

**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

ROCK THE RED POLITICAL ACTION COMMITTEE INC (ROCK THE RED)

ADDRESS (number and street) ▼

9935 D REA ROAD SUITE 101

☐ Check if different than previously reported. (ACC)

CHARLOTTE

NC

28277

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00522607

3. IS THIS  
REPORTNEW  
(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:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
04 01 2012

through

M M M / D D D / Y Y Y Y Y Y  
06 30 2012

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 Teresa Ann Hoefl

Signature of Treasurer

Teresa Ann Hoefl

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
07 15 2012

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)

Page 2

Write or Type Committee Name

**ROCK THE RED POLITICAL ACTION COMMITTEE INC (ROCK THE RED)**

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
04 / 01 / 2012 To: M M / D D / Y Y Y Y Y Y  
06 / 30 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2012</span>		<span style="border: 1px solid black; padding: 2px;">9000.00</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">9000.00</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">8277.00</span>	<span style="border: 1px solid black; padding: 2px;">8277.00</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">17277.00</span>	<span style="border: 1px solid black; padding: 2px;">17277.00</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">26076.00</span>	<span style="border: 1px solid black; padding: 2px;">26076.00</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">-8799.00</span>	<span style="border: 1px solid black; padding: 2px;">-8799.00</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">9000.00</span>	

☒ 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)

Page 3

Write or Type Committee Name

**ROCK THE RED POLITICAL ACTION COMMITTEE INC (ROCK THE RED)**

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y  
04 01 2012

To:

M M / D D / Y Y Y Y Y  
06 30 2012

**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).....

3000.00

3000.00

(ii) Unitemized .....

277.00

277.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

3277.00

3277.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

5000.00

5000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

8277.00

8277.00

## 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))..... ▶

8277.00

8277.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

8277.00

8277.00

**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. 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 .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
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) .....	26076.00	26076.00
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)) ..	26076.00	26076.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	26076.00	26076.00

**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) .....	8277.00	8277.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	8277.00	8277.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	0.00	0.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 11

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

**ROCK THE RED POLITICAL ACTION COMMITTEE INC (ROCK THE RED)**

Full Name (Last, First, Middle Initial)

## **A. Logic Manufacturing, Inc.**

Mailing Address 4009 Fawnbrooke Drive

City State Zip Code  
Indian Trail NC 28079

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 08 / 2012

**Transaction ID : SA11AI.4146**

Amount of Each Receipt this Period

2500.00

Startup Donation

Full Name (Last, First, Middle Initial)

## **B. Chris Partridg**

Mailing Address 2308 Newtown Avenue

City State Zip Code  
Astoria NY 11102

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RE Investments

Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2012

**Transaction ID : SA11AI.4110**

Amount of Each Receipt this Period

500.00

Donation

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

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

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

3000.00

3000.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 11

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**ROCK THE RED POLITICAL ACTION COMMITTEE INC (ROCK THE RED)**

Full Name (Last, First, Middle Initial)

## **A. FAMILY RESEARCH COUNCIL ACTION POLITICAL ACTION COMMITTEE**

Mailing Address 801 G STREET NW

City  
WASHINGTON

State Zip Code  
DC 20001

FEC ID number of contributing  
federal political committee.

**C** C00452383

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**06 / 13 / 2012**

**Transaction ID : SA11C.4123**

Amount of Each Receipt this Period

5000.00

donation

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City

State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City

State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

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

5000.00

5000.00

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 8 OF 11

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**ROCK THE RED POLITICAL ACTION COMMITTEE INC (ROCK THE RED)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Teresa Ann Hoefl**Nature of Debt (Purpose):  
Event Booking Loan

Mailing Address 815 Beauhaven Lane

City State

Zip Code

Waxhaw

NC

28173

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4127

Amount Incurred This Period

1500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Teresa Ann Hoefl**Nature of Debt (Purpose):  
Event Deposit Loan

