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**FACSIMILE COVER SHEET**

Page 1 of 10

November 2, 2012

Please deliver the following pages:

To: FEC  
Fax: (202) 219-0174  
From: Amber Herriot  
Re: FEC Form 5

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**Comments:**

*Original documents will:*

- ☐ Follow by regular mail
- ☐ Follow by Federal Express
- ☐ Be hand delivered.
- ☒ Not be sent.

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**FEC FORM 5****REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED**

To Be Used by Persons (Other than Political Committees) Including Qualified Nonprofit Corporations

1. (a) Name of Individual, Organization or Corporation <b>Melaleuca, Inc.</b>		3. FEC Identification Number <b>C 90013996</b>
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported <b>3910 S. Yellowstone Hwy</b>		
(c) City, State and ZIP Code <b>Idaho Falls, Idaho 83402</b>		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Individual filers only	Name of Employer	Occupation

## 4. TYPE OF REPORT (check appropriate boxes):

(a) ☐ April 15 Quarterly Report☐ July 15 Quarterly Report☐ October 15 Quarterly Report☐ January 31 Year-End Report☒ 24-Hour Report☐ 48-Hour Reportb) Is this Report an amendment? Yes ☐ No ☒

## 5. COVERING PERIOD: FROM

11 ' 01 ' 2012

THROUGH

11 ' 01 ' 2012

## 8. TOTAL CONTRIBUTIONS

0.00

## 7. TOTAL INDEPENDENT EXPENDITURES

98,411.19

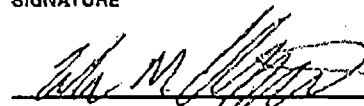
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent. In addition, (if the independent expenditures reported herein were made by a corporation) I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

Cole Clinger



11/02/2012

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

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20489 Toll Free 800-424-9530, Local 202-694-1100

**SCHEDULE 5-A  
ITEMIZED RECEIPTS**

PAGE 2 OF 9

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 FILER (In Full)

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

Mailing Address

City

State

Zip Code

Date of Receipt

M O N T H D A Y Y Y Y Y

Amount of Each Receipt this Period

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

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

Mailing Address

City

State

Zip Code

Date of Receipt

M O N T H D A Y Y Y Y Y

Amount of Each Receipt this Period

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

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

Mailing Address

City

State

Zip Code

Date of Receipt

M O N T H D A Y Y Y Y Y

Amount of Each Receipt this Period

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

**D. Full Name (Last, First, Middle Initial)**

Mailing Address

City

State

Zip Code

Date of Receipt

M O N T H D A Y Y Y Y Y

Amount of Each Receipt this Period

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

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

TOTAL This Period (last page carry total to Line 6) .....

**SCHEDULE 5-E**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 3 OF 9  
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Melaleuca, Inc.

Full Name (Last, First, Middle Initial) of Payee

Natural Guardian, LLC

Date

11 ' 01 ' 2012

Mailing Address

2880 North 55th West

Amount

, 651.19

City

Idaho Falls

State

Idaho

Zip Code

83402

Purpose of Expenditure

TV and Radio Advertisement Creation

Category/  
Type 0 0 4

Office Sought:

☐ House

State: \_\_\_\_\_

☐ Senate

District: \_\_\_\_\_

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Mitt Romney

Calendar Year-To-Date Per Election  
for Office Sought

Disbursement For:

☐ Primary☒ General☐ Other (specify) \_\_\_\_\_

Full Name (Last, First, Middle Initial) of Payee

KTVB

Date

11 ' 01 ' 2012

Mailing Address

5407 W. Fairview Ave.

Amount

, 14,995.00

City

Boise

State

Idaho

Zip Code

83707

Purpose of Expenditure

TV Advertisement

Category/  
Type 0 0 4

Office Sought:

☐ House

State: \_\_\_\_\_

☐ Senate

District: \_\_\_\_\_

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Mitt Romney

Calendar Year-To-Date Per Election  
for Office Sought

Disbursement For:

☐ Primary☒ General☐ Other (specify) \_\_\_\_\_

Full Name (Last, First, Middle Initial) of Payee

KBOI

Date

11 ' 01 ' 2012

Mailing Address

140 N. 16th St.

Amount

, 15,000.00

City

Boise

State

Idaho

Zip Code

83702

Purpose of Expenditure

TV Advertisement

Category/  
Type 0 0 4

Office Sought:

☐ House

State: \_\_\_\_\_

☐ Senate

District: \_\_\_\_\_

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Mitt Romney

Calendar Year-To-Date Per Election  
for Office Sought

Disbursement For:

☐ Primary☒ General☐ Other (specify) \_\_\_\_\_

(a) SUBTOTAL of Itemized Independent Expenditures ..... ▶ , 30,646.19

(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶ , , .

