

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

1. (a) Name of Individual, Organization or Corporation SUSAN B ANTHONY LIST INC		3. FEC Identification Number C C90011313
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1707 L STREET NW STE 550		
(c) City, State and ZIP Code WASHINGTON DC 20036		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Individual filers only	Name of Employer	Occupation

4. TYPE OF REPORT (check appropriate boxes):

(a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year-End Report

24-Hour Report
 48-Hour Report

b) Is this Report an amendment? Yes No

5. COVERING PERIOD: FROM

/ /

THROUGH

/ /

6. TOTAL CONTRIBUTIONS 0.00

7. TOTAL INDEPENDENT EXPENDITURES 16549.89

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 any political party committee or its agent. In addition, (if the independent expenditures reported herein were made by a corporation) I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM	SIGNATURE	DATE
Frank Cannon	<i>Frank Cannon</i>	08/21/2012

[Electronically Filed]

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

For further information, contact:
Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee AMERICAN AIRLINES		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address P.O. BOX 619612 MD 2400		Amount 36.97 Transaction ID : F57.5171
City DFW AIRPORT	State TX	
Purpose of Expenditure Flight	Category/ Type 002	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1718.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee AMERICAN AIRLINES		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address P.O. BOX 619612 MD 2400		Amount 12.50 Transaction ID : F57.5183
City DFW AIRPORT	State TX	
Purpose of Expenditure Airport fees	Category/ Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 154173.53		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee AMERICAN AIRLINES		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address P.O. BOX 619612 MD 2400		Amount 12.50 Transaction ID : F57.5184
City DFW AIRPORT	State TX	
Purpose of Expenditure Airport Fees	Category/ Type 002	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 6385.95		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	61.97
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	
(carry total from last page forward to Line 7)		

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee Brand Imaging Group		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 5358 Mt View Rd,		Amount 966.28 Transaction ID : F57.5175
City Antioch	State TN	
Zip Code 37013	Purpose of Expenditure Bus wrap	Category/ Type 004
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 2856.60		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Emily Buchanan		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 1707 L Street NW Ste 550		Amount 22.50 Transaction ID : F57.5199
City Washington	State DC	
Zip Code 20036	Purpose of Expenditure Meals	Category/ Type 002
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 6730.81		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Billy Cody		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 1707 L Street NW Ste 550		Amount 38.50 Transaction ID : F57.5206
City Washington	State DC	
Zip Code 20036	Purpose of Expenditure Meals	Category/ Type 002
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 6961.81		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1027.28
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures▶ (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee Design 4, Inc.		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 106 North Collins Street		Amount 325.00 Transaction ID : F57.5431
City Plant City	State FL	
Zip Code 33563	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Purpose of Expenditure Bus wrap		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 11184.94		

Full Name (Last, First, Middle Initial) of Payee Carlyle Gregory		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 140 Little Falls Street Suite 104		Amount 26.25 Transaction ID : F57.5195
City Falls Church	State VA	
Zip Code 22046	Category/ Type 002	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Purpose of Expenditure Meals		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 6605.06		

Full Name (Last, First, Middle Initial) of Payee Anne Gray Herring		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 140 Little Falls Street Suite 104		Amount 26.25 Transaction ID : F57.5196
City Falls Church	State VA	
Zip Code 22046	Category/ Type 002	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Purpose of Expenditure Meals		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 6631.31		

(a) SUBTOTAL of Itemized Independent Expenditures.....	377.50
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee Holiday Inn Express and Suites		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 4723 Southern Hills Drive		Amount 126.00 Transaction ID : F57.5163
City Sioux City	State IA	
Zip Code 51106	Purpose of Expenditure Hotel	Category/Type 002
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 1121.30		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Holiday Inn Express and Suites		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 4723 Southern Hills Drive		Amount 441.00 Transaction ID : F57.5165
City Sioux City	State IA	
Zip Code 51106	Purpose of Expenditure Hotel	Category/Type 002
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 1562.30		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Holiday Inn Express and Suites		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 4723 Southern Hills Drive		Amount 441.00 Transaction ID : F57.5166
City Sioux City	State IA	
Zip Code 51106	Purpose of Expenditure Hotel	Category/Type 002
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 154109.03		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	1008.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	
(carry total from last page forward to Line 7)		

