

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Campaign For Our Future

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="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="13124.17"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="99100.00"/>	<input type="text" value="150900.00"/>
(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="112224.17"/>	<input type="text" value="150900.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="101448.59"/>	<input type="text" value="140124.42"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="10775.58"/>	<input type="text" value="10775.58"/>
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Campaign For Our Future

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).....	99000.00	150500.00
(ii) Unitemized	100.00	400.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	99100.00	150900.00
(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)	99100.00	150900.00
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))..... ▶	99100.00	150900.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	99100.00	150900.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	44751.97	52927.80
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	44751.97	52927.80
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)	56696.62	87196.62
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)) ..	101448.59	140124.42
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	101448.59	140124.42

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)	99100.00	150900.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	99100.00	150900.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	44751.97	52927.80
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	44751.97	52927.80

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 16
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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)
Campaign For Our Future

Full Name (Last, First, Middle Initial)
A. ActBlue

Mailing Address **PO BOX 382110**

City **Cambridge** State **MA** Zip Code **02238**

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 M / D D D / Y Y Y Y Y Y
06 / 10 / 2012

Transaction ID : SA11AI.4259

Amount of Each Receipt this Period
1000.00

[MEMO ITEM]

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

Mailing Address **PO BOX 382110**

City **Cambridge** State **MA** Zip Code **02238**

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 M / D D D / Y Y Y Y Y Y
06 / 17 / 2012

Transaction ID : SA11AI.4260

Amount of Each Receipt this Period
500.00

[MEMO ITEM]

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

Mailing Address **PO BOX 382110**

City **Cambridge** State **MA** Zip Code **02238**

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 M / D D D / Y Y Y Y Y Y
06 / 24 / 2012

Transaction ID : SA11AI.4261

Amount of Each Receipt this Period
1500.00

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....▶	0.00
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 7 OF 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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)
Campaign For Our Future

Full Name (Last, First, Middle Initial)
A. Alvin Adell

Mailing Address 31 Mountainside Drive

City State Zip Code
Colts Neck NJ 07722

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

Name of Employer Occupation
Liberty Anesthesia Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 23 / 2012
Transaction ID : SA11AI.4243

Amount of Each Receipt this Period
1000.00

EARMARKED THROUGH ACT BLUE

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

Mailing Address 96 5th AVE, APT 17L

City State Zip Code
New York NY 10011

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

Name of Employer Occupation
Radian Asset Assurance Inc. Lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 16 / 2012
Transaction ID : SA11AI.4240

Amount of Each Receipt this Period
500.00

EARMARKED THROUGH ACT BLUE

Full Name (Last, First, Middle Initial)
C. Lezli Levene Harvell

Mailing Address 24 Commerce Street, Suite 1100

City State Zip Code
Newark NJ 07102

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

Name of Employer Occupation
Self-Employed Pediatric Dentist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 07 / 2012
Transaction ID : SA11AI.4237

Amount of Each Receipt this Period
1000.00

EARMARKED THROUGH ACT BLUE

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 16
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Campaign For Our Future

Full Name (Last, First, Middle Initial) A. Reginald Van Lee		Date of Receipt MM / DD / YYYY 06 / 12 / 2012 Transaction ID : SA11AI.4136
Mailing Address 330 East 38th St.		Amount of Each Receipt this Period 36000.00
City New York	State NY	Zip Code 10016
FEC ID number of contributing federal political committee. C		
Name of Employer Booz Allen Hamilton	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 86000.00	

Full Name (Last, First, Middle Initial) B. Reginald Van Lee		Date of Receipt MM / DD / YYYY 06 / 18 / 2012 Transaction ID : SA11AI.4248
Mailing Address 330 East 38th St.		Amount of Each Receipt this Period 30000.00
City New York	State NY	Zip Code 10016
FEC ID number of contributing federal political committee. C		
Name of Employer Booz Allen Hamilton	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 116000.00	

Full Name (Last, First, Middle Initial) C. Reginald Van Lee		Date of Receipt MM / DD / YYYY 06 / 25 / 2012 Transaction ID : SA11AI.4249
Mailing Address 330 East 38th St.		Amount of Each Receipt this Period 30000.00
City New York	State NY	Zip Code 10016
FEC ID number of contributing federal political committee. C		
Name of Employer Booz Allen Hamilton	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 146000.00	

