

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.
SIERRA CLUB INDEPENDENT ACTION

ADDRESS (number and street)
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
 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) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / through / /

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 Catherine Duvall

Signature of Treasurer Catherine Duvall [Electronically Filed] Date / /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

SIERRA CLUB INDEPENDENT ACTION

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

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|--|--|
| 6. (a) Cash on Hand January 1, <input type="text" value="2012"/> | <input type="text" value="32670.09"/> | <input type="text" value="32670.09"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="34425.86"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="697211.38"/> | <input type="text" value="879265.00"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="731637.24"/> | <input type="text" value="911935.09"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="629334.01"/> | <input type="text" value="809631.86"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="102303.23"/> | <input type="text" value="102303.23"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |

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

Write or Type Committee Name

SIERRA CLUB INDEPENDENT ACTION

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

| 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)..... | 697061.38 | 857551.38 |
| (ii) Unitemized | 150.00 | 21713.62 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶ | 697211.38 | 879265.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 697211.38 | 879265.00 |
| 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 | 0.00 |
| 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))..... ▶ | 697211.38 | 879265.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶ | 697211.38 | 879265.00 |

DETAILED SUMMARY PAGE
of Disbursements

| 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 | 1096.54 | 21660.39 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 1096.54 | 21660.39 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 0.00 |
| 24. Independent Expenditures (use Schedule E) | 628237.47 | 787971.47 |
| 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)) .. | 629334.01 | 809631.86 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 629334.01 | 809631.86 |

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) | 697211.38 | 879265.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 697211.38 | 879265.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 1096.54 | 21660.39 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 1096.54 | 21660.39 |

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA
Transaction ID :

This report is being amended to reflect the updated disbursements for staff salaries and benefits expense and the matching offset on line 21(b).

Form/Schedule:
Transaction ID:

**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 7 OF 37 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
SIERRA CLUB INDEPENDENT ACTION

A. America Votes, Inc.
Full Name (Last, First, Middle Initial)
Mailing Address 1401 New York Ave NW Ste 720

| | | |
|--------------------|-------------|-------------------|
| City Washington | State DC | Zip Code 20005 |
|--------------------|-------------|-------------------|

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

| | |
|------------------|------------|
| Name of Employer | Occupation |
| | |

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | / | 26 | / | 2012 |

Transaction ID : SA11AI.6021

Amount of Each Receipt this Period
50000.00

B. Jennifer Buchwald-Baerwald
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 34

| | | |
|---------------------|-------------|-------------------|
| City Pope Valley | State CA | Zip Code 94567 |
|---------------------|-------------|-------------------|

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

| | |
|--------------------------|-----------------------|
| Name of Employer None | Occupation Retired |
|--------------------------|-----------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | / | 14 | / | 2012 |

Transaction ID : SA11AI.6022

Amount of Each Receipt this Period
225.00

c. Mack Crouse Group LLC
Full Name (Last, First, Middle Initial)
Mailing Address 2001 N. Beauregard Street Suite 420

| | | |
|--------------------|-------------|-------------------|
| City Alexandria | State VA | Zip Code 22311 |
|--------------------|-------------|-------------------|

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

| | |
|------------------|------------|
| Name of Employer | Occupation |
| | |

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | / | 19 | / | 2012 |

Transaction ID : SA11AI.6223

Amount of Each Receipt this Period
5000.00

In-kind - Logo Design

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 55225.00 |
| 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: PAGE 8 OF 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
SIERRA CLUB INDEPENDENT ACTION

A. Sierra Club
 Full Name (Last, First, Middle Initial)
 Mailing Address 85 2nd St., 2nd Floor
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1836.38

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 17 / 2012
Transaction ID : SA11AI.6287
 Amount of Each Receipt this Period
 1836.38
 in-kind list rental

B. Sierra Club
 Full Name (Last, First, Middle Initial)
 Mailing Address 85 2nd St., 2nd Floor
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 641836.38

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : SA11AI.6229
 Amount of Each Receipt this Period
 640000.00

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) ▼
 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).....▶ | 641836.38 |
| TOTAL This Period (last page this line number only).....▶ | 697061.38 |

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.6287

This is the receipt of an in-kind list donation that Sierra Club Independent Action received from the Sierra Club. SCIA listed the offsetting expense on the 48 hour report on 9/21/2012 and on Schedule E October monthly report.

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
SIERRA CLUB INDEPENDENT ACTION

Full Name (Last, First, Middle Initial)

A. Mark Bettinger

Mailing Address 85 Washington St.