Mailing Address 815 Beauhaven Lane

City State

Zip Code

Waxhaw

NC

28173

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4126

Amount Incurred This Period

7500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7500.00

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

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

9000.00

2) **TOTALS** This Period (last page this line number only)..... ►

9000.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

9000.00



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

 PAGE 9 OF 11  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>ROCK THE RED POLITICAL ACTION COMMITTEE INC (ROCK THE RED)</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00522607       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>		

Full Name (Last, First, Middle Initial) of Payee <b>Adams Outdoor Advertising of Charlotte NC</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div> 06 / 08 / 2012
Mailing Address 1134 N. Graham Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">5500.00</div>
City Charlotte	State NC	
Zip Code 28026	Transaction ID : SE.4134	
Purpose of Expenditure Medai Billboard	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: NC District: _____
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 <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">5500.00</div>		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 <b>Adams Outdoor Advertising of Charlotte NC</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div> 06 / 14 / 2012
Mailing Address 1134 N. Graham Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">500.00</div>
City Charlotte	State NC	
Zip Code 28026	Transaction ID : SE.4130	
Purpose of Expenditure Media/Billboards	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: NC District: _____
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 <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">10000.00</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">6000.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></div>
(c) <b>TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></div>

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.

Teresa Ann Hoefl

[Electronically Filed]

Date

MM / DD / YYYY

  
 07 / 15 / 2012

Signature

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

 PAGE 10 OF 11  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>ROCK THE RED POLITICAL ACTION COMMITTEE INC (ROCK THE RED)</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00522607       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Charlotte Regional Visitors Authority</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> </div>
Mailing Address 2700 East Independence Blvd		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">4000.00</span> </div>
City Charlotte	State NC	
Zip Code 28205	<b>Transaction ID : SE.4142</b>	
Purpose of Expenditure Coliseum Rental Deposit	Category/ Type <span style="border: 1px solid black; padding: 2px;">007</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: NC District:
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 <span style="border: 1px solid black; padding: 2px;">9500.00</span>		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 <b>Charlotte Regional Visitors Authority</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> </div>
Mailing Address 2700 East Independence Blvd		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">7500.00</span> </div>
City Charlotte	State NC	
Zip Code 28205	<b>Transaction ID : SE.4143</b>	
Purpose of Expenditure Coliseum Rent Deposit	Category/ Type <span style="border: 1px solid black; padding: 2px;">007</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: NC District:
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 <span style="border: 1px solid black; padding: 2px;">26076.00</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">11500.00</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

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.

Teresa Ann Hoefl

Signature

[Electronically Filed]

Date

MM / DD / YYYY

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

 PAGE 11 OF 11  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>ROCK THE RED POLITICAL ACTION COMMITTEE INC (ROCK THE RED)</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00522607
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee <b>Webpro360.com</b>		Date MM / DD / YYYY <b>06 / 15 / 2012</b>
Mailing Address <b>2017 Apogee Drive</b>		Amount <b>390.00</b>
City <b>Indian Trail</b>	State <b>NC</b>	
Zip Code <b>28079</b>		Transaction ID : <b>SE.4148</b>
Purpose of Expenditure Media/Web	Category/ Type <b>004</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: <b>NC</b> District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>10390.00</b>		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 <b>Womble Carlyle Sandridge &amp; Rice LLP</b>		Date MM / DD / YYYY <b>06 / 27 / 2012</b>
Mailing Address <b>301 South College Street</b>		Amount <b>8186.00</b>
City <b>Charlotte</b>	State <b>NC</b>	
Zip Code <b>28202</b>		Transaction ID : <b>SE.4150</b>
Purpose of Expenditure Legal Expense	Category/ Type <b>001</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: <b>NC</b> District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>18576.00</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<b>8576.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures.....	<b>26076.00</b>

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.

Teresa Ann Hoefl

[Electronically Filed]

Date

MM / DD / YYYY  
**07 / 15 / 2012**

Signature