

# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

WE SERVED AMERICA

ADDRESS (number and street) ▼

661 FRANKLIN AVENUE

Check if different than previously reported. (ACC)

NUTLEY

NJ

07110

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00521906

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- |                                      |                                      |                                       |                                                                |
|--------------------------------------|--------------------------------------|---------------------------------------|----------------------------------------------------------------|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day PRE-Election Report for the:
- |                                           |                                        |                                       |
|-------------------------------------------|----------------------------------------|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on MM / DD / YYYYYY in the State of  

- (d) 30-Day POST-Election Report for the:
- |                                        |                                       |                                        |
|----------------------------------------|---------------------------------------|----------------------------------------|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|----------------------------------------|---------------------------------------|----------------------------------------|

Election on MM / DD / YYYYYY in the State of  

5. Covering Period MM / DD / YYYYYY through MM / DD / YYYYYY

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Craig Livingston

Signature of Treasurer Craig Livingston [Electronically Filed] Date MM / DD / YYYYYY

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3X Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**WE SERVED AMERICA**

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="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="5506.60"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="500.00"/>	<input type="text" value="11050.00"/>
(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="6006.60"/>	<input type="text" value="11050.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="5392.26"/>	<input type="text" value="10435.66"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="614.34"/>	<input type="text" value="614.34"/>
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="10302.66"/>	

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

**WE SERVED AMERICA**

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).....	0.00	10400.00
(ii) Unitemized .....	500.00	650.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	500.00	11050.00
(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) .....	500.00	11050.00
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.....	0.00	0.00
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))..... ▶	500.00	11050.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	500.00	11050.00

**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 .....	5392.26	10435.66
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	5392.26	10435.66
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) .....	0.00	0.00
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)) ..	5392.26	10435.66
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5392.26	10435.66

**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) .....	500.00	11050.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	500.00	11050.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	5392.26	10435.66
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	5392.26	10435.66

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XN  
Transaction ID :

All expenditures by this committee were for issue advocacy and did not expressly advocate the election or defeat of any candidate.

Form/Schedule:  
Transaction ID:

**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

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)  
**WE SERVED AMERICA**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 1 ADP Boulevard

City Roseland State NJ Zip Code 07068

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 24 / 2012

Transaction ID : SB21B.4154

Amount of Each Disbursement this Period: 253.61

Full Name (Last, First, Middle Initial)

**B. Joseph Baietto**

Mailing Address 28-53 Hobart Street

City Woodside State NY Zip Code 11377

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 24 / 2012

Transaction ID : SB21B.4150

Amount of Each Disbursement this Period: 421.63

Full Name (Last, First, Middle Initial)

**C. Jeff Jones Freelance Graphics**

Mailing Address 18311 Trundle Road

City Dickerson State MD Zip Code 20842

Purpose of Disbursement Graphic Design

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 07 / 2012

Transaction ID : SB21B.4160

Amount of Each Disbursement this Period: 125.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 800.24

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

**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)  
**WE SERVED AMERICA**

Full Name (Last, First, Middle Initial)

**A. Jeff Jones Freelance Graphics**

Mailing Address 18311 Trundle Road

City Dickerson State MD Zip Code 20842

Purpose of Disbursement  
Graphic Design

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2012

**Transaction ID : SB21B.4148**

Amount of Each Disbursement this Period

137.50

Full Name (Last, First, Middle Initial)

**B. Jeff Jones Freelance Graphics**

Mailing Address 18311 Trundle Road

City Dickerson State MD Zip Code 20842

Purpose of Disbursement  
Graphic Design

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2012

**Transaction ID : SB21B.4149**

Amount of Each Disbursement this Period

112.50

Full Name (Last, First, Middle Initial)

**C. Craig Livingston**

Mailing Address 661 Franklin Ave

City Nutley State NJ Zip Code 07110

Purpose of Disbursement  
Travel Reimbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 06 / 2012

**Transaction ID : SB21B.4147**

Amount of Each Disbursement this Period

270.80

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

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

520.80



**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)  
**WE SERVED AMERICA**

Full Name (Last, First, Middle Initial)

**A. PDQ Printing**

Mailing Address 3820 South Valley View Blvd.

City Las Vegas State NV Zip Code 89103

Purpose of Disbursement  
Printing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 24 / 2012

Transaction ID : SB21B.4131

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**B. PDQ Printing**

Mailing Address 3820 South Valley View Blvd.

City Las Vegas State NV Zip Code 89103

Purpose of Disbursement  
Printing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 24 / 2012

Transaction ID : SB21B.4132

Amount of Each Disbursement this Period

48.77

Full Name (Last, First, Middle Initial)

**C. Renzie Read**

Mailing Address 182 Park Street

City East Orange State NJ Zip Code 07017

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 27 / 2012

Transaction ID : SB21B.4142

Amount of Each Disbursement this Period

892.50

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

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

2941.27

**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)  
**WE SERVED AMERICA**

Full Name (Last, First, Middle Initial)

**A. Renzie Read**

Mailing Address 182 Park Street

City East Orange State NJ Zip Code 07017

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

09 / 06 / 2012

**Transaction ID : SB21B.4146**

Amount of Each Disbursement this Period

332.50

Full Name (Last, First, Middle Initial)

**B. Renzie Read**

Mailing Address 182 Park Street

City East Orange State NJ Zip Code 07017

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

09 / 24 / 2012

**Transaction ID : SB21B.4152**

Amount of Each Disbursement this Period

376.15

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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

708.65

4970.96

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 11 OF 11
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**WE SERVED AMERICA**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>HIPTV, LLC</b>	Nature of Debt (Purpose): Video Production
Mailing Address 8115 Fenton Street Suite 310	
City State Zip Code Silver Spring MD 20910	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID : SD10.4163</b>	
Amount Incurred This Period <input type="text" value="8150.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="8150.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>PDQ Printing</b>	Nature of Debt (Purpose): Printing
Mailing Address 3820 South Valley View Blvd.	
City State Zip Code Las Vegas NV 89103	

Outstanding Balance Beginning This Period <input type="text" value="4201.43"/>	<b>Transaction ID : SD10.4126</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="2048.77"/>	Outstanding Balance at Close of This Period <input type="text" value="2152.66"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="10302.66"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="10302.66"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="10302.66"/>