

# 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>Florida Watch Action, Inc.</b>		3. FEC Identification Number <b>C C90012774</b>
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported P.O. Box 533826		
(c) City, State and ZIP Code Orlando FL 32853		
2. <b>Corporate filers only</b>	Is the filer a qualified nonprofit corporation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>Individual filers only</b>	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 Report

b) Is this Report an amendment? Yes  No

5. COVERING PERIOD: FROM

01 / 23 / 2012

THROUGH

01 / 23 / 2012

6. TOTAL CONTRIBUTIONS ..... .00

7. TOTAL INDEPENDENT EXPENDITURES ..... 8362.03

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**

*[Electronically Filed]*

Susannah Randolph

*Susannah Randolph*

01/24/2012

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. 20463 Toll Free 800-424-9530, Local 202-694-1100

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Florida Watch Action, Inc.

Full Name (Last, First, Middle Initial) of Payee BuzzMaker, LLC		Date MM / DD / YYYY 01 / 23 / 2012
Mailing Address 322 Shepherd St. NW		Amount 2318.33 <b>Transaction ID : F57.000001</b>
City Washington	State DC	
Zip Code 20011	Category/Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District: _____
Purpose of Expenditure Website, Pink Slip Mitt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Mitt Romney		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought .00		

Full Name (Last, First, Middle Initial) of Payee BuzzMaker, LLC		Date MM / DD / YYYY 01 / 23 / 2012
Mailing Address 322 Shepherd St. NW		Amount 5000.00 <b>Transaction ID : F57.000002</b>
City Washington	State DC	
Zip Code 20011	Category/Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District: _____
Purpose of Expenditure Facebook Advertising, Pink Slip Mitt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Mitt Romney		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought .00		

Full Name (Last, First, Middle Initial) of Payee Printmeisters of Orlando, Inc.		Date MM / DD / YYYY 01 / 23 / 2012
Mailing Address 10732 William Tell Dr.		Amount 1043.70 <b>Transaction ID : F57.000003</b>
City Orlando	State FL	
Zip Code 32821	Category/Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District: _____
Purpose of Expenditure Posters, Pink Slip Mitt		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Mitt Romney		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought .00		

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	▶	8362.03
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....	▶	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	▶	8362.03