(c) TOTAL Independent Expenditures ..... ▶ , , .  
(carry total from last page forward to Line 7)

**SCHEDULE 5-E**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 4 OF 9  
 FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Melaleuca, Inc.

Full Name (Last, First, Middle Initial) of Payee

KIVI

Date

11 ' 01 ' 2012

Mailing Address

1866 E. Chisholm Dr.

Amount

, 10,000.00

City

Nampa

State

Idaho

Zip Code

83687

Purpose of Expenditure

TV Advertisement

Category/  
Type 0 0 4

Office Sought:

☐ House

State: \_\_\_\_\_

☐ Senate

District: \_\_\_\_\_

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Mitt Romney

Calendar Year-To-Date Per Election  
for Office Sought

Disbursement For:

☐ Primary☒ General☐ Other (specify) \_\_\_\_\_

Full Name (Last, First, Middle Initial) of Payee

KTFT

Date

11 ' 01 ' 2012

Mailing Address

5407 W. Fairview Ave.

Amount

, 3,000.00

City

Boise

State

Idaho

Zip Code

83707

Purpose of Expenditure

TV Advertisement

Category/  
Type 0 0 4

Office Sought:

☐ House

State: \_\_\_\_\_

☐ Senate

District: \_\_\_\_\_

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Mitt Romney

Calendar Year-To-Date Per Election  
for Office Sought

Disbursement For:

☐ Primary☒ General☐ Other (specify) \_\_\_\_\_

Full Name (Last, First, Middle Initial) of Payee

KMVT

Date

11 ' 01 ' 2012

Mailing Address

1100 Blue Lakes Blvd.

Amount

, 10,000.00

City

Twin Falls

State

Idaho

Zip Code

83301

Purpose of Expenditure

TV Advertisement

Category/  
Type 0 0 4

Office Sought:

☐ House

State: \_\_\_\_\_

☐ Senate

District: \_\_\_\_\_

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Mitt Romney

Calendar Year-To-Date Per Election  
for Office Sought

Disbursement For:

☐ Primary☒ General☐ Other (specify) \_\_\_\_\_

(a) SUBTOTAL of Itemized Independent Expenditures..... , 23,000.00

(b) SUBTOTAL of Unitemized Independent Expenditures..... , ,

(c) TOTAL Independent Expenditures..... , ,  
(carry total from last page forward to Line 7)

**SCHEDULE 5-E**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 5 OF 9  
 FOR LINE 7 OF FORM 5

NAME OF FILER (In Full) <b>Melaleuca, Inc.</b>			
Full Name (Last, First, Middle Initial) of Payee <b>KSAW</b>		Date <b>11 / 01 / 2012</b>	
Mailing Address <b>1866 E. Chisholm Dr.</b>		Amount <b>2,000.00</b>	
City <b>Nampa</b>	State <b>Idaho</b>	Zip Code <b>83687</b>	
Purpose of Expenditure <b>TV Advertisement</b>		Category/ Type <b>0 0 4</b>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Mitt Romney</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought			
Full Name (Last, First, Middle Initial) of Payee <b>KIFI</b>		Date <b>11 / 01 / 2012</b>	
Mailing Address <b>1915 N. Yellowstone Hwy</b>		Amount <b>7,500.00</b>	
City <b>Idaho Falls</b>	State <b>Idaho</b>	Zip Code <b>83401</b>	
Purpose of Expenditure <b>TV Advertisement</b>		Category/ Type <b>0 0 4</b>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Mitt Romney</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought			
Full Name (Last, First, Middle Initial) of Payee <b>KIDK</b>		Date <b>11 / 01 / 2012</b>	
Mailing Address <b>902 E. Sherman</b>		Amount <b>5,220.00</b>	
City <b>Pocatello</b>	State <b>Idaho</b>	Zip Code <b>83201</b>	
Purpose of Expenditure <b>TV Advertisement</b>		Category/ Type <b>0 0 4</b>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Mitt Romney</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought			
(a) SUBTOTAL of Itemized Independent Expenditures.....		<b>14,720.00</b>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)			

**SCHEDULE 5-E**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 6 OF 9  
 FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Melaleuca, Inc.