SUBTOTAL of Receipts This Page (optional).....▶	96000.00
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 9 OF 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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)
Campaign For Our Future

A. Lola West
 Full Name (Last, First, Middle Initial)
 Mailing Address 1646 First Avenue, Suite 16B
 City New York State NY Zip Code 10028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer WestFuller Advisors, LLC Occupation Wealth Advisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 23 / 2012
Transaction ID : SA11AI.4245
 Amount of Each Receipt this Period
 500.00
EARMARKED THROUGH ACT BLUE

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) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / 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) ▼
 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).....▶	500.00
TOTAL This Period (last page this line number only).....▶	99000.00

**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)
Campaign For Our Future

Full Name (Last, First, Middle Initial)

A. Be a Protagonist

Mailing Address 625 Avenue of the Americas
2nd Floor

City New York State NY Zip Code 10011

Purpose of Disbursement
Polling

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2012

Transaction ID : SB21B.4252

Amount of Each Disbursement this Period

29000.00

Full Name (Last, First, Middle Initial)

B. Covington & Burling LLP

Mailing Address 1201 Pennsylvania Ave. NW

City Washington State DC Zip Code 20004-2401

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 26 / 2012

Transaction ID : SB21B.4250

Amount of Each Disbursement this Period

8404.00

Full Name (Last, First, Middle Initial)

C. Geise2 Strategies, LLC

Mailing Address 4320 S. Thatcher Ave.

City Tampa State FL Zip Code 33611

Purpose of Disbursement
Consultant - Compliance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2012

Transaction ID : SB21B.4253

Amount of Each Disbursement this Period

2000.00

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

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

39404.00

**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)
Campaign For Our Future

Full Name (Last, First, Middle Initial)

A. Geise2 Strategies, LLC

Mailing Address 4320 S. Thatcher Ave.

City Tampa State FL Zip Code 33611

Purpose of Disbursement
Shipping and software

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2012

Transaction ID : SB21B.4254

Amount of Each Disbursement this Period

229.47

Full Name (Last, First, Middle Initial)

B. Nicole Shore

Mailing Address 640 Fourth Ave.

City Brooklyn State NY Zip Code 11232

Purpose of Disbursement
Consultant - Communications

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2012

Transaction ID : SB21B.4256

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

5229.47

44633.47

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Campaign For Our Future	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00520767 </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 Be a Protagonist		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y 06 / 12 / 2012 </div>
Mailing Address 625 Avenue of the Americas 2nd Floor		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 5752.20 </div>
City New York State NY Zip Code 10011	Transaction ID : SE.4161	
Purpose of Expenditure Newspaper Ad - Disseminated 6/14/12	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 50px;"> </div>	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 15 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CLYDE EDWARD WILLIAMS JR.		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 36252.20 </div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee Be a Protagonist		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y 06 / 12 / 2012 </div>
Mailing Address 625 Avenue of the Americas 2nd Floor		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 21771.48 </div>
City New York State NY Zip Code 10011	Transaction ID : SE.4163	
Purpose of Expenditure Direct Mail and Postage - Disseminated 6/20/12	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 50px;"> </div>	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 15 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CLYDE EDWARD WILLIAMS JR.		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 58023.68 </div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 27523.68 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>

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.

Tara Geise
 Signature _____ [Electronically Filed] Date
M M / D D / Y Y Y Y
 07 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Campaign For Our Future	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00520767 </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 Be a Protagonist	Date <div style="border: 1px solid black; padding: 2px;"> 06 / 30 / 2012 </div>
Mailing Address 625 Avenue of the Americas 2nd Floor	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 1875.00 </div>
City State Zip Code New York NY 10011	Transaction ID : SE.4231
Purpose of Expenditure Auto Calls - Disseminated 6/25/12	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 15 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CLYDE EDWARD WILLIAMS JR.	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 87196.62 </div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee	Date <div style="border: 1px solid black; padding: 2px;"> / / </div>
Mailing Address	Amount <div style="border: 1px solid black; padding: 2px;"></div>
City State Zip Code	Transaction ID :
Purpose of Expenditure	Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure:	Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"></div>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 1875.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 56696.62 </div>

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.

Tara Geise
 Signature

[Electronically Filed] Date 07 / 15 / 2012