

# 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 Melaleuca, Inc. ✓		3. FEC Identification Number C
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 3910 S. Yellowstone Hwy. ✓		
(c) City, State and ZIP Code Idaho Falls, Idaho 83402 ✓		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? <input 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

10 ' 25 ' 20 12  
THROUGH  
10 ' 25 ' 20 12

### 6. TOTAL CONTRIBUTIONS

0.00

### 7. TOTAL INDEPENDENT EXPENDITURES

7,995.00

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

Cole Clinger

*Cole Clinger*

10/25/12

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 800-424-9630, Local 202-694-1100

**SCHEDULE 5-A**  
**ITEMIZED RECEIPTS**

PAGE	OF
2	4

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 FILER (in Full)

A. Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address			MM / DD / YYYY
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation	

B. Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address			MM / DD / YYYY
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation	

C. Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address			MM / DD / YYYY
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation	

D. Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address			MM / DD / YYYY
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation	

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

TOTAL This Period (last page carry total to Line 6) ..... ➤

**SCHEDULE 5-E**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 3 OF 4  
 FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Melaleuca, Inc.

Full Name (Last, First, Middle Initial) of Payee

KBLV

Date

10 ' 25 ' 2012

Mailing Address

810 W. 200 N.

Amount

City

Logan

State

Utah

Zip Code

84321

, 705.00

Purpose of Expenditure

Radio Advertisement

Category/  
Type 0 0 4

Office Sought:

☐ House

State: \_\_\_\_\_

☐ Senate

District: \_\_\_\_\_

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Mitt Romney

Calendar Year-To-Date Per Election  
for Office SoughtDisbursement For: ☐ Primary ☒ General☐ Other (specify) \_\_\_\_\_

Full Name (Last, First, Middle Initial) of Payee

KCVI

Date

10 ' 25 ' 2012

Mailing Address

810 W. 200 N.

Amount

City

Logan

State

Utah

Zip Code

84321

, 1,410.00

Purpose of Expenditure

Radio Advertisement

Category/  
Type 0 0 4

Office Sought:

☐ House

State: \_\_\_\_\_

☐ Senate

District: \_\_\_\_\_

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Mitt Romney

Calendar Year-To-Date Per Election  
for Office SoughtDisbursement For: ☐ Primary ☒ General☐ Other (specify) \_\_\_\_\_

Full Name (Last, First, Middle Initial) of Payee

KFTZ

Date

10 ' 25 ' 2012

Mailing Address

980 N. Michigan Ave., Suite 1880

Amount

City

Chicago

State

Illinois

Zip Code

60611

, 1,944.00

Purpose of Expenditure

Radio Advertisement

Category/  
Type 0 0 4

Office Sought:

☐ House

State: \_\_\_\_\_

☐ Senate

District: \_\_\_\_\_

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Mitt Romney

Calendar Year-To-Date Per Election  
for Office SoughtDisbursement For: ☐ Primary ☒ General☐ Other (specify) \_\_\_\_\_

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶ , 4,059.00

(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**
**PAGE 4 OF 4**  
**FOR LINE 7 OF FORM 6**

NAME OF FILER (In Full)

Melaleuca, Inc.

Full Name (Last, First, Middle Initial) of Payee

KLCE

Date

10 / 25 / 2012

Mailing Address

810 W. 200 N.

Amount

2,490.00

City

Logan

State

Utah

Zip Code

84321

Purpose of Expenditure

Radio Advertisement

Category/  
Type

004

Office Sought:

☐ House

State: \_\_\_\_\_

☐ Senate

District: \_\_\_\_\_

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Mitt Romney

Calendar Year-To-Date Per Election  
for Office Sought

Disbursement For:

☐ Primary☒ General☐ Other (specify) \_\_\_\_\_

Full Name (Last, First, Middle Initial) of Payee

KTHK

Date

10 / 25 / 2012

Mailing Address

980 N. Michigan Ave., Suite 1880

Amount

1,446.00

City

Chicago

State

Illinois

Zip Code

60611

Purpose of Expenditure

Radio Advertisement

Category/  
Type

004

Office Sought:

☐ House

State: \_\_\_\_\_

☐ Senate

District: \_\_\_\_\_

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Mitt Romney

Calendar Year-To-Date Per Election  
for Office Sought

Disbursement For:

☐ Primary☒ General☐ Other (specify) \_\_\_\_\_

Full Name (Last, First, Middle Initial) of Payee

Date

Mailing Address

Amount

City

State

Zip Code

Purpose of Expenditure

Category/  
Type

Office Sought:

☐ House

State: \_\_\_\_\_

☐ Senate

District: \_\_\_\_\_

☐ President

Check One:

☐ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Calendar Year-To-Date Per Election  
for Office Sought

Disbursement For:

☐ Primary☐ General☐ Other (specify) \_\_\_\_\_

(a) SUBTOTAL of Itemized Independent Expenditures.....

3,936.00

(b) SUBTOTAL of Unitemized Independent Expenditures.....

(c) TOTAL Independent Expenditures.....  
(carry total from last page forward to Line 7)

7,995.00

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked Delivery Confirmation™ Label <input type="checkbox"/>
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input checked="" type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<p>The document preceding this page was received by FAX at the FEC. The receiving FAX machine has printed at the bottom of each page the date and time of receipt, the phone number of the transmitting machine and the sequential page numbers.</p>	
N/A PREPARER (5/2004)	N/A DATE PREPARED