City State Zip Code
Saratoga Springs NY 12866

Purpose of Disbursement
Salaries and Benefits

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.6129

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Michael Brune

Mailing Address 85 2nd St., 2nd Floor

City State Zip Code
San Francisco CA 94105

Purpose of Disbursement
Salaries and Benefits

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.6232

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Catherine Duvall

Mailing Address 50 F Street, NW
8th Floor

City State Zip Code
Washington DC 20001

Purpose of Disbursement
Salaries and Benefits

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.6120

Amount of Each Disbursement this Period

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

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 Page

FOR LINE NUMBER:
(check only one)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
SIERRA CLUB INDEPENDENT ACTION

Full Name (Last, First, Middle Initial)

A. Catherine Duvall

Mailing Address 50 F Street, NW
8th Floor

City Washington State DC Zip Code 20001

Purpose of Disbursement
Salaries and Benefits

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.6121

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Kristen Kong

Mailing Address 85 2nd St., 2nd Floor

City San Francisco State CA Zip Code 94704

Purpose of Disbursement
Salaries and Benefits

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.6133

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Kristen Kong

Mailing Address 85 2nd St., 2nd Floor

City San Francisco State CA Zip Code 94704

Purpose of Disbursement
Salaries and Benefits

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.6132

Amount of Each Disbursement this Period

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

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 Page

FOR LINE NUMBER:
(check only one)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
SIERRA CLUB INDEPENDENT ACTION

Full Name (Last, First, Middle Initial)

A. Melissa Lee

Mailing Address 85 2nd St., 2nd Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
Salaries and Benefits

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 15 / 2012

Transaction ID : SB21B.6122

Amount of Each Disbursement this Period

13.77

Full Name (Last, First, Middle Initial)

B. Melissa Lee

Mailing Address 85 2nd St., 2nd Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
Salaries and Benefits

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2012

Transaction ID : SB21B.6123

Amount of Each Disbursement this Period

41.30

Full Name (Last, First, Middle Initial)

C. Mack Crouse Group LLC

Mailing Address 2001 N. Beauregard Street
Suite 420

City Alexandria State VA Zip Code 22311

Purpose of Disbursement
In-kind - Logo Design

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2012

Transaction ID : SB21B.6224

Amount of Each Disbursement this Period

5000.00

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

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

5055.07

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

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
SIERRA CLUB INDEPENDENT ACTION

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Zachary Ragbourn | | Date of Disbursement MM / DD / YYYY 09 / 15 / 2012 |
| Mailing Address 0 F Street, NW, Eighth Floor | | Transaction ID : SB21B.6131 |
| City Washington | State DC | |
| Zip Code 20001 | Purpose of Disbursement Salaries and Benefits | Amount of Each Disbursement this Period 147.91 |
| Candidate Name | Category/ Type 001 | |
| 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. Zachary Ragbourn | | Date of Disbursement MM / DD / YYYY 09 / 30 / 2012 |
| Mailing Address 0 F Street, NW, Eighth Floor | | Transaction ID : SB21B.6130 |
| City Washington | State DC | |
| Zip Code 20001 | Purpose of Disbursement Salaries and Benefits | Amount of Each Disbursement this Period 49.30 |
| Candidate Name | Category/ Type 001 | |
| 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. Lisa Reiser | | Date of Disbursement MM / DD / YYYY 09 / 15 / 2012 |
| Mailing Address 85 2nd St., 2nd Floor | | Transaction ID : SB21B.6134 |
| City San Francisco | State CA | |
| Zip Code 94704 | Purpose of Disbursement Salaries and Benefits | Amount of Each Disbursement this Period 648.90 |
| Candidate Name | Category/ Type 001 | |
| 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).....▶ | 846.11 |
| 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 Page

FOR LINE NUMBER:
(check only one)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
SIERRA CLUB INDEPENDENT ACTION

Full Name (Last, First, Middle Initial)

A. Lisa Reiser

Mailing Address 85 2nd St., 2nd Floor

City San Francisco State CA Zip Code 94704

Purpose of Disbursement
Salaries and Benefits

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2012

Transaction ID : SB21B.6135

Amount of Each Disbursement this Period

324.45

Full Name (Last, First, Middle Initial)

B. Gayle Sheehan

Mailing Address 85 Second St., 2nd Flr.

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
Salaries and Benefits

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 15 / 2012

Transaction ID : SB21B.6124

Amount of Each Disbursement this Period

211.51

Full Name (Last, First, Middle Initial)

C. Gayle Sheehan

Mailing Address 85 Second St., 2nd Flr.

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
Salaries and Benefits

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2012

Transaction ID : SB21B.6125

Amount of Each Disbursement this Period

461.47

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

997.43

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 Page

FOR LINE NUMBER:
(check only one)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)
SIERRA CLUB INDEPENDENT ACTION

Full Name (Last, First, Middle Initial)

A. Sierra Club

Mailing Address 85 2nd St., 2nd Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
Salaries & Benefits

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.6226

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Sierra Club

Mailing Address 85 2nd St., 2nd Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
Payment allocated & reported on line 21

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.6227

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Sierra Club

Mailing Address 85 2nd St., 2nd Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
Payment allocated & reported on line 24

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.6228

Amount of Each Disbursement this Period

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

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 Page

FOR LINE NUMBER:
(check only one)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)
SIERRA CLUB INDEPENDENT ACTION

Full Name (Last, First, Middle Initial)

