12030842494

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED
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FEC MAIL CENTER

Office Use Only
12FB4M5

1 NAME OF COMMITTEE (in full) — TYPE OR PRINT ▼ — Example: If typing, type over the lines.

50 State Strategy

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

152 N Third St
Suite 600
San Jose CA 95112

CITY ▲ STATE ▲ ZIP CODE ▲

2 FEC IDENTIFICATION NUMBER ▼

C00502633

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 04 01 2012 through 06 30 2012

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 Richard Robinson

Signature of Treasurer [signature] Date 07 13 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

Office Use Only							

FEC FORM 3X
Rev 12/2004

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

So State Strategy

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2012		38.50
(b) Cash on Hand at Beginning of Reporting Period	200.00	
(c) Total Receipts (from Line 19)	3290.00	7379.10
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	3490.00	7417.60
7. Total Disbursements (from Line 31)	3940.00	7870.35
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	452.75	452.75
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	2034.10	

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

12030842495

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

50 State Strategy

Report Covering the Period: From: 04 01 2012 To: 06 30 2012

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)	3,290.00	3,345.00
(ii) Unitemized		
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	3,290.00	3,345.00
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ▶	3,290.00	3,345.00
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		4,034.10
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.)		
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)		
(b) Levin Funds (from Schedule H5)		
(c) Total Transfers (add 18(a) and 18(b))		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) ▶	3,290.00	7,379.10
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	3290.00	7,379.10

12030842496

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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	, .	, .
(ii) Non-Federal Share	, .	, .
(b) Other Federal Operating Expenditures	130.00	4,057.60
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	130.00	4,057.60
22. Transfers to Affiliated/Other Party Committees	, .	, .
23. Contributions to Federal Candidates/Committees and Other Political Committees	, .	, .
24. Independent Expenditures (use Schedule E)	, .	, .
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	, .	, .
26. Loan Repayments Made	2,000.00	2,000.00
27. Loans Made	, .	, .
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	, .	, .
(b) Political Party Committees	, .	, .
(c) Other Political Committees (such as PACs)	, .	, .
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶	, .	, .
29. Other Disbursements	, .	, .
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	, .	, .
(ii) "Levin" Share	, .	, .
(b) Federal Election Activity Paid Entirely With Federal Funds	, .	, .
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶	, .	, .
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	2,130.00	6,057.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶	2,130.00	6,057.60

12030842497

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	290.00	345.00
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	290.00	345.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	130.00	4,057.60
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36) ▶	130.00	4,057.60

12030842498

FE6AN026

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): ☑ 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): 50 State Strategy

A.
Full Name (Last, First, Middle Initial): Richard Robinson
Mailing Address: 10679 Farallone Dr.
City: Cupertino State: CA Zip Code: 95014
FEC ID number of contributing federal political committee: C
Name of Employer: Robinson Communications
Occupation: CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 50.00
Date of Receipt: 04 16 2012
Amount of Each Receipt this Period: 50.00

B.
Full Name (Last, First, Middle Initial): Alemu, Nebiyu
Mailing Address: 1800 Southwest Expressway
City: San Jose State: CA Zip Code: 95126
FEC ID number of contributing federal political committee: C
Name of Employer: Veer Projects
Occupation: Director of Bus Dev
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 50.00
Date of Receipt: 04 17 2012
Amount of Each Receipt this Period: 50.00

C.
Full Name (Last, First, Middle Initial): Anthony Turley
Mailing Address: 545 W. Hacienda Campbell, CA 95008
City: ~~Lucky Shot Media~~ State: Zip Code:
FEC ID number of contributing federal political committee: C
Name of Employer: Lucky Shot Media
Occupation: Consultant
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1500
Date of Receipt: 04 17 2012
Amount of Each Receipt this Period: 1500

SUBTOTAL of Receipts This Page (optional) ▶ 1150.00

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

12030842499

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) ☑ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
50 State Strategy

A.
Full Name (Last, First, Middle Initial): Victoria Ramirez
Mailing Address: 377 N. 14th St.
City: San Jose State: CA Zip Code: 95112
FEC ID number of contributing federal political committee: C
Name of Employer: Robinson Communications
Occupation: Director of Operations
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼: 2000
Date of Receipt: 04 17 2012
Amount of Each Receipt this Period: 2000

