

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Person Making the Disbursements/Obligations

(a) Name **Set it Straight**

(b) Address (number and street) check if different than previously reported
5160 Hearthstone Lane

2. FEC Identification Number

C C30001861

(c) City, State and ZIP Code
Colorado Springs CO 80919

(d) Name of Employer or Principal Place of Business
Patrick Davis Consulting

(e) Occupation
Consulting

3. Is This Statement

New
or
 Amended

4. Covering Period

MM / DD / YYYY
09 / 13 / 2012
through
MM / DD / YYYY
09 / 25 / 2012

5. (a) Date of Public Distribution(s)

MM / DD / YYYY
09 / 25 / 2012

(b) Communication Title Mike Coffman

6. The filer is a(n): (a) Individual (b) Unincorporated Organization (c) Qualified Nonprofit Corporation (11 CFR 114.10)

(d) Corporation, Labor Organization or Qualified Nonprofit Corporation making communications under 11 CFR 114.15

(e) Other, specify: _____

7. If the filer is an individual, unincorporated organization or qualified nonprofit corporation, were the disbursements made exclusively from donations to a segregated bank account? Yes No

8. Custodian of Records

(a) Name
Patrick Davis

(b) Address (number and street)
5160 Hearthstone Ln

(c) City, State and ZIP Code
Colorado Springs CO 80919

(d) Name of Employer or Principal Place of Business
Patrick Davis Consulting

(e) Occupation
Consulting

9. Total Donations This Statement

31450.00

10. Total Disbursements/Obligations This Statement

13290.00

Under penalty of perjury, I certify that this statement is true, correct and complete.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM Patrick Davis

SIGNATURE Patrick Davis

[Electronically Filed] DATE 09/26/2012

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