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee Holiday Inn Express and Suites		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 4723 Southern Hills Drive		Amount 13.10 Transaction ID : F57.5193
City Sioux City	State IA	
Zip Code 51106	Category/ Type 002	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Purpose of Expenditure Hotel		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 6565.71		

Full Name (Last, First, Middle Initial) of Payee Holiday Inn Express and Suites		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 4723 Southern Hills Drive		Amount 13.10 Transaction ID : F57.5194
City Sioux City	State IA	
Zip Code 51106	Category/ Type 002	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Purpose of Expenditure Hotel		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 6578.81		

Full Name (Last, First, Middle Initial) of Payee Holiday Inn Express and Suites		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 4723 Southern Hills Drive		Amount 126.00 Transaction ID : F57.5343
City Sioux City	State IA	
Zip Code 51106	Category/ Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Purpose of Expenditure Hotel		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 153668.03		

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	152.20
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	
(carry total from last page forward to Line 7)		

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee Hyvee		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 4500 Sergeant Road		Amount 10.83 Transaction ID : F57.5189
City Sioux City	State IA	
Zip Code 51106		
Purpose of Expenditure Gas	Category/ Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 154239.36		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Hyvee		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 4500 Sergeant Road		Amount 10.84 Transaction ID : F57.5190
City Sioux City	State IA	
Zip Code 51106		
Purpose of Expenditure Gas	Category/ Type 002	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 6451.79		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Hyvee		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 4500 Sergeant Road		Amount 100.83 Transaction ID : F57.5191
City Sioux City	State IA	
Zip Code 51106		
Purpose of Expenditure Food	Category/ Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 154340.19		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	122.50
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	
(carry total from last page forward to Line 7)		

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee Hyvee		Date 08 / 20 / 2012
Mailing Address 4500 Sergeant Road		Amount 100.82 Transaction ID : F57.5192
City Sioux City	State IA	
Zip Code 51106	Purpose of Expenditure Food	Category/ Type 002
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 6552.61		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee John L Productions		Date 08 / 20 / 2012
Mailing Address 143 Laurelwood Dr		Amount 3250.00 Transaction ID : F57.5470
City Pike Road	State AL	
Zip Code 36064	Purpose of Expenditure Bus Rental	Category/ Type 002
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 160740.19		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee John L Productions		Date 08 / 20 / 2012
Mailing Address 143 Laurelwood Dr		Amount 3250.00 Transaction ID : F57.5481
City Pike Road	State AL	
Zip Code 36064	Purpose of Expenditure Bus rental	Category/ Type 002
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 10859.94		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	6600.82
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee Greg Letiecq		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 9702 Dublin Drive		Amount 38.50 Transaction ID : F57.5197
City Manassas	State VA	
Zip Code 20109		
Purpose of Expenditure Meals	Category/ Type 002	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 6669.81		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Kaile Mattice		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 15833 Cindy Court		Amount 42.00 Transaction ID : F57.5205
City Canyon Country	State CA	
Zip Code 91387		
Purpose of Expenditure Meals	Category/ Type 002	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 6923.31		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Marilyn Musgrave		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 1707 L Street NW Ste 550		Amount 38.50 Transaction ID : F57.5202
City Washington	State DC	
Zip Code 20036		
Purpose of Expenditure Meals	Category/ Type 002	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 6800.81		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	119.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	
(carry total from last page forward to Line 7)		

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee Steven Musgrave		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 1707 L Street NW Ste 550		Amount 38.50 Transaction ID : F57.5203
City Washington	State DC	
Zip Code 20036	Category/ Type 002	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Purpose of Expenditure Meals		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 6839.31		

