

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

TFP-FOJB COMMITTEE

ADDRESS (number and street)

320 FIRST STREET, SE

☐ Check if different than previously reported. (ACC)

WASHINGTON

DC

20003

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00492355

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:

☐ 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 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 Y

in the State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

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 LISA LISKER

Signature of Treasurer

LISA LISKER

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

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

TFP-FOJB COMMITTEE

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
10		01		2011

To:

M M	/	D D	/	Y Y Y Y Y
12		31		2011

	COLUMN A This Period	COLUMN B Calendar Year-to-Date																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																		
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colspan="5">2011</td></tr></table>	Y	Y	Y	Y	Y	2011						<table><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><t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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

TFP-FOJB COMMITTEE

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		0	1		2	0	1	1		

To:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	2		3	1		2	0	1	1		

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).....

45750.00

458400.00

(ii) Unitemized

1809.09

20009.09

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

47559.09

478409.09

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

68500.00

709000.00

(d) Total Contributions (add Lines

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

Totals to Line 33, page 5)

116059.09

1187409.09

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

695.00

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)).....▶

116059.09

1188104.09

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

116059.09

1188104.09

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	110242.87	313121.38
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	110242.87	313121.38
22. Transfers to Affiliated/Other Party Committees.....	0.00	752905.39
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)) ..	110242.87	1066026.77
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	110242.87	1066026.77

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)	116059.09	1187409.09
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	116059.09	1187409.09
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	110242.87	313121.38
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	695.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	110242.87	312426.38

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 30

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

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NAME OF COMMITTEE (In Full)

TFP-FOJB COMMITTEE

Full Name (Last, First, Middle Initial)

A. MR. C. SCOTT BARNHART

Mailing Address 1122 W NEW HAMPSHIRE ST.

City

ORLANDO

State

FL

Zip Code

32804-5759

FEC ID number of contributing
federal political committee.

C

Name of Employer

JENKINS HILL GROUP

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

10 / 18 / 2011

Transaction ID : SA11.12352

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. MS. RHONDA A. BENTZ

Mailing Address 3532 S. STAFFORD ST.

City

ARLINGTON

State

VA

Zip Code

22206-1812

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

11 / 14 / 2011

Transaction ID : SA11.24432

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. MR. MICHAEL J. BOLAND

Mailing Address 2 THOMPSON STREET

City

ANNAPOLIS

State

MD

Zip Code

21401-2806

FEC ID number of contributing
federal political committee.

C

Name of Employer

DOMA ADVISORS LLC

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8500.00

Date of Receipt

12 / 20 / 2011

Transaction ID : SA11.319117

Amount of Each Receipt this Period

8500.00

CONTRIBUTION

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

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

10500.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

TFP-FOJB COMMITTEE

Full Name (Last, First, Middle Initial)

A. MR. ALAN DABROW

Mailing Address 100 GRAYS LN.

City

HAVERFORD

State

PA

Zip Code

19041-1727

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : SA11.320051

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. MR. BRUCE K. GOULD

Mailing Address 1110 SW. IVANHOE BLVD.
APT. 7

City

ORLANDO

State

FL

Zip Code

32804-6323

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : SA11.320056

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. PAUL KERR

Mailing Address 960 GEORGE WILSON RD

City

BELTON

State

TX

Zip Code

76513-4291

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 20 / 2011

Transaction ID : SA11.319057

Amount of Each Receipt this Period

250.00

CONTRIBUTION

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

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

3250.00

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

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

FOR LINE NUMBER: PAGE 8 OF 30
(check only one)

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NAME OF COMMITTEE (In Full)

TFP-FOJB COMMITTEE

Full Name (Last, First, Middle Initial)

A. MR. ANDREW P. KLEIN

Mailing Address 107 W. JARRETTSVILLE RD.

City State Zip Code
 FOREST HILL MD 21050-1319

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : SA11.320053

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. MR. CHAD M. KOLTON

Mailing Address 3053 HAZELTON ST.