A. Dave Thack

Mailing Address 50 F St. NW, Eighth Floor

City Washington State DC Zip Code 20001

Purpose of Disbursement
Salaries and Benefits

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.6126

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Lisa Turner

Mailing Address 50 F St. NW, 8th Floor

City Washington State DC Zip Code 20001

Purpose of Disbursement
Salaries and Benefits

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.6127

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Lisa Turner

Mailing Address 50 F St. NW, 8th Floor

City Washington State DC Zip Code 20001

Purpose of Disbursement
Salaries and Benefits

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.6128

Amount of Each Disbursement this Period

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

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

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

| | |
|--|--|
| NAME OF COMMITTEE (In Full) SIERRA CLUB INDEPENDENT ACTION | FEC IDENTIFICATION NUMBER ▼ C C00483693 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | |

| | | |
|---|---------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Mark Bettinger | | Date MM / DD / YYYY 09 / 15 / 2012 |
| Mailing Address 85 Washington St. | | Amount 150.65 |
| City Saratoga Springs | State NY | |
| Zip Code 12866 | Transaction ID : SE.5807 | |
| Purpose of Expenditure Salaries & Benefits | Category/ Type 001 | Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL E. LUNGREN | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| Calendar Year-To-Date Per Election for Office Sought 384.34 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ |

| | | |
|---|---------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Mark Bettinger | | Date MM / DD / YYYY 09 / 30 / 2012 |
| Mailing Address 85 Washington St. | | Amount 75.32 |
| City Saratoga Springs | State NY | |
| Zip Code 12866 | Transaction ID : SE.5911 | |
| Purpose of Expenditure Salaries & Benefits | Category/ Type 001 | Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 16 <input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: JAMES B RENACCI | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| Calendar Year-To-Date Per Election for Office Sought 498.99 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ |

| | |
|---|--------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | 225.97 |
| (b) SUBTOTAL of Unitemized Independent Expenditures..... ▶ | |
| (c) TOTAL Independent Expenditures..... ▶ | |

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Catherine Duvall
Signature

[Electronically Filed] Date MM / DD / YYYY
01 / 31 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

| | |
|---|--|
| NAME OF COMMITTEE (In Full) SIERRA CLUB INDEPENDENT ACTION | FEC IDENTIFICATION NUMBER ▼ C C00483693 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) of Payee Mark Bettinger | | Date M M M / D D D / Y Y Y Y Y Y 09 / 30 / 2012 |
| Mailing Address 85 Washington St. | | Amount 188.31 |
| City Saratoga Springs | State NY | |
| Zip Code 12866 | Transaction ID : SE.5988 | |
| Purpose of Expenditure Salaries & Benefits | Category/ Type 001 | Office Sought: <input checked="" type="checkbox"/> House State: TX <input type="checkbox"/> Senate District: 23 <input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: FRANCISCO RAUL QUICO CANSECO | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| Calendar Year-To-Date Per Election for Office Sought 5 5 572.15 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) of Payee Mark Bettinger | | Date M M M / D D D / Y Y Y Y Y Y 09 / 30 / 2012 |
| Mailing Address 85 Washington St. | | Amount 75.32 |
| City Saratoga Springs | State NY | |
| Zip Code 12866 | Transaction ID : SE.6191 | |
| Purpose of Expenditure Salaries & Benefits | Category/ Type 001 | Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL E. LUNGREN | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| Calendar Year-To-Date Per Election for Office Sought 6 2 5 2 5 1 . 2 7 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ |

| | |
|--|---|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | 263.63 |
| (b) SUBTOTAL of Unitemized Independent Expenditures.....▶ | |
| (c) TOTAL Independent Expenditures.....▶ | |

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Catherine Duvall

Signature [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
01 / 31 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

| | |
|--|--|
| NAME OF COMMITTEE (In Full) SIERRA CLUB INDEPENDENT ACTION | FEC IDENTIFICATION NUMBER ▼ C C00483693 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y | |

| | | |
|---|---------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Mark Bettinger | | Date M M M / D D D / Y Y Y Y Y Y 09 / 30 / 2012 |
| Mailing Address 85 Washington St. | | Amount 188.31 |
| City Saratoga Springs | State NY | |
| Zip Code 12866 | Transaction ID : SE.6272 | |
| Purpose of Expenditure Salaries & Benefits | Category/ Type 001 | Office Sought: <input checked="" type="checkbox"/> House State: TX <input type="checkbox"/> Senate District: 23 <input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: PETE GALLEGRO | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose |
| Calendar Year-To-Date Per Election for Office Sought 796.87 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ |

| | | |
|---|---------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Catherine Duvall | | Date M M M / D D D / Y Y Y Y Y Y 09 / 15 / 2012 |
| Mailing Address 50 F Street, NW 8th Floor | | Amount 117.57 |
| City Washington | State DC | |
| Zip Code 20001 | Transaction ID : SE.5799 | |
| Purpose of Expenditure Salaries & Benefits | Category/ Type 001 | Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL E. LUNGREN | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| Calendar Year-To-Date Per Election for Office Sought 117.57 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ |

| | |
|--|--|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | 305.88 |
| (b) SUBTOTAL of Unitemized Independent Expenditures.....▶ | |
| (c) TOTAL Independent Expenditures.....▶ | |

