4.744-7-3
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1,744.73	
. Total Disbursements (from Line 31)	, 1,408.51	1.908.51
Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	, ,336.22	, ,33 6.22
Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	,400.00	
This committee has qualified as a mult	icandidate committee. (see FEC FORM 1M)	

Toll Free 809-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

Page 3

V rite	or	Type	Committee	Name	
---------------	----	------	-----------	------	--

New Frontier PAC

Report Covering the Period:

203092109

From:

2 20 20/2

To:

9 30 20 12

	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	rangan ng mga kapangan ag mga mga kapangan ag mga kapangan ng mga kapangan ng mga kapangan ng mga kapangan ng Mga kapangan ng mga kapangan n	of the second of the second second
	(i) Itemized (use Schedule A)	, 1080.47	1.08-0-47
		1/426	1/14-26
	(iii) TOTAL (add	,//4-26	
	Lines 11(a)(i) and (ii)▶		The second secon
	(b) Political Party Committees	7	The second secon
	(c) Other Political Committees		
	(such as PACs)	ing the second of the second o	en la merca de la companya de la com
	(d) Total Contributions (add Lines		
	11(a)(iii), (b), and (c)) (Carry	garan kanan musiya merendan yang menjamban berada kanan jaran sebagai kanan jaran berada kanan b	. The equivariant map $(\mathcal{E}_{\mathcal{A}},\mathcal{E}_{\mathcal{A}})$ is the equivariant of the $\mathcal{E}_{\mathcal{A}}$
	Totals to Line 33, page 5)▶	, 1,1,9,4-73	The constant was not been been as the first of the firs
12.	Transfers From Affiliated/Other	The second of th	and the second of the second o
	Party Committees		
	-		
13.	All Loans Received	,550.00	7550-00
4.4	Lean Bassyments Bassiyad	presentatival reservation and reservation and	ing production to the real control of the control o
	Loan Repayments Received Offsets To Operating Expenditures	്ടെയും വിവയത്തെ കാരുക്കുന്നു. വിവ	i de promor en la composición de la co
13.	(Refunds, Rebates, etc.)		
	(Carry Totals to Line 37, page 5)	The state of a second condition of the second secon	
16	Refunds of Contributions Made	Programme and street at our silling	The many of the state of a soften in a
10.	to Federal Candidates and Other	ter yter gragger start i gerigier i 1942	and the state of t
	Political Committees		,
17	Other Federal Receipts	Talifornia (#10 ola tuli#107 oli 1840 oli 10 oli 1870). Napoli kalendaria (h. 1870).	and the second s
17.	(Dividends, Interest, etc.)		and the second of the second o
18	Transfers from Non-Federal and Levin Funds	1. 11.20 #911.00 % . Park 10.00	oran dan Salata 🧎 👉 👉 🧎
10.	(a) Non-Federal Account	ger ekkniger. Militarika da ki ki ki egil	and the second s
	(from Schedule H3)		
	(b) Levin Funds (from Schedule H5)	tils tils til	on de la filia de la Mariera d
	(c) Total Transfers (add 18(a) and 18(b))	Bornel and Charles to the total	a New Jarotto Kleshinsto Julius (fe Mode New Jarotto Kleshinsto Julius (fe Mode
19.	Total Receipts (add Lines 11(d),	and the street partners in the sign education of the sign	and the state of t
	12, 13, 14, 15, 16, 17, and 18(c))▶	1.744.73	1,744-73
00	Total Fadaval Descipts		
20.	Total Federal Receipts	, 1.74 4.73	The state of the s
	(subtract Line 18(c) from Line 19)▶	1.7.4 7.7.3	- 1

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

		II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Oper	rating Expenditures: Allocated Federal/Non-Federal		Calcinum Tear-10-Date
		Activity (from Schedule H4)	Because the first section with a second	$((x_1, x_2, \dots, x_n)) = (x_1, x_2, \dots, x_n) = (x_1, \dots, x_n) = $
		(i) Federal Share		$\begin{array}{lll} & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & &$
		(ii) Non-Federal Share	ing. Nga kanang manggan ay manggan at ang agamatan ang agamatan ang agamatan ang agamatan ang agamatan ang agamatan	or ∰ on the agent when agent enter the term of
		Other Federal Operating		
		Expenditures	277-98	727.7.98
		Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	••	
22.		sfers to Affiliated/Other Party	27.7-98	277-78
	Com	mitte s s	The second services of the ser	The committee of the
23.	Fede	tributions to eral Candidates/Committees Other Political Committees		 Train 2nd Control on the second property of a control of the second control
24.		pendent Expenditures	n de la la Caralle de La Maria de La M La maria de la	and the second of the second o
25.	Cool	Schedule E)rdinated Party Expenditures	.980-53	, ,98053
	(use	S.C. §441a(d)) Schedule F)		
26.	Laar	Repayments Made	· ·	15000
			7/50.00	
		ns Made		ing (f. 1975). The Control of Con
28.		inds of Contributions To: Individuals/Persons Other		
		Than Political Committees		
	(b)	Political Party Committees		
		Other Political Committees	- Parlic Barton (1998)	
		(such as PACs)	B Strain of the 1980 and the 1990 and the 1980 and the	la de la companya de
	(d)	Total Contribution Refunds		en de la companya de
	` '	(add Lines 28(a), (b), and (c))▶		- ¹ 1
			n de Gregoria (n. 1820). En la decado do Arte	or early for the Conference of
29.	Othe	er Disbursements		
30.	Fede	eral Election Activity (2 U.S.C. §431(20))		
		Allocated Federal Election Activity		
		(from Schedule H6)	والمس العقيم بالمعافل بالنان المسراءة مرتتة البيطان بالمسيعة وال	و المراكز المر المراكز المراكز
		(i) Federal Share	(<u> </u>	
		(ii) "Levin" Share		The state of the s
	(b)	Federal Election Activity Paid Entirely	Some the factor of the subflet wing .	
	(0)	With Federal Funds Total Federal Election Activity (add	La carrella al la carrella del c La carrella carrella del carrella	i kare kara menganan di karangan seb
	(C)	Lines 30(a)(i), 30(a)(ii) and 30(b))	1	
			o name (1) par la colifficial Barolle (120) e dino di la città de la color de	Langue de la reconstant
31.	Tota	I Disbursements (add Lines 21(c), 22,	en en en 1860 de les des l'Albandes de l'Albandes de l'Albandes de l'Albandes de l'Albandes de l'Albandes de l L'Albandes de l'Albandes d	ال المراجعة المراجع المعارض المعارض المعارض المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة
	23,	24, 25, 26, 27, 28(d), 29 and 30(c))	1.408-51	10468-51
20	Tete	Federal Disbursements	in the same in the same same of the same o	a and the control of
J∠.		receral Disbursements tract Line 21(a)(ii) and Line 30(a)(ii)		enger und der Mittelle der Weiser der Seiter
	•	Line 31)	1-	1400-1
		•	of any companies for 74000 months.	