City State Zip Code
 FALLS CHURCH VA 22044-1716

FEC ID number of contributing
federal political committee.

C

Name of Employer

HDMK

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 14 2011

Transaction ID : SA11.12351

Amount of Each Receipt this Period

7500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. MR. JEFFREY E. LEVINE

Mailing Address 42-09 235TH ST.

City State Zip Code
 DOUGLASTON NY 11363-1526

FEC ID number of contributing
federal political committee.

C

Name of Employer

BUILDER

Occupation

SELF EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : SA11.320052

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

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

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

11500.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TFP-FOJB COMMITTEE

Full Name (Last, First, Middle Initial)

A. MR. MORTON M. MOWER

Mailing Address 3908 N. CHARLES ST.
 APT. 1001

City State Zip Code
 BALTIMORE MD 21218-1753

FEC ID number of contributing
 federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : SA11.320054

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. MR. RANDALL M. RUSSELL

Mailing Address 940 SWINKS MILL RD.

City State Zip Code
 MCLEAN VA 22102-2127

FEC ID number of contributing
 federal political committee.

C

Name of Employer

LESHER & RUSSELL INC

Occupation

LOBBYIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 11 01 2011

Transaction ID : SA11.18126

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. MR. J. C. SCOTT

Mailing Address 3118 MILITARY RD.

City State Zip Code
 ARLINGTON VA 22207-4136

FEC ID number of contributing
 federal political committee.

C

Name of Employer

ACLI FINANCIAL SECURITY

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 11 14 2011

Transaction ID : SA11.24433

Amount of Each Receipt this Period

500.00

CONTRIBUTION

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

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

4500.00

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)

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NAME OF COMMITTEE (In Full)

TFP-FOJB COMMITTEE

Full Name (Last, First, Middle Initial)

A. MR. TIMOTHY H. SCULLY JR.

Mailing Address 619 LAURA DR.

City

FALLS CHURCH

State

VA

Zip Code

22046-2843

FEC ID number of contributing
federal political committee.

C

Name of Employer

FIERCE, ISAKOWITZ & BLALOCK

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

11 / 14 / 2011

Transaction ID : SA11.24431

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. MR. KENNETH B. SEGEL

Mailing Address 1 OAK RIDGE

City

MENANDS

State

NY

Zip Code

12204-2232

FEC ID number of contributing
federal political committee.

C

Name of Employer

SCHUYLER COMPANIES

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

12 / 31 / 2011

Transaction ID : SA11.320055

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. MR. JOSEPH L. SEIDEL

Mailing Address 8058 GLENDALE RD.

City

CHEVY CHASE

State

MD

Zip Code

20815-5901

FEC ID number of contributing
federal political committee.

C

Name of Employer

CREDIT SUISSE SECURITIES

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

12 / 31 / 2011

Transaction ID : SA11.319007

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

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

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

16000.00

45750.00

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 11 OF 30

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

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NAME OF COMMITTEE (In Full)

TFP-FOJB COMMITTEE

Full Name (Last, First, Middle Initial)

A. ADM PAC

Mailing Address 26W110 SANDPIPER COURT

City
WHEATON

State
IL

Zip Code
60188-4541

FEC ID number of contributing
federal political committee.

C

C00093963

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 Y
11 / 01 / 2011

Transaction ID : SA11.18122

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. ADVANCED MEDICAL TECHNOLOGY ASSN PAC

Mailing Address 701 PENNSYLVANIA AVE. NW
STE. 800

City
WASHINGTON

State
DC

Zip Code
20004-2654

FEC ID number of contributing
federal political committee.

C

C00340356

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 21 / 2011

Transaction ID : SA11.25082

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. AMERICAN BEVERAGE ASSOCIATION PAC

Mailing Address 1101 16TH STREET N.W.

City
WASHINGTON

State
DC

Zip Code
20036-4829

FEC ID number of contributing
federal political committee.