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Catherine Duvall

Signature _____ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
01 / 31 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

| | |
|--|---|
| NAME OF COMMITTEE (In Full) SIERRA CLUB INDEPENDENT ACTION | FEC IDENTIFICATION NUMBER ▼ C C00483693 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | |

| | | |
|--|---------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Courtney Hight | | Date MM / DD / YYYY 09 / 15 / 2012 |
| Mailing Address 50 F St. NW, 8th Floor | | Amount 53.10 |
| City Washington | State DC | |
| Zip Code 20001 | Transaction ID : SE.5802 | |
| Purpose of Expenditure Salaries & Benefits | Category/ Type 001 | Office Sought: <input checked="" type="checkbox"/> House State: <u>CA</u> <input type="checkbox"/> Senate District: <u>07</u> <input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL E. LUNGREN | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| Calendar Year-To-Date Per Election for Office Sought 170.67 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ |

| | | |
|--|---------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Courtney Hight | | Date MM / DD / YYYY 09 / 30 / 2012 |
| Mailing Address 50 F St. NW, 8th Floor | | Amount 53.10 |
| City Washington | State DC | |
| Zip Code 20001 | Transaction ID : SE.5909 | |
| Purpose of Expenditure Salaries & Benefits | Category/ Type 001 | Office Sought: <input checked="" type="checkbox"/> House State: <u>OH</u> <input type="checkbox"/> Senate District: <u>16</u> <input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: JAMES B RENACCI | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| Calendar Year-To-Date Per Election for Office Sought 203.10 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ |

| | |
|--|---------------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | 106.20 |
| (b) SUBTOTAL of Unitemized Independent Expenditures.....▶ | |
| (c) TOTAL Independent Expenditures.....▶ | |

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Catherine Duvall
Signature

[Electronically Filed] Date **01 / 31 / 2013**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

| | | |
|--|--|---|
| NAME OF COMMITTEE (In Full) SIERRA CLUB INDEPENDENT ACTION | | FEC IDENTIFICATION NUMBER C C00483693 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | MM / DD / YYYY |

| | | |
|--|--------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Courtney Hight | | Date MM / DD / YYYY 09 / 30 / 2012 |
| Mailing Address 50 F St. NW, 8th Floor | | Amount 13.27 |
| City Washington | State DC | |
| Purpose of Expenditure Salaries & Benefits | Category/ Type 001 | Transaction ID : SE.5986 |
| Name of Federal Candidate Supported or Opposed by Expenditure: FRANCISCO RAUL QUICO CANSECO | | Office Sought: <input checked="" type="checkbox"/> House State: TX <input type="checkbox"/> Senate District: 23 <input type="checkbox"/> President |
| Calendar Year-To-Date Per Election for Office Sought 163.27 | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) |

| | | |
|---|--------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Courtney Hight | | Date MM / DD / YYYY 09 / 30 / 2012 |
| Mailing Address 50 F St. NW, 8th Floor | | Amount 53.10 |
| City Washington | State DC | |
| Purpose of Expenditure Salaries & Benefits | Category/ Type 001 | Transaction ID : SE.6187 |
| Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL E. LUNGREN | | Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President |
| Calendar Year-To-Date Per Election for Office Sought 625175.95 | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) |

| | |
|--|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... | 66.37 |
| (b) SUBTOTAL of Unitemized Independent Expenditures | |
| (c) TOTAL Independent Expenditures..... | |

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Catherine Duvall
Signature [Electronically Filed] Date MM / DD / YYYY
01 / 31 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

| | |
|--|---|
| NAME OF COMMITTEE (In Full) SIERRA CLUB INDEPENDENT ACTION | FEC IDENTIFICATION NUMBER ▼ C C00483693 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | |

| | | |
|--|-----------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Courtney Hight | | Date MM / DD / YYYY 09 / 30 / 2012 |
| Mailing Address 50 F St. NW, 8th Floor | | Amount 13.28 |
| City Washington | State DC | Zip Code 20001 |
| Purpose of Expenditure Salaries & Benefits | Category/Type 001 | Transaction ID : SE.6274 |
| Name of Federal Candidate Supported or Opposed by Expenditure: PETE GALLEGRO | | Office Sought: <input checked="" type="checkbox"/> House State: TX <input type="checkbox"/> Senate District: 23 <input type="checkbox"/> President |
| Calendar Year-To-Date Per Election for Office Sought 810.15 | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ |

| | | |
|--|-----------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Maggie Kao | | Date MM / DD / YYYY 09 / 15 / 2012 |
| Mailing Address 50 F St., NW | | Amount 135.70 |
| City Washington | State DC | Zip Code 20001 |
| Purpose of Expenditure Salaries & Benefits | Category/Type 001 | Transaction ID : SE.5808 |
| Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL E. LUNGREN | | Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President |
| Calendar Year-To-Date Per Election for Office Sought 520.04 | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ |

| | |
|--|---------------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | 148.98 |
| (b) SUBTOTAL of Unitemized Independent Expenditures.....▶ | |
| (c) TOTAL Independent Expenditures.....▶ | |

