FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations F. C.F. W.F. C.

to pe o	sed by Persons (Other than Political Committees) including qualified Notificial	porporations COLIVE			
1. (a) l	Name of Individual, Organization or Corporation	7			
J	oseph W. Pehoushek	2012 OCT -1 AM 8: 51			
(b) <i>i</i>	Address (number and street)	FEG MAIL CENTER			
14	11 Emerald Dunes Dr.				
4.1		3. FEC Identification Number			
(c)	City, State and ZIP Code	5. The Identification Number			
,	Sun City Ctr., FL 33573				
2. Cor	porate filers only Is the filer a qualified nonprofit corporation? Yes No	C			
Indi	vidual filers only Name of Employer	Occupation 7			
""	None Name of Employer None	Retired			
-	4. TYPE OF REPORT (check appropriate boxes):				
	(a) ↑ . April 15 Quarterly Report				
	July 15 Quarterly Report				
	24-Hour Report				
	October 15 Quarterly Report				
	January 31 Year-End Report 48-Hour Report				
	b) Is this Report an amendment? Yes No X 5. COVERING PERIOD: FROM OP 0 2012 THROUGH 6 9 21 2012				
	01012012				
	6. TOTAL CONTRIBUTIONS	125000			
	7. TOTAL INDEPENDENT EXPENDITURES	10-0-			
		126000			
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					
Joseph W. Pehoushek Joseph W Vehould 9/21/2012					
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.					

SCHEDULE 5-A ITEMIZED RECEIPTS

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Any information copied from such Reports an or for commercial purposes, other than using	d Statements may not be sold the name and address of any	or used by any perso political committee to	on for the purpose of soliciting contributions solicit aomidbutions from such committee.
NAME OF FILER (In Full) Joseph W. P.			
A. Full Name (Last, First, Middle Initial) Pehoushek, Mailing Address 1411 Emerald Du	Joseph W.		Date of Receipt 09 17 2012
city Sun City Ctr	State Zip Code	33573	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1250.00
Name of Employer		Occupation .	Retired
B. Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address			and the second of the second o
City	State Zip Code	,	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		
Name of Employer		Occupation	
C. Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address			
City .	State Zip Code	, \	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		, ·
Name of Employer		Occupation	
D. Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address		_	
City	State Zip Code	•	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		,
Name of Employer		Occupation	
SUBTOTAL of Receipts This Page (optional)		
TOTAL This Period (last page carry total to	Line 6)	•	1250,00

FOR LINE 7 OF FORM 5				
NAME OF FILER (In Full)				
Joseph W. Pehoushek				
Full Name (Last, First, Middle Initial) of Payee	Date			
Branch Ranch Inc	09 19 2012			
P.O. Bax 2012	Amount			
Plant City, State Zip Code FL 3356	4 , 1,250,00			
Purpose of Expenditure Adv. Sign Category/ Type	Office Sought: House State: Senate District:			
Name of Federal Candidate Supported or Opposed by Expenditure:	President			
Romney / Ryan	Check One: Support Oppose			
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)			
Full Name (Laet, First, Middle Initial) of Payee	Date			
Mailing Address				
	Amount			
City State Zip Code	, , .			
Purpose of Expenditure Category/ Type	Office Sought: House State: Senate District:			
Name of Federal Candidate Supported or Opposed by Expenditure:	President Check One: Support Oppose			
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:			
Name of Federal Candidate Supported or Opposed by Expenditure:	President Check One: Support Oppose			
Catendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)			
(a) SUBTOTAL of Itemized Independent Expenditures	, 1,250,00 , 1,250,00			

Federal Election C ENVELOPE REPLACEMENT PAGE F The FEC added this page to the end of this f	OR INCOMING DOCUMENTS			
Hand Delivered	Date of Receipt			
USPS First Class Mail	Postmarked 9/22/1			
USPS Registered/Certified	Postmarked (R/C)			
USPS Priority Mail	Postmarked			
Delivery Confirmation™ or Signature Confirmation™ Label				
USPS Express Mail	Postmarked			
Postmark Illegible				
No Postmark				
Overnight Delivery Service (Specify):	Shipping Date			
	Next Business Day Delivery			
Received from House Records & Registrat	Date of Receipt ion Office			
Received from Senate Public Records Office	Date of Receipt ce			
Received from Electronic Filing Office	Date of Receipt			
Other (Specify):	Date of Receipt or Postmarked			
4mp	10/1/12			
PREPARER	DATE PREPARED			

(3/2005)