B.
Full Name (Last, First, Middle Initial): Richard Robinson
Mailing Address: 10674 Faraflone Dr.
City: Cupertino State: CA Zip Code: 94104
FEC ID number of contributing federal political committee: C
Name of Employer: Robinson Communications
Occupation: CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼: 105000
Date of Receipt: 04 17 2012
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial): Rachel Yudin-Cowan
Mailing Address: 156 Pierce Avenue
City: San Jose State: CA Zip Code: 95110
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation: Student
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼: 2500
Date of Receipt: 04 19 2012
Amount of Each Receipt this Period: 25 00

SUBTOTAL of Receipts This Page (optional) ▶ 1045.00

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

12030842500

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 28

☑ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full): 50 State Strategy

A.
Full Name (Last, First, Middle Initial): Helen Wilson
Mailing Address: 710 S. Indian Hills Dr. #8
City: St. George State: UT Zip Code: 84770
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation: unemployed
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼: 1000
Date of Receipt: 05 07 2012
Amount of Each Receipt this Period: 1000

B.
Full Name (Last, First, Middle Initial): Richard Robinson
Mailing Address: 10679 Fonallone Dr.
City: Cupertino State: CA Zip Code: 95014
FEC ID number of contributing federal political committee: C
Name of Employer: Robinson Communications
Occupation: CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼: 110000
Date of Receipt: 05 16 2012
Amount of Each Receipt this Period: 50 00

C.
Full Name (Last, First, Middle Initial): Robinson, Richard
Mailing Address: 10679 Fonallone Dr.
City: Cupertino State: CA Zip Code: 95014
FEC ID number of contributing federal political committee: C
Name of Employer: Robinson Communications
Occupation: CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼: 210000
Date of Receipt: 05 17 2012
Amount of Each Receipt this Period: 100000

SUBTOTAL of Receipts This Page (optional) ▶ 1860 00

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

12030842501

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): ☑ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full): SD State Strategy

A.
Full Name (Last, First, Middle Initial): Helen Wilson
Mailing Address: 710 S. Indian Hills Dr. 48
City: St. George State: UT Zip Code: 84770
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation: unemployed
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 2000
Date of Receipt: 06 07 2012
Amount of Each Receipt this Period: 1000

B.
Full Name (Last, First, Middle Initial): Robinson, Richard
Mailing Address: 10679 Farallone Dr.
City: Cupertino State: CA Zip Code: 95014
FEC ID number of contributing federal political committee: C
Name of Employer: Robinson Communications
Occupation: CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 21500
Date of Receipt: 06 16 2012
Amount of Each Receipt this Period: 500

C.
Full Name (Last, First, Middle Initial): Robinson, Richard
Mailing Address: 10679 Farallone Dr.
City: Cupertino State: CA Zip Code: 95014
FEC ID number of contributing federal political committee: C
Name of Employer: Robinson Communications
Occupation: CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 31000
Date of Receipt: 06 17 2012
Amount of Each Receipt this Period: 1000

SUBTOTAL of Receipts This Page (optional): 1060.00

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

12030842502

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 10 OF 28

☑ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
50 State Strategy

A.
Full Name (Last, First, Middle Initial)
~~Robinson,~~ Wilson, Helen

Mailing Address
710 S. Indian Hills Dr. #8

City: St. George | State: UT | Zip Code: 84770

FEC ID number of contributing federal political committee: C

Name of Employer:

Occupation: unemployed

Receipt For: Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 30 00

Date of Receipt: 07 07 2012

Amount of Each Receipt this Period: 10.00

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

Mailing Address

City | State | Zip Code

FEC ID number of contributing federal political committee: C

Name of Employer:

Occupation:

Receipt For: Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼:

Date of Receipt:

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:

Amount of Each Receipt this Period:

SUBTOTAL of Receipts This Page (optional) ▶ 10 00

TOTAL This Period (last page this line number only) ▶ ~~3290.00~~ 3290.00

FE8AN026

FEC Schedule A (Form 3X) Rev 02/2003

12030842503

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): ☑ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full): 50 State Strategy

A.
Full Name (Last, First, Middle Initial): Act Blue
Mailing Address: 14 Arrow St.
City: Cambridge State: MASS Zip Code: 02138
Purpose of Disbursement: Fundraising Service Fee
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 04 22 2012
Amount of Each Disbursement this Period: 45.84