Full Name (Last, First, Middle Initial) of Payee

Lee Family Broadcasting Group

Date

11 ' 01 ' 2012

Mailing Address

3219 Laurelwood Drive

Amount

, 390,00

City

Twin Falls

State

Idaho

Zip Code

83301

Purpose of Expenditure

Radio Advertisement

Category/  
Type 0 0 4

Office Sought:

☐ House

State: \_\_\_\_\_

☐ Senate

District: \_\_\_\_\_

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Mitt Romney

Calendar Year-To-Date Per Election  
for Office SoughtDisbursement For: ☐ Primary☒ General☐ Other (specify) \_\_\_\_\_

Full Name (Last, First, Middle Initial) of Payee

KXPI

Date

11 ' 01 ' 2012

Mailing Address

1915 N. Yellowstone Hwy

Amount

, 2,280,00

City

Idaho Falls

State

Idaho

Zip Code

83401

Purpose of Expenditure

TV Advertisement

Category/  
Type 0 0 4

Office Sought:

☐ House

State: \_\_\_\_\_

☐ Senate

District: \_\_\_\_\_

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Mitt Romney

Calendar Year-To-Date Per Election  
for Office SoughtDisbursement For: ☐ Primary☒ General☐ Other (specify) \_\_\_\_\_

Full Name (Last, First, Middle Initial) of Payee

KPVI

Date

11 ' 01 ' 2012

Mailing Address

902 E. Sherman

Amount

, 5,000,00

City

Pocatello

State

Idaho

Zip Code

83201

Purpose of Expenditure

TV Advertisement

Category/  
Type 0 0 4

Office Sought:

☐ House

State: \_\_\_\_\_

☐ Senate

District: \_\_\_\_\_

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Mitt Romney

Calendar Year-To-Date Per Election  
for Office SoughtDisbursement For: ☐ Primary☒ General☐ Other (specify) \_\_\_\_\_

(a) SUBTOTAL of Itemized Independent Expenditures..... 7,670,00

(b) SUBTOTAL of Unitemized Independent Expenditures..... , ,

(c) TOTAL Independent Expenditures..... , ,  
(carry total from last page forward to Line 7)

**SCHEDULE 5-E**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 7 OF 9  
 FOR LINE 7 OF FORM 5

NAME OF FILER (In Full) <b>Melaleuca, Inc.</b>			
Full Name (Last, First, Middle Initial) of Payee <b>TownSquare Media</b>		Date <b>11 ' 01 ' 2012</b>	
Mailing Address <b>415 Park Ave.</b>		Amount	
City <b>Twin Falls</b>	State <b>Idaho</b>	Zip Code <b>83301</b>	<b>1,600.00</b>
Purpose of Expenditure <b>Radio Advertisement</b>		Category/ Type <b>0 0 4</b>	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Mitt Romney</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee <b>Locally Owned Radio LLC</b>		Date <b>11 ' 01 ' 2012</b>	
Mailing Address <b>21631 HWY 30</b>		Amount	
City <b>Twin Falls</b>	State <b>Idaho</b>	Zip Code <b>83301</b>	<b>280.00</b>
Purpose of Expenditure <b>Radio Advertisement</b>		Category/ Type <b>0 0 4</b>	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Mitt Romney</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee <b>Riverbend Communications</b>		Date <b>11 ' 01 ' 2012</b>	
Mailing Address <b>400 W. Sunnyside Rd.</b>		Amount	
City <b>Idaho Falls</b>	State <b>Idaho</b>	Zip Code <b>83402</b>	<b>4,540.00</b>
Purpose of Expenditure <b>Radio Advertisement</b>		Category/ Type <b>0 0 4</b>	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Mitt Romney</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
(e) SUBTOTAL of Itemized Independent Expenditures.....		<b>6,420.00</b>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)			



**SCHEDULE 5-E**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 8 OF 9  
 FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Melaleuca, Inc.

