

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

RECEIVED
2012 OCT 31 AM 10:04
Office Use Only

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

12FE4M5
FEC MAIL CENTER

PRO-LIFE CANDIDATES

ADDRESS (number and street) PO BOX 910

Check if different than previously reported. (ACC)

ROMNEY WV 26757-0910

2. FEC IDENTIFICATION NUMBER ▼

C00531550

CITY ▲

STATE ▲

ZIP CODE ▲
STATE ▼ DISTRICT

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)
- Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on 11/06/2012 in the State of

(c) 30-Day POST-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on M M / D D / Y Y Y Y in the State of

5. Covering Period 10/01/2012 through 10/17/2012

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 Muriel McConnon

Signature of Treasurer Muriel McConnon Date 10/23/2012

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							
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FEC FORM 3
(Revised 02/2003)

12030934542

SUMMARY PAGE

of Receipts and Disbursements

Write or Type Committee Name

Pro-Life Candidates

Report Covering the Period: From: 10 01 2012

To: 10 17 2012

12030934543

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	17,894.27	17,894.27
(b) Total Contribution Refunds (from Line 20(d))		
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	17,894.27	17,894.27
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	9,991.51	9,991.51
(b) Total Offsets to Operating Expenditures (from Line 14)	-	-
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	9,991.51	9,991.51
8. Cash on Hand at Close of Reporting Period (from Line 27)	5,928.69	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	-0-	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	-0-	

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

FEC Form 3 (Revised 12/2003)

of Receipts

Page 3

Write or Type Committee Name

Pro-Life Candidates

Report Covering the Period: From: *10 / 01 / 2012* To: *10 / 17 / 2012*

I. RECEIPTS

**COLUMN A
Total This Period**

**COLUMN B
Election Cycle-to-Date**

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

13,050.00

13,050.00

(ii) Unitemized.....

4,844.27

4,844.27

(iii) TOTAL of contributions from individuals ▶

17,894.27

17,894.27

(b) Political Party Committees.....

(c) Other Political Committees (such as PACs).....

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

17,894.27

17,894.27

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

200.00

200.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

(b) All Other Loans.....

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

18,094.27

18,094.27

12030934544

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	9,991.51	9,991.51
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	2,174.08	2,174.08
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....		
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....		
20. 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 20(a), (b), and (c)).....		
21. OTHER DISBURSEMENTS		
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	12,165.59	12,165.59

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	-	0.-
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....		18,094.27
25. SUBTOTAL (add Line 23 and Line 24).....		18,094.27
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....		12,165.59
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....		5,928.68

12030934545

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 1 OF 3
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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) **Pro-Life Candidates** **Joint Fund Raising Proceeds**

Full Name (Last, First, Middle Initial) A. Lemmo, Alfred			Date of Receipt 09 20 2012
Mailing Address 21713 Snow Av			Amount of Each Receipt this Period 2,500.00
City Dearborn	State MI	Zip Code 48124	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 2,500.00
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2,500.00		

Full Name (Last, First, Middle Initial) B. Lemmo, Alfred			Date of Receipt 09 26 2012
Mailing Address 21713 Snow Av			Amount of Each Receipt this Period 7,500.00
City Dearborn	State MI	Zip Code 48124	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 10,000.00
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 10,000.00		

Full Name (Last, First, Middle Initial) C. Hunt, Lynda			Date of Receipt 09 27 2012
Mailing Address 23 Pinewood Knoll			Amount of Each Receipt this Period 1,000.00
City Rochester	State NY	Zip Code 14624	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 1,000.00
Name of Employer Gates Chili	Occupation teacher		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1,000.00		

SUBTOTAL of Receipts This Page (optional).....	11,000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE <u>2</u> OF <u>3</u>
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full) Pro-Life Candidates - Joint Fundraising Proceeds

Full Name (Last, First, Middle Initial) A. <u>Agnello, Janice</u>			Date of Receipt <u>10 09 2012</u>
Mailing Address <u>8113 Tamar Dr</u>			Amount of Each Receipt this Period <u>500.00</u>
City <u>Columbia</u>	State <u>MD</u>	Zip Code <u>21045</u>	
FEC ID number of contributing federal political committee. <u>C</u>			
Name of Employer <u>Requesting</u>		Occupation <u>Requesting</u>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <u>500.00</u>	

Full Name (Last, First, Middle Initial) B. <u>Sullivan, Shawn</u>			Date of Receipt <u>10 06 2012</u>
Mailing Address <u>1717 East Wayne St.</u>			Amount of Each Receipt this Period <u>500.00</u>
City <u>South Bend</u>	State <u>IN</u>	Zip Code <u>46615</u>	
FEC ID number of contributing federal political committee. <u>C</u>			
Name of Employer <u>SELF</u>		Occupation <u>Attorney</u>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <u>500.00</u>	