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Catherine Duvall
Signature

[Electronically Filed] Date **01 / 31 / 2013**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

| | |
|--|---|
| NAME OF COMMITTEE (In Full) SIERRA CLUB INDEPENDENT ACTION | FEC IDENTIFICATION NUMBER ▼ C C00483693 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | |

| | | |
|---|---------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Maggie Kao | | Date MM / DD / YYYY 09 / 15 / 2012 |
| Mailing Address 50 F St., NW | | Amount 33.93 |
| City Washington | State DC | |
| Zip Code 20001 | Transaction ID : SE.6077 | |
| Purpose of Expenditure Salaries and Benefits | Category/ Type 001 | Office Sought: <input checked="" type="checkbox"/> House State: <u>CO</u> <input type="checkbox"/> Senate District: <u>06</u> <input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL COFFMAN | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| Calendar Year-To-Date Per Election for Office Sought 33.93 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ |

| | | |
|---|---------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Maggie Kao | | Date MM / DD / YYYY 09 / 30 / 2012 |
| Mailing Address 50 F St., NW | | Amount 33.93 |
| City Washington | State DC | |
| Zip Code 20001 | Transaction ID : SE.5912 | |
| Purpose of Expenditure Salaries & Benefits | Category/ Type 001 | Office Sought: <input checked="" type="checkbox"/> House State: <u>OH</u> <input type="checkbox"/> Senate District: <u>16</u> <input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: JAMES B RENACCI | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| Calendar Year-To-Date Per Election for Office Sought 532.92 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ |

| | |
|--|--------------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | 67.86 |
| (b) SUBTOTAL of Unitemized Independent Expenditures.....▶ | |
| (c) TOTAL Independent Expenditures.....▶ | |

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Catherine Duvall

Signature

[Electronically Filed]

Date

MM / DD / YYYY
01 / 31 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

| | |
|--|--|
| NAME OF COMMITTEE (In Full) SIERRA CLUB INDEPENDENT ACTION | FEC IDENTIFICATION NUMBER ▼ C C00483693 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y | |

| | | |
|---|---------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Maggie Kao | | Date M M M / D D D / Y Y Y Y Y Y 09 / 30 / 2012 |
| Mailing Address 50 F St., NW | | Amount 203.55 |
| City Washington | State DC | |
| Zip Code 20001 | Transaction ID : SE.6078 | |
| Purpose of Expenditure Salaries and Benefits | Category/ Type 001 | Office Sought: <input checked="" type="checkbox"/> House State: <u>CO</u> <input type="checkbox"/> Senate District: <u>06</u> <input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL COFFMAN | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| Calendar Year-To-Date Per Election for Office Sought 387.48 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ |

| | | |
|--|---------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Maggie Kao | | Date M M M / D D D / Y Y Y Y Y Y 09 / 30 / 2012 |
| Mailing Address 50 F St., NW | | Amount 237.48 |
| City Washington | State DC | |
| Zip Code 20001 | Transaction ID : SE.6193 | |
| Purpose of Expenditure Salaries & Benefits | Category/ Type 001 | Office Sought: <input checked="" type="checkbox"/> House State: <u>CA</u> <input type="checkbox"/> Senate District: <u>07</u> <input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL E. LUNGREN | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| Calendar Year-To-Date Per Election for Office Sought 625488.75 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ |

| | |
|--|--|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | 441.03 |
| (b) SUBTOTAL of Unitemized Independent Expenditures.....▶ | |
| (c) TOTAL Independent Expenditures.....▶ | |

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Catherine Duvall

Signature [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
01 / 31 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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| NAME OF COMMITTEE (In Full) SIERRA CLUB INDEPENDENT ACTION | FEC IDENTIFICATION NUMBER ▼ C C00483693 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | |

| | | |
|---|---------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Mack Crouse Group LLC | | Date MM / DD / YYYY 09 / 28 / 2012 |
| Mailing Address 2001 N. Beauregard Street Suite 420 | | Amount 24959.71 |
| City Alexandria | State VA | |
| Zip Code 22311 | Transaction ID : SE.5892 | |
| Purpose of Expenditure Consults - Direct Mail | Category/ Type 006 | Office Sought: <input checked="" type="checkbox"/> House State: <u>CA</u> <input type="checkbox"/> Senate District: <u>07</u> <input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL E. LUNGREN | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| Calendar Year-To-Date Per Election for Office Sought 625028.32 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ |

| | | |
|---|---------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Trey Pollard | | Date MM / DD / YYYY 09 / 15 / 2012 |
| Mailing Address 50 F Street, NW, Eighth Floor | | Amount 24.27 |
| City Washington | State DC | |
| Zip Code 20001 | Transaction ID : SE.5809 | |
| Purpose of Expenditure Salaries & Benefits | Category/ Type 001 | Office Sought: <input checked="" type="checkbox"/> House State: <u>CA</u> <input type="checkbox"/> Senate District: <u>07</u> <input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL E. LUNGREN | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| Calendar Year-To-Date Per Election for Office Sought 544.31 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ |

| | |
|--|-----------------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | 24983.98 |
| (b) SUBTOTAL of Unitemized Independent Expenditures.....▶ | |
| (c) TOTAL Independent Expenditures.....▶ | |