DETAILED SUMMARY PAGE

of Disbursements

	FEC Form 3X (Rev. 02/2003)		Page 3
111.	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)	1.194-73	, 1,194-73
	Total Contribution Refunds (from Line 28(d))	0.00	6.00
	Net Contributions (other than loans) (subtract Line 34 from Line 33)	, 1,194-73	, 1,194-73
	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	277.98	, ,27.7.98
	Offsets to Operating Expenditures (frem Line 15, page 3)	0.00	7 0.00
38.	Nat Operating Expenditures (subtract Line 37 from Line 36)	27798	27.7.98

SCHEDULE	A	(FEC	Form	3X)
ITEMIZED F	REC	EIPTS	;	

FOR LINE NUMBER: PAGE Use separate schedule(s) (check only one) for each category of the 11a 11b 11c **Detailed Summary Page** 13 15 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) Full Name (Last, First, Middle Initial) Church Date of Receipt Mailing Address THE ME A TOO DO A TOO A State Zip Code Amount of Each Receipt this Period FEC ID number of contributing ,220.00 federal political committee. Name of Employer Occupation awve Aggregate Year-to-Date ▼ Primary g -- 27 2 - 27 2 - 24 General Other (specify) 20.00 Barrier office Brief and Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address FM - M 4 / FD - D - / City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Occupation Name of Employer TTOMEY Primary General Other (specify) ,500.00 ,500.00 SUBTOTAL of Receipts This Page (optional).....

Conference Which with 95 sile.

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

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 2 OF 9 (check only one)		
TEMIZED RECEIPTS	for each category of the	(check only one)		
•	Detailed Summary Page	13 14 15 16 17		
Any information copied from such Reports and Stat or for commercial purposes, other than using the na	ements may not be sold or used by any pe æne and address of any political committee	rson for the purpose of soliciting contributions		
NAME DF COMMITTEE (In Full)				
New Frontier PA				
Full Name (Last, First, Middle Initial)		Date of Receipt		
Mailing Address	1	<u> </u>		
528 N. Taylor A	ve.	3 /7 20/2		
City Oak Park	State Zip Code 1 60302	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	, 15.50		
Name of E₃nployor	Occupation			
Receipt For:	Aggregate Year-to-Date ▼	-		
Primary General	and the second s			
Other (specify)	15.50			
Full Name (Last, First, Middle Initial) 3.		Date of Receipt		
Mailing Address 3445 3 Lisa DI	1	6 2 20/2		
City Allanak	State Zip Code			
HI BEMAILE N	<u>C 280001</u>	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.		5.00		
Name of Employer	Occupation 57 Jen J			
	Aggregate Year-to-Date ▼			
Primary General Other (specify)	production of the control of the con-	i		
	Burgarin and Armania			
Full Name (Last, First, Middle Initial) 2.		Date of Receipt		
Mailing Address		TIME TWIST A FLOOR DESCRIPTION OF THE TWIST AND THE TWIST		
City	State Zip Code	- Tour Seat Description		
		Amount of Each Receipt this Period		
EEC ID number of contributing	i e lue-e la la la da la le la eue i un en la la elle de la eue de la eue de la elle de la elle de la elle de A C n de la elle de			
		Tuni sum ne kumu uni ti ni b		
Name of Employer	Occupation			
	Aggregate Year-to-Date ▼	7		
Primary General Other (specify)	ing kapang men ^{ang} diganggan pengganggan pengganggan pengganggan penggan penggan penggan penggan penggan penggan Penggan	;		

SUBTOTAL of Receipts This Page (optional).....

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

SCHEDULE A (FEC FORM 3X)	Use separate schedule(s)	ron Line NUMBER: PAGE 3 OF Capack and capack		
TEMIZED RECEIPTS	for each category of the	(check only one)		
	Detailed Summary Page	11a 11b 11c 12 13 14 15 16 17		
Any information copied from such Reports and State or for commercial purposes, other than using the na		rson for the purpose of soliciting contributions		
NAME OF COMMITTEE (In Full)	vi			
New Frontier of	40			
Full Name (Last, First, Middle Initial)				
A. <u>Coggins Mark</u>		Date of Receipt		
Mailing Address Carriage Lake		0602 2012		
City	State Zip Code	0.0 8		
Cary	VC 275//	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.		5.00		
Name of Employer C	occupation 5Ts dem			
Receipt For:	Aggregate Year-to-Date ▼	7		
	5.00			
Full Name (Last, First, Middle Initial) B. Maishall, Alan		Date of Receipt		
Mailing Address 23/8 Carlfold 72	1	6 2 20/2		
City 01	State Zip Code	- 2 20 / 2		
lesson Garden	NC 27313	Amount of Each Receipt this Period		
FEC ID number of contributing	i maring the arma service and a street of the contract of the	Manager in the factor of the second		
federal political committee.		Se traca 1954 - 111 - 15 - 10 0		
- 144 6	Occupation			
Receipt For:	Security SuperVISON			
Primary General	Aggregate Year-to-Date ▼			
Other (specify) ▼	5.00			
Full Name (Last, First, Middle Initial)				
C. Drever, Zon		Date of Receipt		
Mailing Address		IN THE COURT OF TH		
City 489 W 73201	State Zip Code	2 20/2		
New York City	NY 10036	Amount of Each Receipt this Period		
FEC ID number of contributing		to the contract term of the second of the second		
federal political committee.	Mit Purk Listenster (1906)	1. M.		
Name of Employer	Occupation	1		
Self-employed. Receipt For:	Graphiz Yesigh	4		
Primary General	Aggregate Year-to-Date ♥			
Other (specify)	, 5.00			
				