Full Name (Last, First, Middle Initial) of Payee Nova Digital Films		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 9702 Dublin Drive		Amount 1147.50 Transaction ID : F57.5178
City Manassa	State VA	
Zip Code 22204	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Purpose of Expenditure Video Production		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 6321.45		

Full Name (Last, First, Middle Initial) of Payee Mallory Quigley		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 1707 L Street NW Ste 550		Amount 31.50 Transaction ID : F57.5201
City Washington	State DC	
Zip Code 20036	Category/ Type 002	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Purpose of Expenditure Meals		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 6762.31		

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	1217.50
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	
(carry total from last page forward to Line 7)		

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee Mark Roepke		Date 08 / 20 / 2012
Mailing Address 5550 Columbia Pike #742		Amount 1800.00 Transaction ID : F57.5176
City Arlington	State VA	
Purpose of Expenditure Bus Tour Management	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 4656.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Mark Roepke		Date 08 / 20 / 2012
Mailing Address 5550 Columbia Pike #742		Amount 517.35 Transaction ID : F57.5177
City Arlington	State VA	
Purpose of Expenditure Travel Expenses	Category/ Type 002	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 5173.95		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Mark Roepke		Date 08 / 20 / 2012
Mailing Address 5550 Columbia Pike #742		Amount 42.00 Transaction ID : F57.5204
City Arlington	State VA	
Purpose of Expenditure Meals	Category/ Type 002	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 6881.31		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	2359.35
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	
(carry total from last page forward to Line 7)		

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee Mark Roepke		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 5550 Columbia Pike #742		Amount 200.00 Transaction ID : F57.5427
City Arlington	State VA	
Zip Code 22204	Purpose of Expenditure Meals	Category/ Type 002
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 7209.94		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Mark Roepke		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 5550 Columbia Pike #742		Amount 400.00 Transaction ID : F57.5429
City Arlington	State VA	
Zip Code 22204	Purpose of Expenditure Mileage	Category/ Type 002
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 7609.94		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Laura Schaefer		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 1707 L Street NW Ste 550		Amount 38.50 Transaction ID : F57.5198
City Washington	State DC	
Zip Code 20036	Purpose of Expenditure Meals	Category/ Type 002
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 6708.31		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	638.50
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee Shell		Date 08 / 20 / 2012
Mailing Address 1302 N. 24th Street		Amount 24.41 Transaction ID : F57.5435
City Clear Lake	State IA	
Zip Code 50428	Purpose of Expenditure Gas	Category/ Type 002
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 181997.68		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Shell		Date 08 / 20 / 2012
Mailing Address 1302 N. 24th Street		Amount 24.41 Transaction ID : F57.5443
City Clear Lake	State IA	
Zip Code 50428	Purpose of Expenditure Gas	Category/ Type 002
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 11586.56		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Jill Stanek		Date 08 / 20 / 2012
Mailing Address 11664 Sundance Trail		Amount 48.13 Transaction ID : F57.5200
City Mokena	State IL	
Zip Code 60448	Purpose of Expenditure Meals	Category/ Type 002
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 7009.94		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	96.95
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee SuperShuttle		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 14500 N. Northsight Blvd. Suite 329		Amount 20.00 Transaction ID : F57.5179
City Scottsdale	State AZ	
Zip Code 85260	Category/ Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Purpose of Expenditure Airport Fees		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 154129.03		

Full Name (Last, First, Middle Initial) of Payee SuperShuttle		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 14500 N. Northsight Blvd. Suite 329		Amount 20.00 Transaction ID : F57.5180
City Scottsdale	State AZ	
Zip Code 85260	Category/ Type 002	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Purpose of Expenditure Airport Fees		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 6341.45		

Full Name (Last, First, Middle Initial) of Payee The Printing Express		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 21 Warehouse Rd		Amount 377.21 Transaction ID : F57.5432
City Harrisonburg	State VA	
Zip Code 22801	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Purpose of Expenditure Palm cards		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 11562.15		

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	417.21
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	
(carry total from last page forward to Line 7)		