B.
Full Name (Last, First, Middle Initial): Act Blue
Mailing Address: 14 Arrow St
City: Cambridge State: MA Zip Code: 02138
Purpose of Disbursement: Fundraising Service Fee
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 05 13 2012
Amount of Each Disbursement this Period: 0.40

C.
Full Name (Last, First, Middle Initial): Act Blue
Mailing Address: 14 Arrow St
City: Cambridge State: MA Zip Code: 02138
Purpose of Disbursement: Fundraising Service Fee
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 05 20 2012
Amount of Each Disbursement this Period: 41.48

SUBTOTAL of Disbursements This Page (optional) ▶ 87.72

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

12030842504

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)
☑ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 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): 50 State Strategy

A.
Full Name (Last, First, Middle Initial): Act Blue Technical Services
Mailing Address: 14 Arrow St.
City: Cambridge State: MA Zip Code: 02138
Purpose of Disbursement: Fundraising Service Fee
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 06 10 2012
Amount of Each Disbursement this Period: 040

B.
Full Name (Last, First, Middle Initial): Act Blue Technical Services
Mailing Address: 14 Arrow St
City: Cambridge State: MA Zip Code: 02138
Purpose of Disbursement: Fundraising
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 06 17 2012
Amount of Each Disbursement this Period: 4148

C.
Full Name (Last, First, Middle Initial): Act Blue Technical Services
Mailing Address: 14 Arrow St.
City: Cambridge State: MA Zip Code: 02138
Purpose of Disbursement: Fundraising
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 07 08 2012
Amount of Each Disbursement this Period: 040

SUBTOTAL of Disbursements This Page (optional) ▶ 4228

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

12030842505

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)
☑ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
50 State Strategy

A.
Full Name (Last, First, Middle Initial): Robinson Communications
Mailing Address: 152 N. Third St.
City: San Jose, State: CA, Zip Code: 95112.
Purpose of Disbursement: loan repayment.
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 05 10 2012
Amount of Each Disbursement this Period: 1,000.00

B.
Full Name (Last, First, Middle Initial): Robinson Communications
Mailing Address: 152 N. Third St
City: San Jose, State: CA, Zip Code: 95112.
Purpose of Disbursement: loan repayment.
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 06 07 2012
Amount of Each Disbursement this Period: 1,000.00

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
Amount of Each Disbursement this Period:

SUBTOTAL of Disbursements This Page (optional) ▶ 2,000.00

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

12030842506

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)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
50 State Strategy

A.
Full Name (Last, First, Middle Initial): Anthony Turley
Mailing Address: 545 W. Hacienda #301
City: Campbell State: CA Zip Code: 95008
Purpose of Disbursement: Website Design
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 04 11 2012
Amount of Each Disbursement this Period: 200.00

B.
Full Name (Last, First, Middle Initial): Anthony Turley
Mailing Address: 545 W. Hacienda #301
City: Campbell State: CA Zip Code: 95008
Purpose of Disbursement: Website Design
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 04 16 2012
Amount of Each Disbursement this Period: 254.25

C.
Full Name (Last, First, Middle Initial): Anthony Turley
Mailing Address: 545 W. Hacienda St. #301
City: Campbell State: CA Zip Code: 95008
Purpose of Disbursement: Website Design
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 04 24 2012
Amount of Each Disbursement this Period: 210.05

SUBTOTAL of Disbursements This Page (optional) ▶ 734.30

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

12030842507

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): ☑ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full): 50 State Strategy

A.
Full Name (Last, First, Middle Initial): Anthony Turley
Mailing Address: 545 W. Hacienda St. #301
City: Campbell State: CA Zip Code: 95008
Purpose of Disbursement: Website Design
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 04 30 2012
Amount of Each Disbursement this Period: 174 20

B.
Full Name (Last, First, Middle Initial): Anthony Turley
Mailing Address: 545 W. Hacienda St. #301
City: Campbell State: CA Zip Code: 95008
Purpose of Disbursement: Website Design
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 05 25 2012
Amount of Each Disbursement this Period: 4545 25

C.
Full Name (Last First, Middle Initial): Anthony Turley
Mailing Address: 545 W. Hacienda St. #301
City: Campbell State: CA Zip Code: 95008
Purpose of Disbursement: Website Design
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 05 25 2012
Amount of Each Disbursement this Period: 45 00