C

C00100107

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 Y
11 / 01 / 2011

Transaction ID : SA11.18121

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

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

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

6000.00

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 12 OF 30

☐ 11a ☐ 11b ☒ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TFP-FOJB COMMITTEE

Full Name (Last, First, Middle Initial)

A. CAREMARK RX INC. PAC

Mailing Address 1300 I ST. NW
STE. 525 W.

City WASHINGTON State DC Zip Code 20005-3306

FEC ID number of contributing
federal political committee.

C C00384818

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

11 / **16** / **2011**

Transaction ID : SA11.24960

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. CIGAR PAC

Mailing Address 818 CONNECTICUT AVE.
STE. 200

City WASHINGTON State DC Zip Code 20006-2742

FEC ID number of contributing
federal political committee.

C C00121350

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

11 / **14** / **2011**

Transaction ID : SA11.24430

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. COAL PAC

Mailing Address 101 CONSTITUTION AVE. NW
STE. 500 E.

City WASHINGTON State DC Zip Code 20001-2133

FEC ID number of contributing
federal political committee.

C C00109819

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

12 / **31** / **2011**

Transaction ID : SA11.320049

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

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

10000.00

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

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 13 OF 30

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

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NAME OF COMMITTEE (In Full)

TFP-FOJB COMMITTEE

Full Name (Last, First, Middle Initial)

A. DIRECTV GROUP, INC PAC

Mailing Address 901 F ST. NW STE. 600

City
WASHINGTON

State Zip Code
DC 20004-1417

FEC ID number of contributing
federal political committee.

C C00331991

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 22 2011

Transaction ID : SA11.315610

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. FERT PAC

Mailing Address 425 THIRD ST. SW.

City
WASHINGTON

State Zip Code
DC 20024-3206

FEC ID number of contributing
federal political committee.

C C00085910

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
11 14 2011

Transaction ID : SA11.24437

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. MEDCO HEALTH PAC

Mailing Address 2350 KERNER BLVD.
STE. 250

City
SAN RAFAEL

State Zip Code
CA 94901-5596

FEC ID number of contributing
federal political committee.

C C00384362

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 01 2011

Transaction ID : SA11.309791

Amount of Each Receipt this Period

7500.00

CONTRIBUTION

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

20000.00

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

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 14 OF 30

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

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NAME OF COMMITTEE (In Full)

TFP-FOJB COMMITTEE

Full Name (Last, First, Middle Initial)

A. MINE PAC

Mailing Address 101 CONSTITUTION AVE. NW
STE 500 E

City State Zip Code
WASHINGTON DC 20001-2133

FEC ID number of contributing
federal political committee.

C C00304634

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : SA11.320050

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. NATIONAL PORK PRODUCERS COUNCIL PORK PAC

Mailing Address P.O. BOX 10383

City State Zip Code
DES MOINES IA 50306-0383

FEC ID number of contributing
federal political committee.

C C00201871

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 01 2011

Transaction ID : SA11.18124

Amount of Each Receipt this Period

3000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. NATIONAL TURKEY FEDERATION PAC

Mailing Address 1226 NEW YORK AVE. NW
STE. 400

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing
federal political committee.

C C00076182

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 Y
11 04 2011

Transaction ID : SA11.321388

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

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

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

10500.00

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)

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

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NAME OF COMMITTEE (In Full)

TFP-FOJB COMMITTEE

Full Name (Last, First, Middle Initial)

A. NYSE EURONEXT PAC

Mailing Address 607 14TH ST. NW.
STE. 800

City State Zip Code
WASHINGTON DC 20005-2005

FEC ID number of contributing
federal political committee.

C C00402974

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

11 / **14** / **2011**

Transaction ID : SA11.24435

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. RJ REYNOLDS PAC

Mailing Address 401 N. MAIN ST.
P.O. BOX 718

City State Zip Code
WINSTON SALEM NC 27101-3804

FEC ID number of contributing
federal political committee.