Full Name (Last, First, Middle Initial) C. <u>Johnson, George V.</u>			Date of Receipt <u>10 12 2012</u>
Mailing Address <u>111 N. Dee Rd.</u>			Amount of Each Receipt this Period <u>350.00</u>
City <u>Park Ridge</u>	State <u>IL</u>	Zip Code <u>60068</u>	
FEC ID number of contributing federal political committee. <u>C</u>			
Name of Employer <u>Retired</u>		Occupation <u>Retired</u>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <u>350.00</u>	

SUBTOTAL of Receipts This Page (optional).....	<u>1,350.00</u>
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 3 OF 3	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full) **Pro-Life Candidates Joint Fund Raising Proceeds**

Full Name (Last, First, Middle Initial) A. Missler, Andrew		Date of Receipt 10 02 2012
Mailing Address 82 Crestwood Dr		Amount of Each Receipt this Period 250.00
City Willard	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer IGA	Occupation Clerk	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. Short, Catherine		Date of Receipt 10 05 2012
Mailing Address 235 Orchard Ln		Amount of Each Receipt this Period 250.00
City Napoleon	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer requesting	Occupation requesting	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) C. Sarafa, Victoria		Date of Receipt 10 01 2012
Mailing Address 11036 Explorer Rd		Amount of Each Receipt this Period 200.00
City LaMesa CA	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer requested	Occupation requested	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	13,050.00

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

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

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NAME OF COMMITTEE (In Full)
Pro-Life Candidates Joint Fund raising proceeds

Full Name (Last, First, Middle Initial) A. Randall Terry for US House		Date of Receipt 08 / 17 / 2012
Mailing Address 101 CANTWELL Court		Amount of Each Receipt this Period 200.00
City Purgitsville	State WV	
FEC ID number of contributing federal political committee. C 00522979		Amount of Each Receipt this Period 200.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 20000	

Full Name (Last, First, Middle Initial) B.		Date of Receipt
Mailing Address		M M / D D / Y Y Y Y
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) C.		Date of Receipt
Mailing Address		M M / D D / Y Y Y Y
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	
TOTAL This Period (last page this line number only).....	200.00

12030934549

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 1 OF 2	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (in Full)
Pro-Life Candidates Joint Fundraising

12030934550

Full Name (Last, First, Middle Initial) A. Holmberg, Ryan		Date of Disbursement 09 21 2012
Mailing Address 1525 A Riverside Dr		Amount of Each Disbursement this Period 2,000.00
City Nashville	State TN	
Zip Code 37206		Category/ Type
Purpose of Disbursement filming for ads		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. Smith-Scoular, Madeline		Date of Disbursement 09 21 2012
Mailing Address 3290 11th Av. SW		Amount of Each Disbursement this Period 500.00
City Naples	State FL	
Zip Code 34119		Category/ Type
Purpose of Disbursement ACTING for Ads		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. Holmberg, Ryan		Date of Disbursement 10 06 2012
Mailing Address 1525 A Riverside Dr		Amount of Each Disbursement this Period 212.86
City Nashville	State TN	
Zip Code 37206		Category/ Type
Purpose of Disbursement Reimburse car rental & gas		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 1 OF 2	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21		

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NAME OF COMMITTEE (In Full)
Pro-Life Candidates

Full Name (Last, First, Middle Initial) A. Boisclair, Gary		Date of Disbursement 10 08 2012
Mailing Address PO Box 481 WV 26757		Amount of Each Disbursement this Period 1,453.40
City Romney	State Zip Code	
Purpose of Disbursement Reimburse McCorvey - Airfare		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Gamon & Grange, PC		Date of Disbursement 10 09 2012
Mailing Address 8280 Greensboro Dr		Amount of Each Disbursement this Period 5,000.00
City M'Lean	State Zip Code VA 22102	
Purpose of Disbursement legal advice		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. McCorvey, Norma		Date of Disbursement 10 11 2012
Mailing Address General Delivery		Amount of Each Disbursement this Period 500.00
City Smithville	State Zip Code TX 78957	
Purpose of Disbursement		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

9,666.26

12030934551

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 1 OF 1	
	<input type="checkbox"/> 17 <input type="checkbox"/> 20a	<input checked="" type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (in Full)
Pro-Life Candidates

Full Name (Last, First, Middle Initial) A. David Lewis for Congress		Date of Disbursement 10 05 2012
Mailing Address 17540 Bloomrose Rd.		Amount of Each Disbursement this Period 500.00
City Williamsburg	State OH	
Purpose of Disbursement transfer to affiliated committee		Category/ Type
Candidate Name David Lewis		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. Alan Aversa for Congress		Date of Disbursement 10 11 2012
Mailing Address PO Box 910		Amount of Each Disbursement this Period 1 674.08
City Romney	State WV	
Purpose of Disbursement transfer to affiliated committee		Category/ Type
Candidate Name Alan Aversa		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	2,174.08
TOTAL This Period (last page this line number only).....	2,174.08

12030934552

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 checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) <i>10/25/12</i>
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature 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
Next Business Day Delivery <input type="checkbox"/>	
<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 type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

JmW
 PREPARER

10/31/12
 DATE PREPARED

12030934553