SUBTOTAL of Receipts This Page (optional)		, , /5.00		
TOTAL This Period (last name this line number only	v) -			

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

SCHEDULE A (FEC Form 3X)	Lies concests cabadula(-)	FOR LINE NUMBER: PAGE 4 OF
TEMIZED RECEIPTS	Use separate schedule(s) for each category of the	(check only one)
	Detailed Summary Page	110 110 110 12 13 14 15 16 17
Any information copied from such Reports and Statements ma	ay not be sold or used by any n	
or for commercial purposes, other than using the name and a	address of any political committee	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
New Frontier PAC		
Full Name (Last, First, Middle Initial)		
A. Boulder, James A.		Date of Receipt
Mailing Address 5500 Brooke Dylan CI	-	6 2 2012
City / State	Zip Code	
McLeansville NC	2730/	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		20.00
Name of Employer Occupation	1	-
Kapid Tesponse USA. Enviro	LEMAL ExECUTIVE	
Receipt For: Aggregate	Year-to-Date ▼	
	- 1 1 1 1 1 1 1 1 1 1 1 1 1 	:
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>
Full Name (Last, First, Middle Initial)		Date of Pagaint
B. Secknan Joanne Mailing Address		Date of Receipt
2301 MONT HOVEN IT.		6 2 2012
City State	Zip Code	
Durhan NC	27712	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	en e	5.00
Name of Employer Occupation		
	STERED NUISE	_
Aggregate	Year-to-Date ▼	
	5.00	7:
		·
Full Name (Last, First, Middle Initial) C		Date of Receipt
Mailing Address / / / / / /		M N / D D / Y Y Y
204 Windsor Park Di		6 2 20/2
City State	Zip Code	A
	270//	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		5.00
Name of Employer Occupation	2— 1	
Descint Com	elined	-
//ggregato	Year-to-Date ▼	:
Other (specify) ▼	, 5.00	
SUBTOTAL of Receipts This Page (optional))	3.0.00
TOTAL This Period (last page this line number only))	Lite was was seen

COUEDINE A /FEO Farms OV					
SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 5 OF (check only one)		
ITEMIZED RECEIPTS		for each category of the			
		Detailed Summary Page	11a 11b 11c 112		
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements made	Lay not be sold or used by any pe	rson for the purpose of soliciting contributions to solicit contributions from such committee.		
NAME DF COMMITTEE (In Full)					
New Front	ier	PAC			
Full Name (Last, First, Middle Initial) A			Date of Receipt		
Mailing Address 7226 Couble Creek	< A.		6 2 20/2		
City WeddingTon	State	Zip Code	Amount of Each Receipt this Period		
					
FEC ID number of contributing federal political committee.	C		5.00		
Name of Employer	Occupation				
Februal Eppress		ites.	_		
Receipt For: Primary General		Year-to-Date ▼			
Other (specify) Other		المائينية والمائين والمائين والمائين أحمال			
Cultil (speally) V	in the	-5.0.0	;		
Full Name (Last, First, Middle Initial)					
B. Westergard, Lind	ه		Date of Receipt		
Mailing Address	a Rd		W W / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Hayesville	State	Zip Code	Amount of Each Receipt this Period		
FEC ID number of contributing	Fig. 6 Fig. :	28909	Tarastructura de la contra del la contra della contra del		
federal political committee.	C	una maizo una seusca di	1. 15.00		
Name of Employer	Occupation	/	<u> </u>		
ANTI Q'S EMPOSON Receipt For:		Merchart Year to Data =	-		
Primary General	Aggregate	Year-to-Date ▼	. [
Other (specify) ▼	l land e.	, 15.00			
Full Name (Last, First, Middle Initial)					
C. Duncan, Katey			Date of Receipt		
Mailing Address 2714 Anderson 0	<u>/·</u>		6 4 20/2		
City Raleigh	State	Zip Code 27608	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	ediena i kolen obienzen. Loti da legel obienzenek	3/0.0.00		
Name of Employer	Occupation	RA			
Receipt For:	,	Year-to-Date ▼	7		
Other (specify) ▼			, ,		
Cariot (apoonly)	i in This Dia		1		

SUBTOTAL of Receipts This Page (optional).....