C C00042002

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

12 / **01** / **2011**

Transaction ID : SA11.309792

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. SIEMENS CORPORATION PAC

Mailing Address 300 NEW JERSEY AVE. NW.
STE. 1000

City State Zip Code
WASHINGTON DC 20001-2268

FEC ID number of contributing
federal political committee.

C C00353797

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

11 / **14** / **2011**

Transaction ID : SA11.24436

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

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

9500.00

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

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)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TFP-FOJB COMMITTEE

Full Name (Last, First, Middle Initial)

A. SPRINT NEXTEL PAC

Mailing Address 2001 EDMUND HALLEY DR.

City
RESTON

State
VA

Zip Code
20191-3436

FEC ID number of contributing
federal political committee.

C C00089342

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

11 / **14** / **2011**

Transaction ID : SA11.24434

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. THE AMERICAN INSTITUTE OF ARCHITECTS PAC

Mailing Address 1735 NEW YORK AVE. NW

City
WASHINGTON

State
DC

Zip Code
20006-5209

FEC ID number of contributing
federal political committee.

C C00139071

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

11 / **21** / **2011**

Transaction ID : SA11.25081

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. THE NATIONAL COUNCIL OF FARMER COOPERATIVES PAC

Mailing Address 50 F ST. NW
STE. 900

City
WASHINGTON

State
DC

Zip Code
20001-1530

FEC ID number of contributing
federal political committee.

C C00002238

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

11 / **01** / **2011**

Transaction ID : SA11.18123

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

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

10000.00

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

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 17 OF 30

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

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NAME OF COMMITTEE (In Full)

TFP-FOJB COMMITTEE

Full Name (Last, First, Middle Initial)

A. TYPAC

Mailing Address P.O. BOX 2020

City

SPRINGDALE

State

AR

Zip Code

72765-2020

FEC ID number of contributing
federal political committee.

C

C00492355

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 01 / 2011

Transaction ID : SA11.18125

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

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
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

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

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
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y 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)..... ►

2500.00

68500.00

<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

TFP-FOJB COMMITTEE

A. MR. CORY FRITZ

Date of Disbursement

11 / 28 / 2011

Transaction ID : SB21.27

Amount of Each Disbursement this Period

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. MR. KEVIN W. MCGRANN

Date of Disbursement

City	State	Zip Code
WASHINGTON	DC	20003

Transaction ID : SB21.35

Purpose of Disbursement	TRAVEL
-------------------------	--------

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Full Name (Last, First, Middle Initial)

C. 123Together.com

Date of Disbursement

Mailing Address 309 Waverly Oaks Road, Suite 301

City	State	Zip Code
WALTHAM	MA	02452

Transaction ID : SB21.1

Purpose of Disbursement	OFFICE SUPPLIES
-------------------------	-----------------

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

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

6462.45

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 PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 30

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

TFP-FOJB COMMITTEE

Full Name (Last, First, Middle Initial)

A. ACCURATE WORD LLC

Mailing Address 4481 SOUTHERN BUSINESS PARK DR.

City WHITE PLAINS State MD Zip Code 20695

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 24 2011
Transaction ID : SB21.13

Amount of Each Disbursement this Period

164.95

Full Name (Last, First, Middle Initial)

B. Bogart Associates, Inc.

Mailing Address 1200 Trinity Drive

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 10 2011
Transaction ID : SB21.22

Amount of Each Disbursement this Period

733.82

Full Name (Last, First, Middle Initial)

C. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE.