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee The Printing Express		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 21 Warehouse Rd		Amount 1886.06 Transaction ID : F57.5433
City Harrisonburg	State VA	
Zip Code 22801		
Purpose of Expenditure Palm cards	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 181423.27		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee United Airlines		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 6000 N Terminal Pkwy		Amount 40.76 Transaction ID : F57.5167
City Atlanta	State GA	
Zip Code 30337		
Purpose of Expenditure Flight	Category/ Type 002	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1603.06		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee US AIRWAYS		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 111 W RIO SALADO PKWY		Amount 23.08 Transaction ID : F57.5168
City TEMPE	State AZ	
Zip Code 85281		
Purpose of Expenditure Flight	Category/ Type 002	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1626.14		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	1949.90
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	
(carry total from last page forward to Line 7)		

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee US AIRWAYS		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 111 W RIO SALADO PKWY		Amount 28.85 Transaction ID : F57.5169
City TEMPE	State AZ	
Zip Code 85281		
Purpose of Expenditure Flight	Category/ Type 002	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1654.99		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee US AIRWAYS		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 111 W RIO SALADO PKWY		Amount 26.64 Transaction ID : F57.5170
City TEMPE	State AZ	
Zip Code 85281		
Purpose of Expenditure Flight	Category/ Type 002	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1681.63		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee US AIRWAYS		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 111 W RIO SALADO PKWY		Amount 57.24 Transaction ID : F57.5172
City TEMPE	State AZ	
Zip Code 85281		
Purpose of Expenditure Flight	Category/ Type 002	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1775.84		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	112.73
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures▶ (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee US AIRWAYS		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 111 W RIO SALADO PKWY		Amount 57.24 Transaction ID : F57.5173
City TEMPE	State AZ	
Zip Code 85281		
Purpose of Expenditure Flight	Category/ Type 002	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1833.08		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee US AIRWAYS		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 111 W RIO SALADO PKWY		Amount 57.24 Transaction ID : F57.5174
City TEMPE	State AZ	
Zip Code 85281		
Purpose of Expenditure Flight	Category/ Type 002	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1890.32		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee US AIRWAYS		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 111 W RIO SALADO PKWY		Amount 32.00 Transaction ID : F57.5181
City TEMPE	State AZ	
Zip Code 85281		
Purpose of Expenditure Airport Fees	Category/ Type 002	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 6373.45		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	146.48
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	
(carry total from last page forward to Line 7)		

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee US AIRWAYS		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 111 W RIO SALADO PKWY		Amount 32.00 Transaction ID : F57.5182
City TEMPE	State AZ	
Zip Code 85281	Category/Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Purpose of Expenditure Airport Fees		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 154161.03		

Full Name (Last, First, Middle Initial) of Payee US AIRWAYS		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 111 W RIO SALADO PKWY		Amount 30.00 Transaction ID : F57.5185
City TEMPE	State AZ	
Zip Code 85281	Category/Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Purpose of Expenditure Airport fees		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 154203.53		

Full Name (Last, First, Middle Initial) of Payee US AIRWAYS		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 111 W RIO SALADO PKWY		Amount 30.00 Transaction ID : F57.5186
City TEMPE	State AZ	
Zip Code 85281	Category/Type 002	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Purpose of Expenditure Airport fees		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 6415.95		

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	92.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	▶	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee US AIRWAYS		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 111 W RIO SALADO PKWY		Amount 25.00 Transaction ID : F57.5187
City TEMPE	State AZ	
Zip Code 85281	Category/Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Purpose of Expenditure Airport fees		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 154228.53		

Full Name (Last, First, Middle Initial) of Payee US AIRWAYS		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 111 W RIO SALADO PKWY		Amount 25.00 Transaction ID : F57.5188
City TEMPE	State AZ	
Zip Code 85281	Category/Type 002	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President
Purpose of Expenditure Airport fees		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 6440.95		

Full Name (Last, First, Middle Initial) of Payee		Date MM / DD / YYYY
Mailing Address		Amount
City	State	
Zip Code	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Purpose of Expenditure		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought		

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	50.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	▶	16549.89