SUBTOTAL of Disbursements This Page (optional) ▶ 1078 45

TOTAL This Period (last page this line number only) ▶ 3942.75

12030847250 8

SCHEDULE C (FEC Form 3X)
LOANS

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

PAGE 10 OF 28

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)
50 State Strategy

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robinson Communications

Mailing Address
152 N. Third St. San Jose CA 95112

City State ZIP Code

Election:
- [ ] Primary
- [ ] General
- [ ] Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
130.00	0	130.00

TERMS

Date Incurred (M M / D D / Y Y Y Y)	Date Due (M M / D D / Y Y Y Y)	Interest Rate	Secured:
01 17 2012		0.00 % (apr)	[ ] Yes [ ] No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶ 130.00

TOTALS This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

12030842509

SCHEDULE C (FEC Form 3X)
LOANS

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

PAGE 17 OF 20

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)
50 State Strategy

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robinson Communications

Mailing Address
152 N. Third St. San Jose CA 95112

City State ZIP Code

Election:
- [ ] Primary
- [ ] General
- [ ] Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
7.05	0.00	7.05

TERMS

Date Incurred (M M / D D / Y Y Y Y)	Date Due (M M / D D / Y Y Y Y)	Interest Rate	Secured:
02 01 2012		0.00 % (apr)	[ ] Yes [ ] No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	7.05
TOTALS This Period (last page in this line only) ▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

12030842510

SCHEDULE C (FEC Form 3X)
LOANS

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

PAGE 18 OF 28

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)
50 State Strategy

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robinson Communications

Mailing Address
152 N. Third St. San Jose CA 95112.

City State ZIP Code

Election:
- [ ] Primary
- [ ] General
- [ ] Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1,564.10	0	1,564.10

TERMS

Date Incurred (M M / D D / Y Y Y Y)	Date Due (M M / D D / Y Y Y Y)	Interest Rate	Secured:
02 09 2012		0.00 % (apr)	[ ] Yes [ ] No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶ 1,564.10

TOTALS This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

12030842511

SCHEDULE C (FEC Form 3X)
LOANS

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

PAGE 19 OF 28

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)
50 State Strategy

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robinson Communications

Mailing Address
152 N. Third St. San Jose CA 95112.

City State ZIP Code

Election:
- [ ] Primary
- [ ] General
- [ ] Other (specify) ▼

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
500.00	0	500.00

TERMS

Date Incurred (M M / D D / Y Y Y Y)	Date Due (M M / D D / Y Y Y Y)	Interest Rate	Secured:
02 15 2012		0.00 % (apr)	[ ] Yes [ ] No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)
   Mailing Address
   City State ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)
   Mailing Address
   City State ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)
   Mailing Address
   City State ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)
   Mailing Address
   City State ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶ 500.00

TOTALS This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

12030842512

SCHEDULE C (FEC Form 3X)
LOANS

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

PAGE 20 OF 28

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)
50 State Strategy

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robinson Communications

Mailing Address
152 N. Third St. San Jose CA 95112

City State ZIP Code

Election
Primary
General
Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
500.00	0.00	500.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured
02 29 2012		0.00 % (apr)	Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding

2. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding

4. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding

SUBTOTALS This Period This Page (optional) ▶ 500.00

TOTALS This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

12030342513

SCHEDULE C (FEC Form 3X)
LOANS

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

PAGE 28 OF 28

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)
50 State Strategy

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robinson Communications

Mailing Address
152 N. Third St.

City State ZIP Code
San Jose CA 95112

Election:
Primary
General
Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
0	6495	0 0 0 6495

TERMS

Date Incurred	Date Due	Interest Rate	Secured
03 01 2012		0.00 % (apr)	Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding

2. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding

4. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶ 6495

TOTALS This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

12030842514

SCHEDULE C (FEC Form 3X)
LOANS

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

PAGE 22 OF 28

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

50 State Strategy

LOAN SOURCE Full Name (Last, First, Middle Initial)

Robinson Communications

Mailing Address

152 N. Third St. San Jose CA 95112

City State ZIP Code

Election:
Primary
General
Other (specify) ▼

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
6800	000	6800

TERMS

Date Incurred	Date Due	Interest Rate	Secured
03 13 2012		0.00 % (apr)	Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding

4. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding

SUBTOTALS This Period This Page (optional) ▶ 6800

TOTALS This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

12030842515

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SCHEDULE C (FEC Form 3X)
LOANS

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

PAGE 23 OF 78

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

SG State Strategy

LOAN SOURCE Full Name (Last, First, Middle Initial)

Robinson Communications

Mailing Address

152 N. Third St. San Jose CA 95112

City State ZIP Code

Election:
Primary
General
Other (specify) ▼

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
500.00	0.00	500.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
03 15 2012		0.00 % (apr)	Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding

3. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding

4. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶ 500.00

TOTALS This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

12030842515

SCHEDULE C (FEC Form 3X)
LOANS

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

PAGE 20 OF 28

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)
50 State Strategy

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robinson Communications

Mailing Address
151 N. Third St.

City San Jose State CA ZIP Code 95112

Election
Primary
General
Other (specify) ▼

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
20000	000	20000

TERMS

Date Incurred	Date Due	Interest Rate	Secured
03 22 2012		00 % (apr)	Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding

3. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding

4. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding

SUBTOTALS This Period This Page (optional) ▶ 200 00

TOTALS This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

12030842517

SCHEDULE C (FEC Form 3X)
LOANS

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

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)
50 State Strategy

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robinson Communications

Mailing Address
152 N. Third St. San Jose CA 95112

City State ZIP Code

Election:
- [ ] Primary
- [ ] General
- [ ] Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
500.00	0	500.00

TERMS

Date Incurred (M M / D D / Y Y Y Y)	Date Due (M M / D D / Y Y Y Y)	Interest Rate	Secured:
03 30 2012		0.00 % (apr)	[ ] Yes [ ] No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	500.00
TOTALS This Period (last page in this line only) ▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

12030842518

SCHEDULE C (FEC Form 3X)
LOANS

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

PAGE 20 OF 28

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)
50 State Strategy

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robinson Communications

Mailing Address
152 N. Third St. San Jose, CA 95112

City State ZIP Code

Election:
- [ ] Primary
- [ ] General
- [ ] Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1,000.00	1,000.00	0

TERMS

Date Incurred (MM/DD/YYYY)	Date Due (MM/DD/YYYY)	Interest Rate	Secured:
04 17 2012		0.00 % (apr)	[ ] Yes [ ] No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶ 0

TOTALS This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

12030842519

SCHEDULE C (FEC Form 3X)
LOANS

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

PAGE 22 OF 28

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)
50 State Strategy

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robinson Communications

Mailing Address
152 N. Third St. San Jose CA 95112

City State ZIP Code

Election:
- [ ] Primary
- [ ] General
- [ ] Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1,000.00	1,000.00	0

TERMS

Date Incurred (M M / D D / Y Y Y Y)	Date Due (M M / D D / Y Y Y Y)	Interest Rate	Secured:
05 17 2012		0.00 % (apr)	[ ] Yes [ ] No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)
   Mailing Address
   City State ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)
   Mailing Address
   City State ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)
   Mailing Address
   City State ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)
   Mailing Address
   City State ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶ 0

TOTALS This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

12030842520

SCHEDULE C (FEC Form 3X)
LOANS

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

PAGE 28 OF 28

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)
50 State Strategy

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robinson Communications

Mailing Address
152. N. Third St. San Jose CA 95112.

City State ZIP Code

Election:
- [ ] Primary
- [ ] General
- [ ] Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1,000.00	900.00	100.00

TERMS

Date Incurred (M M / D D / Y Y Y Y)	Date Due (M M / D D / Y Y Y Y)	Interest Rate	Secured:
06 17 2012		0.00 % (apr)	[ ] Yes [ ] No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶ 100.00

TOTALS This Period (last page in this line only) ▶ 4,134.10

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

12030842521

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

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☐ Postmark Illegible	
☐ No Postmark	
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Next Business Day Delivery ☐	
☐ Received from House Records & Registration Office	Date of Receipt
☐ Received from Senate Public Records Office	Date of Receipt
☐ Received from Electronic Filing Office	Date of Receipt
☐ Other (Specify):	Date of Receipt or Postmarked
PREPARER	DATE PREPARED 7/16/12

(3/2005)

12030842522