

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 SIERRA CLUB INDEPENDENT ACTION

ADDRESS (number and street) 85 SECOND STREET SECOND FLOOR Check if different than previously reported. (ACC) SAN FRANCISCO CA 94105

2. FEC IDENTIFICATION NUMBER C C00483693 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special.

5. Covering Period 07 / 01 / 2012 through 07 / 31 / 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 Catherine Duvall

Signature of Treasurer Catherine Duvall [Electronically Filed] Date 12 / 14 / 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 table with 10 columns and 1 row. FEC FORM 3X Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**SIERRA CLUB INDEPENDENT ACTION**

Report Covering the Period: From:  /  /  To:  /  /

|  | COLUMN A<br>This Period                | COLUMN B<br>Calendar Year-to-Date      |
|--|--|--|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2012"/>  | <input type="text" value="32670.09"/>  | <input type="text" value="32670.09"/>  |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | <input type="text" value="16023.09"/>  |  |
| (c) Total Receipts (from Line 19) .....  | <input type="text" value="158168.00"/> | <input type="text" value="175183.62"/> |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <input type="text" value="174191.09"/> | <input type="text" value="207853.71"/> |
| 7. Total Disbursements (from Line 31).....   | <input type="text" value="87004.90"/>  | <input type="text" value="120667.52"/> |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | <input type="text" value="87186.19"/>  | <input type="text" value="87186.19"/>  |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <input type="text" value="0.00"/>      |  |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>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

Write or Type Committee Name

**SIERRA CLUB INDEPENDENT ACTION**

Report Covering the Period: From:  /  /  To:  /  /

| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                   |
| (i) Itemized (use Schedule A).....  | 150000.00                     | 155490.00                         |
| (ii) Unitemized .....   | 8168.00                       | 19693.62                          |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶  | 158168.00                     | 175183.62                         |
| (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) .....  | 158168.00                     | 175183.62                         |
| 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))..... ▶                        | 158168.00                     | 175183.62                         |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶                                  | 158168.00                     | 175183.62                         |

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>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 .....   | -106.62                       | 21556.00                          |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | -106.62                       | 21556.00                          |
| 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) .....  | 87111.52                      | 99111.52                          |
| 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)) ..      | 87004.90                      | 120667.52                         |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 87004.90                      | 120667.52                         |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 158168.00                     | 175183.62                         |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 158168.00                     | 175183.62                         |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | -106.62                       | 21556.00                          |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | -106.62                       | 21556.00                          |

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA

Transaction ID :

The August 20 Monthly report is amended to include a vendor payment made on July 2, 2012 for fundraising costs. Subsequent reports are also being amended and filed to reflect the changes as a result of this addition.

Form/Schedule:

Transaction ID:

**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 7 OF 17  |
| <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)  
**SIERRA CLUB INDEPENDENT ACTION**

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Sara Evans</b> |   | Date of Receipt<br>MM / DD / YYYY<br>07 / 16 / 2012<br><b>Transaction ID : SA11AI.5398</b> |
| Mailing Address 3005 South Lamar Blvd                           |   | Amount of Each Receipt this Period<br>90000.00   |
| City Austin State TX Zip Code 78704                             | FEC ID number of contributing federal political committee. C  | Aggregate Year-to-Date ▼<br>90000.00   |
| Name of Employer Self Occupation Investor                       | Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Sara Evans</b> |   | Date of Receipt<br>MM / DD / YYYY<br>07 / 31 / 2012<br><b>Transaction ID : SA11AI.5399</b> |
| Mailing Address 3005 South Lamar Blvd                           |   | Amount of Each Receipt this Period<br>60000.00   |
| City Austin State TX Zip Code 78704                             | FEC ID number of contributing federal political committee. C  | Aggregate Year-to-Date ▼<br>150000.00  |
| Name of Employer Self Occupation Investor                       | Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Thomas L. Safran</b>        |   | Date of Receipt<br>MM / DD / YYYY<br>05 / 09 / 2012<br><b>Transaction ID : SA11AI.5316</b> |
| Mailing Address 11812 San Vicente Blvd Ste 600                               |   | Amount of Each Receipt this Period<br>1500.00  |
| City Los Angeles State CA Zip Code 90049                                     | FEC ID number of contributing federal political committee. C  | Updated Contributor Information<br><b>[MEMO ITEM]</b>                                      |
| Name of Employer Thomas Safran & Associates Occupation Real Estate Developer | Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| Aggregate Year-to-Date ▼<br>1500.00  |   |  |

|  |           |
|--|-----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 150000.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 150000.00 |