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

SCHEDULE A (FEC FORM 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 6 OF 9
TEMIZED RECEIPTS	for each category of the	(check only one)
	Detailed Summary Page	113 14 15 16 17
Any information copied from such Reports and Statements ma or for commercial purposes, other than using the name and a	ay not be sold or used by any pe ddress of any political committee	rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
New Frontier PAC	- 	
Full Name (Last, First, Middle Initial)		Date of Passint
Mailing Address		Date of Receipt
135 Priarwood PL		3 20 2012
City State	Zip Code	
Wabs 15/6 3	<u> </u>	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		, , 350.00
Name of Employer Church ATTORNEY Occupation	awyer.	
Receipt For: Aggregate	Year-to-Date ▼	7
Primary General Other (specify) ▼	$(1/2)^{2} = 4^{\frac{1}{2}} = 1/2 = 1/2 = 2 + 2 + 2 = 2$	
Loan	, 850.00	
Full Name (Last, First, Middle Initial)		
Mailing Address		Date of Receipt
135 Brigiwood Place] "9 26 20 / 2
City State	Zip Code	
- Value Toles	2/30/	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		, 200.00
Name of Employer Occupation		1
	yes.	-
Primary General Aggregate	Year-to-Date ▼	
Other (specify) ▼	1.050.00	
Full Narae (Last, First, Middle Initial)		
C		Date of Receipt
Mailing Address		M M / O O / Y Y Y
City State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing		Amount of Each Receipt this Period
federal political committee.		7 7
Name of Employer Occupation		1
Receipt For: Aggregate	Year-to-Date ▼	- -
Primary General	Tear-to-Date ▼	
Other (specify) ▼	3 (1) 1 (2) 1 (1) 1 (1)	
	<u> </u>	
SUBTOTAL of Receipts This Page (optional)	<u> </u>	350.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 7 OF 9						
ITEMIZED RECEIPTS	for each category of the	(check only one)						
	Detailed Summary Page	1 11a 11b 11c 12						
Any information copied from such Reports and Statements r or for nommercial purposes, other than using the næne and	nay not be sold or used by any po- address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)								
New Frontier PAC		7-h						
Full Name (Last, First, Middle Initial) A. Church Robert		Date of Receipt						
Mailing Address		Time with a first part of the contraction of the co						
135 Braswood PC		3 22 20/2						
City	Zip Code							
	275 8 7	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.		6.41						
Name of Employer Occupation	on							
	auxel							
	e Year-to-Date ▼							
Other (specify) ▼	الله المستهدية في الشهر المستهدية المستهدية المستهدية المستهدية المستهدية المستهدية المستهدية المستهدية المستهدية المستهدية المستهدية							
A PARA	, u P iù Turcika Più Libert e il esti esti car	1						
Full Name (Last, First, Middle Initial)								
B. Church Robert D		Date of Receipt						
Mailing Address		3/22/20/2						
City State	Zip Code							
Wake Forest NC	27587	Amount of Each Receipt this Period						
FEC ID number of contributing	ومختره سي دامهه فامر ما تأرا مقديسه							
federal political committee.		1.5.99						
Name of Employer Occupation	on							
Tobot Church ATTORRE, L	awyer							
Receipt For: Aggregat	te Year-to-Date ▼							
Primary General	المدارية كال معدر الصرمانيين البراك كالمدر الدال	· '						
Other (specify) ▼	1. 16 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1						
Full Name (Last, First, Middle Initial)								
C. Church, Robert D		Date of Receipt						
Mailing Addréss		7 1/9 0 ()						
City State	Zip Code	77. 20/2						
Wake Forest NC	27587	Amount of Each Receipt this Period						
EEC ID number of contribution	and the control of th	Company of the control of the contro						
federal political committee.	o nama na tomba si	15.26						
Name of Employer Occupation		-						
Robot Church ATTOMAY 1	awfer							
	te Year-to-Date ▼							
Primary General	•							
Other (specify) ▼		₫ [
		and the state of t						
SUBTOTAL of Receipts This Page (optional)		, , , 37.66						
								

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

e de la compaña de la comp

4
\mathbb{C}
62
إنسا
N
(J)
\odot
Vel
Ç
e V
en e

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

NAME OF COMMITTEE (In Full)

FOR LINE NUMBER: Use separate schedule(s) (check_only one) for each category of the 11a 11b Detailed Summary Page 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.

New Fronsier	- PAC	
Full Name (Last, First, Middle Initial) A. Church, Robert D Mailing Address 135 Brian Wood Pl City		Date of Receipt 9 26 2012
FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary Other (specify)	NC ≥7587 C Occupation Lawrer Aggregate Year-to-Date ▼ 1 -0 6 4 .99	Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial), Ay or Scolley Mailing Address City		Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer	NC >75/6 C	Amount of Each Receipt this Period
Xona Mic/o Clvidics Receipt For: Primary General Othur (specify) ▼	Lawyer Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Mailing Address		Date of Receipt M M / D D / Y Y Y Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	7 7 7
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)	•	264.99
TOTAL This Period (last page this line number	only)	3 3 1

SCHEDULE A (FEC Form 3X) FOR LINE NUMBER: PAGE Use separate schedule(s) (check only one) ITEMIZED RECEIPTS for each category of the 111a 11b 11c **Detailed Summary Page** 13 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) Full Name (Last, First, Middle/Initial) Date of Receipt Mailing Address State City Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Occupation Aggregate Year-to-Date ▼ **Primary** General Other (specify) w dial diga ku a≇ kuku u Seba#N bah belik adhke atu k Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code MC Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Occupation Aggregate Year-to-Date ▼ **⁴**Primary General Other (specify) 19 82 9 82 **6**2 20 7 **8**2 3 2 2 **6**2 2

Full Name (Last, First, Middle Initial)	70	Date of Receipt
Mailing Address 135 Brarwood	IPL	9 26 2012
City Wake Forest	State Zip Code NC 22587	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		
Name of Employer Robert Church AFTORAL	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
		. 6

SUBTOTAL of Receipts This Page (optional).....

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

C.

SCHEDULE B (FEC Form 3X)