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Catherine Duvall

Signature _____ [Electronically Filed] Date MM / DD / YYYY **01 / 31 / 2013**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

| | |
|--|--|
| NAME OF COMMITTEE (In Full) SIERRA CLUB INDEPENDENT ACTION | FEC IDENTIFICATION NUMBER ▼ C C00483693 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | |

| | | |
|--|---------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Trey Pollard | | Date MM / DD / YYYY 09 / 30 / 2012 |
| Mailing Address 50 F Street, NW, Eighth Floor | | Amount 97.09 |
| City Washington | State DC | |
| Zip Code 20001 | Transaction ID : SE.5913 | |
| Purpose of Expenditure Salaries & Benefits | Category/ Type 001 | Office Sought: <input checked="" type="checkbox"/> House State: <u>OH</u> <input type="checkbox"/> Senate District: <u>16</u> <input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: JAMES B RENACCI | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| Calendar Year-To-Date Per Election for Office Sought 630.01 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ |

| | | |
|---|---------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Trey Pollard | | Date MM / DD / YYYY 09 / 30 / 2012 |
| Mailing Address 50 F Street, NW, Eighth Floor | | Amount 36.41 |
| City Washington | State DC | |
| Zip Code 20001 | Transaction ID : SE.5989 | |
| Purpose of Expenditure Salaries & Benefits | Category/ Type 001 | Office Sought: <input checked="" type="checkbox"/> House State: <u>TX</u> <input type="checkbox"/> Senate District: <u>23</u> <input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: FRANCISCO RAUL QUICO CANSECO | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| Calendar Year-To-Date Per Election for Office Sought 608.56 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ |

| | |
|--|---------------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | 133.50 |
| (b) SUBTOTAL of Unitemized Independent Expenditures.....▶ | |
| (c) TOTAL Independent Expenditures.....▶ | |

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Catherine Duvall

Signature _____ [Electronically Filed] Date MM / DD / YYYY **01 / 31 / 2013**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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| NAME OF COMMITTEE (In Full) SIERRA CLUB INDEPENDENT ACTION | FEC IDENTIFICATION NUMBER ▼ C C00483693 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | |

| | | |
|--|---------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Trey Pollard | | Date MM / DD / YYYY 09 / 30 / 2012 |
| Mailing Address 50 F Street, NW, Eighth Floor | | Amount 48.55 |
| City Washington | State DC | |
| Zip Code 20001 | Transaction ID : SE.6037 | |
| Purpose of Expenditure Salaries & Benefits | Category/ Type 001 | Office Sought: <input checked="" type="checkbox"/> House State: <u>NY</u> <input type="checkbox"/> Senate District: <u>19</u> <input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTOPHER P GIBSON | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| Calendar Year-To-Date Per Election for Office Sought 198.55 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ |

| | | |
|---|---------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Trey Pollard | | Date MM / DD / YYYY 09 / 30 / 2012 |
| Mailing Address 50 F Street, NW, Eighth Floor | | Amount 48.55 |
| City Washington | State DC | |
| Zip Code 20001 | Transaction ID : SE.6079 | |
| Purpose of Expenditure Salaries and Benefits | Category/ Type 001 | Office Sought: <input checked="" type="checkbox"/> House State: <u>IL</u> <input type="checkbox"/> Senate District: <u>17</u> <input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: ROBERT T. SCHILLING | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| Calendar Year-To-Date Per Election for Office Sought 198.55 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ |

| | |
|---|--------------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | 97.10 |
| (b) SUBTOTAL of Unitemized Independent Expenditures..... ▶ | |
| (c) TOTAL Independent Expenditures..... ▶ | |