Full Name (Last, First, Middle Initial) of Payee

KSRA

Date

11 ' 01 ' 2012

Mailing Address

315 Riverfront Dr.

Amount

City

Salmon

State

Idaho

Zip Code

83467

, 400.00

Purpose of Expenditure

Radio Advertisement

Category/  
Type 0 0 4

Office Sought:

☐ House

State: \_\_\_\_\_

☐ Senate

District: \_\_\_\_\_

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Mitt Romney

Calendar Year-To-Date Per Election  
for Office Sought

Disbursement For:

☐ Primary☒ General☐ Other (specify) \_\_\_\_\_

Full Name (Last, First, Middle Initial) of Payee

My Family Radio

Date

11 ' 01 ' 2012

Mailing Address

PO Box 2514/707 N. Mission

Amount

City

McCall

State

Idaho

Zip Code

83638

, 300.00

Purpose of Expenditure

Radio Advertisement

Category/  
Type 0 0 4

Office Sought:

☐ House

State: \_\_\_\_\_

☐ Senate

District: \_\_\_\_\_

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Mitt Romney

Calendar Year-To-Date Per Election  
for Office Sought

Disbursement For:

☐ Primary☒ General☐ Other (specify) \_\_\_\_\_

Full Name (Last, First, Middle Initial) of Payee

Cumulus Broadcasting

Date

11 ' 01 ' 2012

Mailing Address

1419 W. Bannock St.

Amount

City

Boise

State

Idaho

Zip Code

83702

, 5,400.00

Purpose of Expenditure

Radio Advertisement

Category/  
Type 0 0 4

Office Sought:

☐ House

State: \_\_\_\_\_

☐ Senate

District: \_\_\_\_\_

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Mitt Romney

Calendar Year-To-Date Per Election  
for Office Sought

Disbursement For:

☐ Primary☒ General☐ Other (specify) \_\_\_\_\_

(a) SUBTOTAL of Itemized Independent Expenditures..... 6,100.00

(b) SUBTOTAL of Unitemized Independent Expenditures.....

(c) TOTAL Independent Expenditures.....  
(carry total from last page forward to Line 7)

**SCHEDULE 5-E**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 9 OF 9  
 FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Melaleuca, Inc.

Full Name (Last, First, Middle Initial) of Payee

Peak Broadcasting

Date

11 ' 01 ' 2012

Mailing Address

827 E. Park Blvd. Suite 100

Amount

3,100.00

City

Boise

State

Idaho

Zip Code

83712

Purpose of Expenditure

Radio Advertisement

Category/  
Type 0 0 4

Office Sought:

☐ House

State: \_\_\_\_\_

☒ Senate

District: \_\_\_\_\_

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Mitt Romney

Calendar Year-To-Date Per Election  
for Office Sought

Disbursement For:

☐ Primary☒ General☐ Other (specify) \_\_\_\_\_

Full Name (Last, First, Middle Initial) of Payee

Journal Broadcast Group

Date

11 ' 01 ' 2012

Mailing Address

1866 E. Chisholm Dr.

Amount

455.00

City

Nampa

State

Idaho

Zip Code

83687

Purpose of Expenditure

Radio Advertisement

Category/  
Type 0 0 4

Office Sought:

☐ House

State: \_\_\_\_\_

☒ Senate

District: \_\_\_\_\_

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Mitt Romney

Calendar Year-To-Date Per Election  
for Office Sought

Disbursement For:

☐ Primary☒ General☐ Other (specify) \_\_\_\_\_

Full Name (Last, First, Middle Initial) of Payee

Impact Radio Group

Date

11 ' 01 ' 2012

Mailing Address

5660 Franklin Rd. Suite 200

Amount

1,300.00

City

Nampa

State

Idaho

Zip Code

83687

Purpose of Expenditure

Radio Advertisement

Category/  
Type 0 0 4

Office Sought:

☐ House

State: \_\_\_\_\_

☒ Senate

District: \_\_\_\_\_

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Mitt Romney

Calendar Year-To-Date Per Election  
for Office Sought

Disbursement For:

☐ Primary☒ General☐ Other (specify) \_\_\_\_\_

(a) SUBTOTAL of Itemized Independent Expenditures ..... 4,855.00

(b) SUBTOTAL of Unitemized Independent Expenditures ..... ,

(c) TOTAL Independent Expenditures ..... 98,411.19  
(carry total from last page forward to Line 7)

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked Delivery Confirmation™ Label <input type="checkbox"/>
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input checked="" type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<p>The document preceding this page was received by FAX at the FEC. The receiving FAX machine has printed at the bottom of each page the date and time of receipt, the phone number of the transmitting machine and the sequential page numbers.</p>	
N/A PREPARER (5/2004)	N/A DATE PREPARED