SCHEDOLE B (FECTORIII SX)	Use separate schedule(s)	FOR LINE				
ITEMIZED DISBURSEMENTS	for each category of the	(check only	one) 22 23 24 25 26			
	Detailed Summary Page	27	28a 28b 28c 29 30b			
Any information copied from such Reports and Statem	ents may not be sold or used					
or for commercial purposes, other than using the næn						
NAME OF COMMITTEE (In Full)						
	OAc					
New Frontie	- PAC					
Full Name (Last, First, Middle Initial)			Date of Disbursement			
Dollar Tree						
Mailing Address	3 22 20/2					
City	tate Zip Code					
Purpose of Disbursement	T r					
Balloons Commism Syles		00/	Amount of Each Disbursement this Period			
Candidate Name		Category/	The state of the s			
	Туре	6.4/				
Office Sought: House Disburserr Senate	_					
	Primary ☐ General Other (specify) ▼	·				
State: District:	(-F)/ A					
Full Name (Last, First, Middle Initial)						
B			Date of Disbursement			
Mailing Address		3 22 2012				
Mailing Address			5 22 20 (2			
City	tate Zip Code					
	·					
Purpose of Disbursement	Laurence (Amount of Each Disbursement this Period				
Rubber bands, clipboard, s		Amount of Each Dispursement this Period				
		Category/ Type	15.89			
Office Sought: House Disbursem	ent For:		The second second of the second secon			
	Primary General					
President State: District:	Other (specify)					
Full Name (Last, First, Middle Initial)						
C			Date of Disbursement			
N.C. Secretary of 5.	late		ฏพาพาพ _{าร} / โอโลโอโ / ก Y . Y ก ∀าก(Y)			
Mailing Address			5 20/2			
City	tate Zip Code					
			·			
Purpose of Disbursement		· ()->-(-)-(-)				
Candidate Name	· on	0.0./	Amount of Each Disbursement this Period			
Candidate Name V	Category/					
Office Sought: House Disburserr	ent For:	Туре	60.00			
_ 	Primary General					
	Other (specify) ▼					
State: District:						
CUDTOTAL of Dishurasments This Days (antique)						
SUBTOTAL of Disbursements This Page (optional)		······	, , 82.40			
TOTAL This Period (last page this lihe number only).						
1			<u>i kan di li dista</u> a ku akasa di kanda kata bi itu di j			

SCHEDULE B (FEC Form 3X)

ITEMIZED DISPUIDSEMENTS					E NUMBER: PAGE ly one)						20F 6	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		V^2	21b [П	23	\Box	24	25	ш ⁻	26
Any information copied from such Reports and Statem		bv -		erson	28a	Direc	28b		28c citing co	29 ontributi		30b
or for commercial purposes, other than using the næn	e and address of any political	com	mitte	e to s	olicit cor	ıtribu	utions	from	such c	ommitte	e.	
NAME OF COMMITTEE (In Full)	1 2											
Full Name (Last, First, Middle Initial)	4											
A		-			Date of	Dis	burse	ment		- -		
U.S POSTMOSTER				\dashv	M M	Ţ,	}- D	D · /				
Mailing Address		_				>	_ _	<u>-</u>	≥0	`/	4	_
City S	itate Zip Code			T								
Purpose of Disbursement		;			A		-	D .				
Candidate Name		O O	./	, ·:				-:		•		•
		Categ Typ										ij
Office Sought: House Disbursem	nent For: Primary General											
President	Other (specify)											
State: District: Full Name (Last, First, Middle Initial)				+								
В					Date of							
Mailing Address				\dashv	M M	<u>`</u> '		7	γ"γ 	/ Y	γ · 2 *	
	4-10				1. 0.7	 	. 1	· · ·		. <i>(</i> .e	<u>``</u>	
	State Zip Code		_	_								
Purpose of Disbursement PosTuge -	:				Amount	∶of ^I	Each	Dishu	rsemen	t thic P	erind	i
Candidate Name	l '-	و Cate	gory/	1	Amount of Each Disbursement this Period							
Office Sought: House Disbursem		Ту			1382	2.24	7 1.70	. wii u	: 7 , ' 21, 17	/2.	7:7	; .:
Senate	Primary General											
State: District:	Other (specify) ▼											
Full Name (Last, First, Middle Initial)				_		_						
C. Wake County Republic	11 Party				Date of				5 Y - Y	, v	ν .	
Mailing Address					3				عد			
City 7 () 30 66 8 s	State Zip Code			+						_		
Purpose of Disbursement	VC 27622	<u> </u>										
Table at CONVENTION	1 1	0 /			Amount						'eriod	
Candidate Name		Cate	gory		1. <u> </u>						:. の a	··)
Office Sought: House Disburser	<i></i>	. 31	· -	\dashv	•		Ø0 ±5	· 20.00	.7.6 (A.C.)	"	ن کی	
السا السا	Primary General Other (specify) ▼											
State: District:	· · · ·									_		
SUBTOTAL of Disbursements This Page (optional)			1	>	fight.	;:-:: :\	en de la companya de Mangrapia	- 14 714	, /	15	26)
				_								:
TOTAL This Period (last page this line number only).				>		· · .	3 .: . :		3	223		