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Catherine Duvall

Signature _____ [Electronically Filed] Date MM / DD / YYYY **01 / 31 / 2013**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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| NAME OF COMMITTEE (In Full) SIERRA CLUB INDEPENDENT ACTION | FEC IDENTIFICATION NUMBER ▼ C C00483693 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | |

| | | |
|---|---------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Trey Pollard | | Date MM / DD / YYYY 09 / 30 / 2012 |
| Mailing Address 50 F Street, NW, Eighth Floor | | Amount 48.55 |
| City Washington | State DC | |
| Zip Code 20001 | Transaction ID : SE.6080 | |
| Purpose of Expenditure Salaries and Benefits | Category/ Type 001 | Office Sought: <input checked="" type="checkbox"/> House State: <u>CO</u> <input type="checkbox"/> Senate District: <u>06</u> <input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL COFFMAN | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| Calendar Year-To-Date Per Election for Office Sought 436.03 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ |

| | | |
|---|---------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Trey Pollard | | Date MM / DD / YYYY 09 / 30 / 2012 |
| Mailing Address 50 F Street, NW, Eighth Floor | | Amount 218.45 |
| City Washington | State DC | |
| Zip Code 20001 | Transaction ID : SE.6194 | |
| Purpose of Expenditure Salaries & Benefits | Category/ Type 001 | Office Sought: <input checked="" type="checkbox"/> House State: <u>CA</u> <input type="checkbox"/> Senate District: <u>07</u> <input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL E. LUNGREN | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| Calendar Year-To-Date Per Election for Office Sought 625707.20 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ |

| | |
|--|---------------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | 267.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures.....▶ | |
| (c) TOTAL Independent Expenditures.....▶ | |

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Catherine Duvall

Signature _____ [Electronically Filed] Date MM / DD / YYYY **01 / 31 / 2013**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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|--|--|---|
| NAME OF COMMITTEE (In Full) SIERRA CLUB INDEPENDENT ACTION | | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00483693 </div> |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) of Payee Sierra Club | | Date MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">09 / 17 / 2012</div> |
| Mailing Address 85 2nd St., 2nd Floor | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1836.38</div> |
| City San Francisco | State CA | Zip Code 94105 |
| Purpose of Expenditure In-Kind: List Rental | Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">011</div> | Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL E. LUNGREN | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2380.69</div> | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ |

Transaction ID : SE.5884

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) of Payee Sierra Club | | Date MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">09 / 19 / 2012</div> |
| Mailing Address 85 2nd St., 2nd Floor | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">150.00</div> |
| City San Francisco | State CA | Zip Code 94105 |
| Purpose of Expenditure Website Endorsement | Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">011</div> | Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL E. LUNGREN | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">25150.69</div> | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ |

Transaction ID : SE.5825

| | |
|--|---------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | 1986.38 |
| (b) SUBTOTAL of Unitemized Independent Expenditures.....▶ | |
| (c) TOTAL Independent Expenditures.....▶ | |

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Catherine Duvall

Signature _____ [Electronically Filed] Date MM / DD / YYYY
01 / 31 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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| NAME OF COMMITTEE (In Full) SIERRA CLUB INDEPENDENT ACTION | FEC IDENTIFICATION NUMBER ▼ C C00483693 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y | |

| | | |
|---|------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Sierra Club | | Date M M M / D D D / Y Y Y Y Y Y 09 / 19 / 2012 |
| Mailing Address 85 2nd St., 2nd Floor | | Amount 150.00 |
| City San Francisco | State CA | Zip Code 94105 |
| Purpose of Expenditure Website Endorsement | Category/ Type 011 | Transaction ID : SE.5833 |
| Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL COFFMAN | | Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President |
| Calendar Year-To-Date Per Election for Office Sought 183.93 | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ |

| | | |
|---|------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Sierra Club | | Date M M M / D D D / Y Y Y Y Y Y 09 / 19 / 2012 |
| Mailing Address 85 2nd St., 2nd Floor | | Amount 150.00 |
| City San Francisco | State CA | Zip Code 94105 |
| Purpose of Expenditure Website Endorsement | Category/ Type 011 | Transaction ID : SE.5834 |
| Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTOPHER P GIBSON | | Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 19 <input type="checkbox"/> President |
| Calendar Year-To-Date Per Election for Office Sought 150.00 | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ |

| | |
|--|--|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | 300.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures.....▶ | |
| (c) TOTAL Independent Expenditures.....▶ | |

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Catherine Duvall

Signature [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
01 / 31 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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|--|---|
| NAME OF COMMITTEE (In Full) SIERRA CLUB INDEPENDENT ACTION | FEC IDENTIFICATION NUMBER ▼ C C00483693 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y | |

| | | |
|---|-----------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Sierra Club | | Date M M M / D D D / Y Y Y Y Y Y 09 / 19 / 2012 |
| Mailing Address 85 2nd St., 2nd Floor | | Amount 150.00 |
| City San Francisco | State CA | Zip Code 94105 |
| Purpose of Expenditure Website Endorsement | Category/Type 011 | Transaction ID : SE.5835 |
| Name of Federal Candidate Supported or Opposed by Expenditure: JAMES B RENACCI | | Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 16 <input type="checkbox"/> President |
| Calendar Year-To-Date Per Election for Office Sought 150.00 | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ |

| | | |
|---|-----------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Sierra Club | | Date M M M / D D D / Y Y Y Y Y Y 09 / 19 / 2012 |
| Mailing Address 85 2nd St., 2nd Floor | | Amount 150.00 |
| City San Francisco | State CA | Zip Code 94105 |
| Purpose of Expenditure Website Endorsement | Category/Type 011 | Transaction ID : SE.5836 |
| Name of Federal Candidate Supported or Opposed by Expenditure: ROBERT T. SCHILLING | | Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 17 <input type="checkbox"/> President |
| Calendar Year-To-Date Per Election for Office Sought 150.00 | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ |

| | |
|--|--|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | 300.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures.....▶ | |
| (c) TOTAL Independent Expenditures.....▶ | |

