

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

PATRIOT DAY IV

ADDRESS (number and street)

228 S WASHINGTON ST STE 115

Check if different than previously reported. (ACC)

ALEXANDRIA

VA

22314

2. FEC IDENTIFICATION NUMBER ▼

C C00519744

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

MN

08

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)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

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 /

D D /

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 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

PATRIOT DAY IV

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	46000.00	46000.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	46000.00	46000.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	4083.96	4083.96
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	4083.96	4083.96
8. Cash on Hand at Close of Reporting Period (from Line 27).....	10198.03	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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 3 (Revised 12/2003)

Write or Type Committee Name

PATRIOT DAY IV

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals ▶	0.00	0.00
(b) Political Party Committees.....	25000.00	25000.00
(c) Other Political Committees (such as PACs).....	21000.00	21000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	46000.00	46000.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	46000.00	46000.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	4083.96	4083.96
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	31718.01	31718.01
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. 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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	35801.97	35801.97

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	46000.00
25. SUBTOTAL (add Line 23 and Line 24).....	46000.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	35801.97
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	10198.03

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 11
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
PATRIOT DAY IV

A. Full Name (Last, First, Middle Initial)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00075820

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2012

Transaction ID : SA11B.4131

Amount of Each Receipt this Period
25000.00

B. Full Name (Last, First, Middle Initial)

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)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

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)

Election Cycle-to-Date

Date of Receipt
 M M M / D 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).....

25000.00

25000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 11
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
PATRIOT DAY IV

A. Full Name (Last, First, Middle Initial)
ACTON PAC

Mailing Address P.O. BOX 442

City State Zip Code
SHARPSBURG GA 30277

FEC ID number of contributing federal political committee. **C** C00411579

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 31 / 2012

Transaction ID : SA11C.4112

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
CITIZENS TO ELECT PHIL ROE TO CONGRESS

Mailing Address PO BOX 3218

City State Zip Code
JOHNSON CITY TN 37602

FEC ID number of contributing federal political committee. **C** C00444471

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 31 / 2012

Transaction ID : SA11C.4114

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
CONCERNED AMERICANS FOR FREEDOM & OPPORTUNITY PAC (CAFO PAC)

Mailing Address 228 S WASHINGTON ST STE 115

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00481176

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 24 / 2012

Transaction ID : SA11C.4124

Amount of Each Receipt this Period
5000.00

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

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

12500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 11
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
PATRIOT DAY IV

A. Full Name (Last, First, Middle Initial)
FRIENDS OF DAVE REICHERT

Mailing Address **PO BOX 2032**

City **ISSAQUAH** State **WA** Zip Code **98027**

FEC ID number of contributing federal political committee. **C C00397737**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 24 / 2012

Transaction ID : SA11C.4128

Amount of Each Receipt this Period
 1500.00

B. Full Name (Last, First, Middle Initial)
FRIENDS OF TODD YOUNG, INC.

Mailing Address **PO BOX 1053**

City **BLOOMINGTON** State **IN** Zip Code **47402**

FEC ID number of contributing federal political committee. **C C00459255**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 31 / 2012

Transaction ID : SA11C.4119

Amount of Each Receipt this Period
 1500.00

C. Full Name (Last, First, Middle Initial)
KEEPING REPUBLICAN IDEAS STRONG TIMELY AND INVENTIVE (KRISTI PAC)

Mailing Address **PO BOX 312**

City **SIOUX FALLS** State **SD** Zip Code **57101**

FEC ID number of contributing federal political committee. **C C00493809**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 24 / 2012

Transaction ID : SA11C.4126

Amount of Each Receipt this Period
 2000.00

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

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

5000.00

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

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

FOR LINE NUMBER: PAGE 8 OF 11
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
PATRIOT DAY IV

A. Full Name (Last, First, Middle Initial)
MARKETPLACE IDEAS AND CONSERVATIVE KNOWLEDGE PAC-MICK PAC

Mailing Address 228 S WASHINGTON ST STE 115

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00502591

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 24 / 2012

Transaction ID : SA11C.4122

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
RENEE ELLMERS FOR CONGRESS COMMITTEE

Mailing Address P.O. BOX 904

City State Zip Code
DUNN NC 28335

FEC ID number of contributing federal political committee. **C** C00471896

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 31 / 2012

Transaction ID : SA11C.4116

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)

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)

Election Cycle-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).....

3500.00

21000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 11			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
PATRIOT DAY IV

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address 300 First St., SE		Amount of Each Disbursement this Period 4047.00
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement JFC Event Catering	Transaction ID : SB17.4133
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) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
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.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
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).....	4047.00
TOTAL This Period (last page this line number only).....	4047.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 11	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
PATRIOT DAY IV

Full Name (Last, First, Middle Initial) A. ANN MARIE BUERKLE FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 05 / 2012
Mailing Address PO BOX 219		Amount of Each Disbursement this Period 6060.18 Transaction ID : SB18.4135
City SYRACUSE	State NY	
Zip Code 13214	Purpose of Disbursement Distribution of Net JFC Proceeds	Category/ Type 008
Candidate Name ANN MARIE BUERKLE		
Office Sought: <input checked="" 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: NY	District: 25	

Full Name (Last, First, Middle Initial) B. CHRIS GIBSON FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 05 / 2012
Mailing Address PO BOX 234		Amount of Each Disbursement this Period 6281.99 Transaction ID : SB18.4137
City SARATOGA SPRINGS	State NY	
Zip Code 12866	Purpose of Disbursement Distribution of Net JFC Proceeds	Category/ Type 008
Candidate Name CHRIS P GIBSON		
Office Sought: <input checked="" 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: NY	District: 20	

Full Name (Last, First, Middle Initial) C. CRAVAACK FOR CONGRESS CAMPAIGN COMMITTEE		Date of Disbursement MM / DD / YYYY 06 / 20 / 2012
Mailing Address P.O. BOX 40040		Amount of Each Disbursement this Period 6257.34 Transaction ID : SB18.4139
City ST PAUL	State MN	
Zip Code 55104	Purpose of Disbursement Distribution of Net JFC Proceeds	Category/ Type 008
Candidate Name RAYMOND J MR. CRAVAACK		
Office Sought: <input checked="" 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: MN	District: 08	

SUBTOTAL of Disbursements This Page (optional).....	18599.51
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 11
	<input type="checkbox"/> 17 20a <input checked="" type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
PATRIOT DAY IV

Full Name (Last, First, Middle Initial) A. FRIENDS OF NAN HAYWORTH		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2012
Mailing Address P.O. BOX 188		Amount of Each Disbursement this Period 6700.96 Transaction ID : SB18.4138
City CARMEL	State NY	
Zip Code 10512	Purpose of Disbursement Distribution of Net JFC Proceeds	Category/ Type 008
Candidate Name NAN HAYWORTH	Office Sought: <input checked="" 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: NY District: 19	

Full Name (Last, First, Middle Initial) B. RIBBLE FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2012
Mailing Address PO BOX 7200		Amount of Each Disbursement this Period 6417.54 Transaction ID : SB18.4140
City APPLETON	State WI	
Zip Code 54912	Purpose of Disbursement Distribution of Net JFC Proceeds	Category/ Type 008
Candidate Name REID RIBBLE	Office Sought: <input checked="" 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: WI District: 08	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
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)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	13118.50
TOTAL This Period (last page this line number only).....	31718.01