SCHEDUL	EΒ	(FEC	Form	3X)
ITEMIZED	DISB	URSE	MENT	'S

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee. NAME DF COMMITTEE (In Full) Full Name (Last, First, Middle Initial) A. Mailing Address City Morting Ville Fresident Disbursement For: Senate President Disbursement State: Disbursement Disbursement Primary General Disbursement State: Disbursement Disbursement For: Senate President Disbursement State: Disbursement Disbursement For: Senate President Category/ Purpose of Disbursement Disbursement For: Senate President Category/ Purpose of Disbursement Category/ Disbursement For: Senate President Category Purpose of Disbursement Category Purpose of Disbursement Category Purpose of Disbursement For: Senate President Category Purpose of Disbursement Candidate Name Category Purpose of Disbursement Candidate Name Category Purpose of Disbursement Candidate Name Category Office Sought: House Dispursement For: Senate Versident Dispursement For: Senate President Dispursement General Dispursement For: Senate President Dispursement For: Senate President Dispursement Dispursement	ITEMIZED DISDLIBSEMENTS	Use separate schedule(s)	_	FOR LINE NUMBER: PAGE (check only one)						3010			
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of adiciting contributions or the commercial process, other than using the meme and address of any positical committee to solicit contributions from such committee. NAME OF COMMITTEE (In Eul) NAME OF COMMITTEE OF COMMITTEE OF COMMITTEE (In Eul) NAME OF COMMITTEE OF CO	lor each category of the		[<u> </u>	21b [22	F			L		П	
NAME DF COMMITTEE (In Full) New First, Middle Initial) A State First, Middle Initial) A Malling Address Name (Last, First, Middle Initial) A Malling Address Name (Last, First, Middle Initial) New First, State													
Full Name (Last, First, Middle Initial) A Mailing Address													
A.	New Frontier	PAC											
Mailing Address City Martins ville State Zip Code Purpose of Disbursement Period Candidate Name Category Office Sought: House Disbursement For: Senate Primary General Purpose of Disbursement Other (specity) State: Disbursement Senate Primary General State: Disbursement Senate Primary General State: Disbursement Senate Primary General Purpose of Disbursement Candidate Name Cast, First, Middle Initial) B.	A.	w/ 1.10-17											
Purpose of Disbursement Poster Purpose of Disbursement this Period	Mailing Address 140 North ST	him SI.				M	ູ່	٦	o '	2	O/	کر ا	
Purpose of Disbursement State Disbursement Disbursement	Martins ville												
Candidate Name Office Sought:						Amou	nt of	Each	Disbu	ırseme	ent this	Perio	d
Office Sought: House Senate Primary General Other (specify) ▼ State: District: Other (specify) ▼ Full Name (Last, First, Middle Initial) B.	Candidate Name		Categ	jory					_			0.6	ີ. ວ :
State: District: Other (specify) State: District: Other (specify) B.	Office Sought: House Disburse		171				. *	.32		¥. 	≁ .►.	· •	- ',
B. Wright Media Mailing Address City Purpose of Disbursement Candidate Name City Office Sought: Full Name (Last, First, Middle Initial) City Mailing Address District: Full Name (Last, First, Middle Initial) Candidate Name City City City State City State City Ci	President	·											
Mailing Address Mailing Address May	Full Name (Last, First, Middle Initial)				_								
City State Zip Code Purpose of Disbursement Candidate Name Candidate Name City Senate House Disbursement For: General Primary General	B. Wright Modia									Ţγ	• y ∪ • y • •	γ.	
Purpose of Disbursement Candidate Name Candidate Name Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) City City Category Amount of Each Disbursement this Period Date of Disbursement Mailing Address City State Date of Disbursement Purpose of Disbursement Poster Printing Candidate Name Amount of Each Disbursement this Period Amount of Each Disbursement Date of Disbursement Poster Printing Candidate Name Amount of Each Disbursement this Period Category Type O O G Category Type Amount of Each Disbursement this Period Category Type Office Sought: House Senate Printing General Other (specify) Other (specify) State: District:	Mailing Address	· 57.				1 3-	3	l	3	2	0 /	2	
Candidate Name Category/ Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City Purpose of Disbursement Candidate Name Candidate Name Candidate Name Candidate Name Candidate Name Category/ Type Amount of Each Disbursement this Period Category/ Type Category/ Type Category/ Type Category/ Type Category/ Type Category/ Type Office Sought: House Disbursement For: Senate President Disbursement President Disbursement President Disbursement President Disbursement President Disbursement Pr	City Martinsville T												
Candidate Name Category Type	0 - 0					Amount of Each Disbursement this I					Perio	d	
Office Sought: House Senate Primary General State: District: Other (specify) ▼ Full Name (Last, First, Middle Initial) C. Mailing Address Mailing Address Mailing Add	Candidate Name	1 ***	Categ	jory	1	المان المنافع والمنافع المنافع						 . <i>o</i> . ()
State: District: Other (specify) Full Name (Last, First, Middle Initial) C.	Office Sought: House Disburse		' ' '		\dashv	1 . hr	٠	.¥ :		i y tire.i	7 Y		,
Full Name (Last, First, Middle Initial) C. The Day's Printy Mailing Address 19/5 West Garnon Ave City State Zip Code NC 27597 Purpose of Disbursement Poster Printy Office Sought: House Disbursement For: Senate President President State: District: Date of Disbursement Arount of Each Disbursement this Period Category/ Type Other (specify) Other (specify)	President	- (
Mailing Address Mailing Address Mailing Ad	Full Name (Last, First, Middle Initial)	· · · · · · · · · · · · · · · · · · ·											
Mailing Address 19/5 West Ganon Ave	c. Theo Davis Print	Tun				Date (of Di			. V	· v . v	." v	
City State Zip Code NC 2.7597	Mailing Address 19/5 West Gange	n Ave					ל						
Candidate Name Candidate Name	City Zeblon	State Zip Code											
Candidate Name ATT Conney Type Type	_	i				Amou	nt of	Fach	Diebu	reome	nt thic	Derio	ч
State: District:	Candidate Name Category/					TO THE RESIDENCE OF THE BEST							. •
State: District: Other (specify) ▼	A		Tvc)e		j.				Ś	4 ~	<u></u>	
	Office Sought: House Disburse	ment For:	Тур	oe	_	;:		७		,S	γ . ο.	S	.د
ロー・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・	Office Sought: House Disburse Senate President	ment For: Primary General	Тур	oe		ÿi.		.3`		,3	γ. o.	, S	, د
TOTAL This Period (last page this lihe number only)	Office Sought: House Disburse Senate President State: District:	ment For: ✓ Frimary General Other (specify) ▼			<u> </u>								

SCHEDULE B (FEC Form 3X)

SCHEDULE B (FEC FOIII 3X)	Lise congrete echedule(s)	FOR LINE	
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one) 22 23 24 25 26
	Detailed Gurnmary Page	27	28a 28b 28c 29 30b
Any information copied from such Reports and Staterr or for commercial purposes, other than using the nam			
NAME DF COMMITTEE (In Full)			
New Froatser &	AC		
Full Name (Last, First, Middle Initial)		Ī	B. (-:-
a. Chil Plan		ŀ	Date of Disbursement
Mailing Address			6 4 2012
135 Briarwood Pho	Cate Zip Code		
City Wake FORT	State Zip Code VC 27587		
Purpose of Disbursement	NC 2/38/		
Candidate Name Repayment		009	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	,/50.00
Office Sought: House Disbursen	nent For:	- , , , , ,	
\\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Primary General		
State: District:	Other (specify) ▼	ļ	
Full Name (Last, First, Middle Initial)			
3.		}	Date of Disbursement
Mailinn Address			амния / « осто у / (у бус у » ў
Mailing Address			o de la composition della comp
City	State Zip Code		W
Purpose of Disbursement			
Candidate Name		Amount of Each Disbursement this Period	
Candidate Name		Category/ Type	
Office Sought: House Disbursen	 ,		-
<u> </u>	Primary General Other (specify) ▼		
State: District:	outor (apoully) ▼		
Full Name (Last, First, Middle Initial)			
5.		1	Date of Disbursement
Mailing Address			M M / D D / Y Y Y
			The state of the s
City	State Zip Code	ļ	l
Purpose of Disbursement		744 JT .	
Candidate Name			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	in the region of the target of the end of th
Office Sought: House Disbursen	nent For:	.,,,,,	i de merke v erta in revolución este el de
	Primary General	ļ	
President State: District:	Other (specify) ▼		
Significant Control of the Control o			
SUBTOTAL of Disbursements This Page (optional)		>	, ,/50.00
TOTAL This Davied (last page this live grant to a		-	
TOTAL This Period (last page this line number only)		······	a dia namata sa ang ang ang ang ang ang ang ang ang an