**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 |

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NAME OF COMMITTEE (In Full)  
**SIERRA CLUB INDEPENDENT ACTION**

Full Name (Last, First, Middle Initial)

**A. Mark Bettinger**

Mailing Address 85 Washington St.

City State Zip Code  
Saratoga Springs NY 12866

Purpose of Disbursement  
Salaries & Benefits

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.5623**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Catherine Duvall**

Mailing Address 50 F Street, NW  
8th Floor

City State Zip Code  
Washington DC 20001

Purpose of Disbursement  
Salaries & Benefits

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.5627**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Mary Claire Evans**

Mailing Address 85 2nd St.  
2nd Floor

City State Zip Code  
San Francisco CA 94105

Purpose of Disbursement  
Salaries & Benefits

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.5628**

Amount of Each Disbursement this Period

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

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



**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 |

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NAME OF COMMITTEE (In Full)  
**SIERRA CLUB INDEPENDENT ACTION**

Full Name (Last, First, Middle Initial)

**A. Melissa Lee**

Mailing Address 85 2nd St., 2nd Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Salaries & Benefits

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 15 / 2012

Transaction ID : SB21B.5651

Amount of Each Disbursement this Period

13.77

Full Name (Last, First, Middle Initial)

**B. Melissa Lee**

Mailing Address 85 2nd St., 2nd Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Salaries & Benefits

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2012

Transaction ID : SB21B.5629

Amount of Each Disbursement this Period

59.20

Full Name (Last, First, Middle Initial)

**C. Share**

Mailing Address 79 Chapel St

City NEWton State MA Zip Code 02458

Purpose of Disbursement  
Fundraising - Phone Banking

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 07 / 2012

Transaction ID : SB21B.5641

Amount of Each Disbursement this Period

1088.00

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

1160.97

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

**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 |

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NAME OF COMMITTEE (In Full)  
**SIERRA CLUB INDEPENDENT ACTION**

Full Name (Last, First, Middle Initial)

**A. Share**

Mailing Address 79 Chapel St

City State Zip Code  
NEWton MA 02458

Purpose of Disbursement  
Fundraising - Phone Banking

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.5642**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Share**

Mailing Address 79 Chapel St

City State Zip Code  
NEWton MA 02458

Purpose of Disbursement  
Fundraising - Phone Banking

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.5643**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Gayle Sheehan**

Mailing Address 85 Second St., 2nd Flr.

City State Zip Code  
San Francisco CA 94105

Purpose of Disbursement  
Salaries & Benefits

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.5639**

Amount of Each Disbursement this Period

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

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

**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 |

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NAME OF COMMITTEE (In Full)  
**SIERRA CLUB INDEPENDENT ACTION**

Full Name (Last, First, Middle Initial)

**A. Gayle Sheehan**

Mailing Address 85 Second St., 2nd Flr.

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Salaries & Benefits

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2012

Transaction ID : SB21B.5631

Amount of Each Disbursement this Period

173.05

Full Name (Last, First, Middle Initial)

**B. Sierra Club**

Mailing Address 85 2nd St., 2nd Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Salaries & Benefits

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2012

Transaction ID : SB21B.5633

Amount of Each Disbursement this Period

735.00

Full Name (Last, First, Middle Initial)

**C. Sierra Club**

Mailing Address 85 2nd St., 2nd Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Payment allocated & reported on line 21

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2012

Transaction ID : SB21B.5635

Amount of Each Disbursement this Period

-1440.25

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

-532.20

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

**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 |

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NAME OF COMMITTEE (In Full)  
**SIERRA CLUB INDEPENDENT ACTION**

Full Name (Last, First, Middle Initial)

**A. Sierra Club**

Mailing Address 85 2nd St., 2nd Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Payment allocated & reported on line 24