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 02 2011
Transaction ID : SB21.15

Amount of Each Disbursement this Period

79.95

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

978.72

<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

TFP-FOJB COMMITTEE

10362.02

<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

TFP-FOJB COMMITTEE

A. CPAC

Category/
Type

2000.00

State: District:

B. DC TASTE

Category/
Type

1428.00

State: District:

C. ELAVON

Category/
Type

138.95

State: District:

3566.95

<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

TFP-FOJB COMMITTEE

A. EPIPHANY PRODUCTIONS

Date of Disbursement

Transaction ID : SB21.12

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

2500.00

B. EPIPHANY PRODUCTIONS

Date of Disbursement

Transaction ID : SB21.25

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

3098.11

C. EPIPHANY PRODUCTIONS

Date of Disbursement

Transaction ID : SB21.26

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

4488.88

10086.99

[illegible]

<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

NAME OF COMMITTEE (In Full)
TFP-FOJB COMMITTEE

A. EPIPHANY PRODUCTIONS

Mailing Address 104 HUME AVE.

City	State	Zip Code
ALEXANDRIA	VA	22301

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : SB21.8

Amount of Each Disbursement this Period

6748.09

Full Name (Last, First, Middle Initial)

B. iCONTRIBUTE LLC

Mailing Address 725 8TH ST. SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement	CREDIT CARD MERCHANT FEES
-------------------------	---------------------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y
12 20 2011

Transaction ID : SB21.37

Amount of Each Disbursement this Period

Age Group	Number of People
13-17	444.15
18-24	~350
25-34	~300
35-44	~250
45-54	~200
55-64	~150
65-74	~100
75-84	~50
85+	~20

Full Name (Last, First, Middle Initial)

C. iCONTRIBUTE LLC

Mailing Address 725 8TH ST. SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21.38

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	13.99
25-34	13.99
35-44	13.99
45-54	13.99
55-64	13.99
65-74	13.99
75-84	13.99
85+	13.99

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

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

7206.23

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 30

<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)

TFP-FOJB COMMITTEE

Full Name (Last, First, Middle Initial)

A. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Mailing Address 320 FIRST ST. SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
FACILITY RENTAL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2011

Transaction ID : SB21.10

Amount of Each Disbursement this Period

3412.50

Full Name (Last, First, Middle Initial)

B. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Mailing Address 320 FIRST ST. SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
FACILITY RENTAL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2011

Transaction ID : SB21.18

Amount of Each Disbursement this Period

487.50

Full Name (Last, First, Middle Initial)

C. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Mailing Address 320 FIRST ST. SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
FACILITY RENTAL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		05		2011

Transaction ID : SB21.30

Amount of Each Disbursement this Period

487.50

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

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

4387.50

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

TFP-FOJB COMMITTEE

Full Name (Last, First, Middle Initial)

A. NJI MEDIA

Mailing Address 201 King Street Suite 202

City ALEXANDRIA State VA Zip Code 22134

Purpose of Disbursement
MEDIA CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2011
Transaction ID : SB21.16

Amount of Each Disbursement this Period

5760.00

Full Name (Last, First, Middle Initial)

B. NJI MEDIA

Mailing Address 201 King Street Suite 202

City ALEXANDRIA State VA Zip Code 22134

Purpose of Disbursement
MEDIA CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 05 / 2011
Transaction ID : SB21.32

Amount of Each Disbursement this Period

5760.00

Full Name (Last, First, Middle Initial)

C. NJI MEDIA

Mailing Address 201 King Street Suite 202

City ALEXANDRIA State VA Zip Code 22134

Purpose of Disbursement
MEDIA CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 03 / 2011
Transaction ID : SB21.5

Amount of Each Disbursement this Period

5760.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

17280.00

<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

NAME OF COMMITTEE (In Full)
TFP-FOJB COMMITTEE

A. NJI MEDIA

City	State	Zip Code
ALEXANDRIA	VA	22134

Purpose of Disbursement

MEDIA CONSULTING

Candidate Name

5760.00

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

B. SRLC 2012

City	State	Zip Code
COLUMBIA	SC	29202

Purpose of Disbursement
REGISTRATION FEE

Candidate Name

2500.00

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Category/
Type

C. The Ritz Carlton Resorts of Naples

City	State	Zip Code
NAPLES	FL	34108

Purpose of Disbursement	FACILITY RENTAL
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Candidate Name

3000.00

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Category/
Type

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

11260.00

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

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