SCHEDULE B (FEC Form 3Y)

SCHEDULE B (FEC FORM 3A)	Uso congrete eshedule/s\	FOR LINE NUMBER: PAGE 5		
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one) 22 28	7 24
	Detailed Summary Page	27	28a 28b	28c 29 30b
Any information copied from such Reports and Staten				
or for commercial purposes, other than using the nær				
NAME OF COMMITTEE (In Full)	2.4			
New Frontier &	AC			
Full Name (Last, First, Middle Initial) A.			Date of Disburseme	ent
Critical Yast LLC				
Mailing Address	Dr 5.7e >30	-26	9 25	20 12
City	$\frac{\mathcal{D}r.}{\text{State}}$ Suite $\frac{230}{\text{Zip Code}}$, , ,		
Purpose of Disbursement	A 2019/			
		4	Amount of Each Di	sbursement this Period
Candidate Name	1	O O 4 Category/	into the engine of the	And the entire
	sa pice	Type		,/40.00
Office Sought: House Disbursen	_ /			•
Senate President	Primary General Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial)				
B. Cot. 10 -11 C		,	Date of Disburseme	
Mailing Address		M M / D D	20 / 2	
12100 Sunse Valley	<u> </u>	-36		
City				
Purpose of Disbursement.	A 2019/			
Mixon Video FooTage	'	004		sbursement this Period
Candidate Name	Į.	Category/	The firm of the control of	•
Office Sought: House Disburser		Туре		, (.0.0
Senate	Primary General			
President	Other (specify)			
State: District:				· · · · · · · · · · · · · · · · · · ·
Full Name (Last, First, Middle Initial) C.			Date of Disburseme	ent
Dreamstime	LLC		M M / D B	
Mailing Address			9 26	20/2
City	State Zip Code			
Purpose of Disbursement	1,.	;===; 1		
Obama Photo for V	leo :	004	Amount of Each Di	sbursement this Period
Candidate Name	16	Category/ Type		. 4 0 6
Office Sought: House Disburser		Туре	1 11 11 11 11 11 11 11 11	14.99
Senate Sasyini	Primary General			
President	Other (specify) ▼			
State: District:				
SUBTOTAL of Disbursements This Page (optional)			The set of	,162.99
CONTROL OF DISSUSSMENTS THIS Fage (optional)				7/02/
TOTAL This Period (last page this line number only)		·····	- 4 - Augustau Han Fi - Augusta	to and a constant of the

SCHEDULE B (FEC FORM 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 6 (check only one)		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 26 28a 28b 28c 29 30b	
Any information copied from such Reports and Stater or for commercial purposes, other than using the name	nents may not be sold or used ne and address of any political	by any perso	n for the purpose of soliciting contributions solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) New Fromser Full Name (Last, First, Middle Initial)				
Full Name (Last, First, Middle Initial) A. Mailing Address			Date of Disbursement 9 19 20 12	
City	State Zip Code			
Purpose of Disbursement ATTickes at Income Candidate Name Office Sought: House Disburser	po/a/vov	O O / Category/ Type	Amount of Each Disbursement this Period	
Senate President State: District:	Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial) B. Mailing Address Mailing Address	n		Date of Disbursement	
City	State Zip Code			
Purpose of Disburgement Solver in Teg 5 (2010) Candidate Name		Category/ Type	Amount of Each Disbursement this Period	
Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial) C. Mailing Address	(o/\)		Date of Disbursement	
City	State Zip Code			
Purpose of Disbursement Cona Reg. Staylor Candidate Name	<u> </u>	O O (Category/ Type	Amount of Each Disbursement this Period	
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)			
SUBTOTAL of Disbursements This Page (optional)		······	, , § 7.33	
TOTAL This Period (last page this line number only)	······ •	1,408.5/	

SCHEDULE C (FEC Form 3X) LOANS

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

PAGE / OF
FOR LINE 13 OF FORM 3X

	Detailed Summa	ary Page	FOR LINE	13 OF FORM 3X	
ME OF COMMITTEE (In Full)					
New Frontier PAC					
LOAN SOURCE Full Name (Last, First, Middle Initial)			ection:		
Church Robert D			Primary General		
Mailing Address 135 Briarwood Phace			Other (specify	_'	
City Wake Forest State NC ZIP Code 27587					
Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period					
,350.00 , ,200.00					
TERMS Date Incurred Date Due	Inter	est Rate		Secured:	
3 20 20/2 /2 31 2	0/2	0.0	0 % (apr)	Yes No	
List All Endorsers or Guarantors (if any) to Loan Source					
1. Full Name (Last, First, Middle Initial)	Name of Employe	r			
Mailing Address	Occupation	 			
		round man	al somuses.	- ; ; ' ' ' ' ' (; ' ₁	
City State ZIP Code	Guaranteed Outstanding:	_8::0- 1	en i krija	aru reagail	
2. Full Name (Last, First, Middle Initial)	Name of Employe	er			
Mailing Address	Occupation				
	Amount	NORT LAND	· ,, ·. ·. ·	ett eg e e t	
City State ZIP Code	Guaranteed		. 1 - Ele . 1 . 2 .	•	
3. Full Name (Last, First, Middle Initial)	Name of Employe	r			
Mailing Address	Occupation		***		
			Way of the State o	Serial Control	
City State ZIP Code	Guaranteed : Outstanding:	ene filozo	ere um en 🕫 📜 🕮	A.m.i	
4. Full Name (Last, First, Middle Initial)	Name of Employe	r			
Mailing Address	Occupation				
	I	دى سىدىن دەر س	Ng 44 ga 25 4 ga	elegani	
City State ZIP Code	Guaranteed Outstanding:		Seludición.	. 0. 1 <u>**</u> 10 1	
			ne cesto legen		
UBTOTALS This Period This Page (optional)	······			350.00	
OTALS This Period (last page in this line only)					
arry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.					