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Catherine Duvall
Signature [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
01 / 31 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

| | | |
|--|--|---|
| NAME OF COMMITTEE (In Full) SIERRA CLUB INDEPENDENT ACTION | | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00483693 </div> |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) of Payee Sierra Club | | Date MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">09 / 19 / 2012</div> |
| Mailing Address 85 2nd St., 2nd Floor | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">150.00</div> |
| City San Francisco | State CA | |
| Zip Code 94105 | Transaction ID : SE.5837 | |
| Purpose of Expenditure Website Endorsement | Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">011</div> | Office Sought: <input checked="" type="checkbox"/> House State: TX <input type="checkbox"/> Senate District: 23 <input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: FRANCISCO RAUL QUICO CANSECO | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">150.00</div> | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) of Payee Lisa Turner | | Date MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">09 / 15 / 2012</div> |
| Mailing Address 50 F St. NW, 8th Floor | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">63.02</div> |
| City Washington | State DC | |
| Zip Code 20001 | Transaction ID : SE.5806 | |
| Purpose of Expenditure Salaries & Benefits | Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div> | Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL E. LUNGREN | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">233.69</div> | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ |

| | |
|--|--------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | 213.02 |
| (b) SUBTOTAL of Unitemized Independent Expenditures.....▶ | |
| (c) TOTAL Independent Expenditures.....▶ | |

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Catherine Duvall

Signature _____ [Electronically Filed] Date

MM / DD / YYYY

01 / 31 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

| | |
|--|--|
| NAME OF COMMITTEE (In Full) SIERRA CLUB INDEPENDENT ACTION | FEC IDENTIFICATION NUMBER ▼ C C00483693 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y | |

| | | |
|---|------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Lisa Turner | | Date M M M / D D D / Y Y Y Y Y Y 09 / 30 / 2012 |
| Mailing Address 50 F St. NW, 8th Floor | | Amount 94.53 |
| City Washington | State DC | Zip Code 20001 |
| Purpose of Expenditure Salaries and Benefits | Category/ Type 001 | Transaction ID : SE.6074 |
| Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL E. LUNGREN | | Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President |
| Calendar Year-To-Date Per Election for Office Sought 625122.85 | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ |

| | | |
|---|------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Lisa Turner | | Date M M M / D D D / Y Y Y Y Y Y 09 / 30 / 2012 |
| Mailing Address 50 F St. NW, 8th Floor | | Amount 220.57 |
| City Washington | State DC | Zip Code 20001 |
| Purpose of Expenditure Salaries & Benefits | Category/ Type 001 | Transaction ID : SE.6278 |
| Name of Federal Candidate Supported or Opposed by Expenditure: FRANCISCO RAUL QUICO CANSECO | | Office Sought: <input checked="" type="checkbox"/> House State: TX <input type="checkbox"/> Senate District: 23 <input type="checkbox"/> President |
| Calendar Year-To-Date Per Election for Office Sought 1067.13 | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ |

| | |
|--|--|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | 315.10 |
| (b) SUBTOTAL of Unitemized Independent Expenditures.....▶ | |
| (c) TOTAL Independent Expenditures.....▶ | |

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Catherine Duvall

Signature _____ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
01 / 31 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

| | |
|--|--|
| NAME OF COMMITTEE (In Full) SIERRA CLUB INDEPENDENT ACTION | FEC IDENTIFICATION NUMBER ▼ C C00483693 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | |

| | | |
|---|---------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Waterfront Strategies | | Date MM / DD / YYYY 09 / 19 / 2012 |
| Mailing Address 3050 K Street, NW, Suite 100 | | Amount 524998.50 |
| City Washington | State DC | |
| Zip Code 20007 | Transaction ID : SE.5858 | |
| Purpose of Expenditure Paid Media - TV Ad | Category/ Type 006 | Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL E. LUNGREN | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| Calendar Year-To-Date Per Election for Office Sought 550149.19 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) of Payee | | Date MM / DD / YYYY |
| Mailing Address | | Amount |
| City | State | |
| Zip Code | Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President | |
| Purpose of Expenditure | Category/ Type | Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose |
| Name of Federal Candidate Supported or Opposed by Expenditure: | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ |
| Calendar Year-To-Date Per Election for Office Sought | | |

| | |
|--|-----------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | 524998.50 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | |
| (c) TOTAL Independent Expenditures..... ▶ | 628237.47 |

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Catherine Duvall

Signature _____ [Electronically Filed] Date MM / DD / YYYY
01 / 31 / 2013