SCHEDULE C (FEC Form 3X) **PAGE** OF Use separate schedule(s) LOANS for each category of the FOR LINE 13 OF FORM 3X **Detailed Summary Page** NAME OF COMMITTEE (In Full) Election: **Primary** General Mailing Address Other (specify) ZIP Code 27587 State NC Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period and the state ,2000 ,200.00 * * * * *****.. • **\$.**.. . **TERMS** Date Due Secured: Interest Rate $\mathbf{M} = \mathbf{M} + \mathbf{J} = \mathbf{D} = \mathbf{D} + \mathbf{J} = \mathbf{Y} + \mathbf{Y} = \mathbf{Y} = \mathbf{Y}$ M1 M 7 7 0 0 7 Y Y 7 Y 7 Yes L No 20/2 /2 3/ 20/2 0-00 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation **Amount** City State ZIP Code Guaranteed loun energeour insurant com est out i Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation **Amount** City State ZIP Code Guaranteed Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State City ZIP Code Guaranteed Ber der Territorie errei 🤲 Gilletin (*), Pill S Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount City State ZIP Code Guaranteed Outstanding: SUBTOTALS This Period This Page (optional).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

TOTALS This Period (last page in this line only).....

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

EMIZED INDEPENDENT EXPENDITURES		PAGE / OF 2 FOR LINE 24 OF FORM 3X		
AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼		
New Fronsier PAC		C00529685		
heck if 24-hour report 48-hour report New report Amends report	filed on			
Full Name (Last, First, Middle Initial) of Payee	Date			
Wright media Mailing Address		2 20 20 / 2		
140 North ST. Claire ST. City State Zip Code	1 4	-graga-gragasga-gaga-gaga-gaga-ga		
MaTin sville IN 46151 Purpose of Expenditure Category	Office Sough	t: House State:		
Purpose of Expenditure Category/ Type O. O. 6 Name of Federal Candidate Supported or Opposed by Expenditure:		Senate District:		
In SURPORT OF MITT ZOMARY.	Check One:	Support Oppese		
Calendar Year-To-Date Per Election for Office Sought		ner (specify)		
Full Name (Last, First, Middle Initial) of Payee	Date			
Mailing Address		3 13 20 12		
140 North ST. Claire ST.	Amour	nt		
City MaiTra sville IN 4615/	1	25000		
Purpose of Expenditure Poster Sonoff M Romay Category/ Type 0.06 Name of Federal Candidate Supported or Opposed by Expenditure:	Office Sough	Senate District:		
	Check One:	Support Oppose		
		nt For: Frimary General		
(a) SUBTOTAL of Itemized Independent Expenditures	>	-500-00		
(b) SUBTOTAL of Unitemized Independent Expenditures	ÇTANÇIA ▶ II			
(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.				
Signature Date	10	15 2012		

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

EMIZED INDEPENDENT EXPENDITURES	PAGE OF STATE OF STAT				
AME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼				
New Frontier PAC	00529685				
theck if 24-hour report 48-hour report Amends report	ort filed on				
Full Name (Last, First, Middle Initial) of Payee	Date				
Mailing Address PriMing	3 22 20/2				
City State Zip Code	Amount				
City State Zip Code Zebulon IVC 27597	3.4° 0.53				
Purpose of Expenditure Category/ Type 0 0,6 Name of Federal Candidate Supported of Opposed by Expenditure:	Office Sought: House State: Senate District:				
Name of Federal Candidate Supported of Opposed by Expenditure:	Check One: Laupport Oppose				
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Frimary General Other (specify)				
Full Name (Last, First, Middle Initial) of Payee	Date				
Mailing Address Mailing Address	7 15 2012				
12/00 Sunsise Valley Vr., Sute 230-36 City State Zip Code	Amount				
Reston VA 20191	7 2000				
Purpose of Expenditure Video of Fosia Obana Name of Federal Candidate Supported or Opposed by Expenditure:	Office Sought: House State: Senate District:				
Name of Federal Candidate Supported or Opposed by Expenditure: Sarack Obana	Check One: Support Oppose				
Calendar Year-To-Date Per Election	Disbursement For: Primary General				
for Office Sought	Other (specify)				
(a) SUBTOTAL of Itemized Independent Expenditures					
(b) SUBTOTAL of Uniternized Independent Expenditures					
(c) TOTAL Independent Expenditures	99.053				
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.					
Signature	10 15 2012				

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOM The FEC added this page to the end of this filing to indic				
Hand Delivered	Date of Receipt			
USPS First Class Mail	Postmarked			
USPS Registered/Certified	Postmarked (R/C)			
USPS Priority Mail	Postmarked			
Delivery Confirmation™ or Signature Confirmation™ Label				
USPS Express Mail	Postmarked			
Postmark Illegible				
No Postmark				
Overnight Delivery Service (Specify):	Shipping Date			
Next Busi	ness Day Delivery			
Received from House Records & Registration Office	Date of Receipt			
Received from Senate Public Records Office	Date of Receipt			
Received from Electronic Filing Office	Date of Receipt			
Other (Specify):	of Receipt or Postmarked			
AMP	10/19/12			
(3/2005)	DATE PREPARED			