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
07 / 31 / 2012

Transaction ID : **SB21B.5637**

Amount of Each Disbursement this Period

-3175.81

Full Name (Last, First, Middle Initial)

**B. Sir Speedy**

Mailing Address 1011 Burke Street

City Winston-Salem State NC Zip Code 27101

Purpose of Disbursement  
Printing

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
07 / 02 / 2012

Transaction ID : **SB21B.6449**

Amount of Each Disbursement this Period

361.94

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

/  /

Amount of Each Disbursement this Period

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

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

-2813.87

-106.62

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br><b>SIERRA CLUB INDEPENDENT ACTION</b>   | <b>FEC IDENTIFICATION NUMBER</b> ▼<br><b>C</b> C00483693 |
| 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<br><b>Mark Bettinger</b>       |                          | Date<br>MM / DD / YYYY<br>07 / 15 / 2012   |
| Mailing Address 85 Washington St.   |                          | Amount<br><b>188.31</b>  |
| City<br>Saratoga Springs  | State<br>NY              |  |
| Purpose of Expenditure<br>Salaries & Benefits                                   | Category/<br>Type<br>001 | <b>Transaction ID : SE.5265</b>  |
| Name of Federal Candidate Supported or Opposed by Expenditure:<br>TULSI GABBARD |                          | Office Sought: <input checked="" type="checkbox"/> House    State: HI<br><input type="checkbox"/> Senate    District: 02<br><input type="checkbox"/> President |
| Calendar Year-To-Date Per Election for Office Sought<br><b>337.59</b>           |                          | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose   |
|   |                          | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶                   |

|   |                          |  |
|---|--------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee<br><b>Mark Bettinger</b>       |                          | Date<br>MM / DD / YYYY<br>07 / 31 / 2012   |
| Mailing Address 85 Washington St.   |                          | Amount<br><b>866.22</b>  |
| City<br>Saratoga Springs  | State<br>NY              |  |
| Purpose of Expenditure<br>Salaries & Benefits                                   | Category/<br>Type<br>001 | <b>Transaction ID : SE.5291</b>  |
| Name of Federal Candidate Supported or Opposed by Expenditure:<br>TULSI GABBARD |                          | Office Sought: <input checked="" type="checkbox"/> House    State: HI<br><input type="checkbox"/> Senate    District: 02<br><input type="checkbox"/> President |
| Calendar Year-To-Date Per Election for Office Sought<br><b>87111.52</b>         |                          | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose   |
|   |                          | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶                   |

|   |                |
|---|----------------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶   | <b>1054.53</b> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures..... ▶ |                |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                  |                |

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.

*Catherine Duvall*  
Signature

[Electronically Filed]    Date MM / DD / YYYY  
12 / 14 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br><b>SIERRA CLUB INDEPENDENT ACTION</b>   | <b>FEC IDENTIFICATION NUMBER</b> ▼<br><b>C</b> C00483693 |
| 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<br><b>Don Dresser</b>                 |                                 | Date<br>MM / DD / YYYY<br><b>07 / 15 / 2012</b>  |
| Mailing Address <b>85 2nd St. 2nd Flr</b>  |                                 | Amount<br><b>149.28</b>  |
| City<br><b>San Francisco</b>   | State<br><b>CA</b>              |  |
| Zip Code<br><b>94105</b>   | <b>Transaction ID : SE.5258</b> |  |
| Purpose of Expenditure<br><b>Salaries &amp; Benefits</b>                               | Category/Type<br><b>001</b>     | Office Sought: <input checked="" type="checkbox"/> House    State: <b>HI</b><br><input type="checkbox"/> Senate    District: <b>02</b><br><input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure:<br><b>TULSI GABBARD</b> |                                 | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose   |
| Calendar Year-To-Date Per Election for Office Sought<br><b>149.28</b>                  |                                 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶                                 |

|  |                                 |  |
|--|---------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee<br><b>Don Dresser</b>                 |                                 | Date<br>MM / DD / YYYY<br><b>07 / 31 / 2012</b>  |
| Mailing Address <b>85 2nd St. 2nd Flr</b>  |                                 | Amount<br><b>74.64</b>   |
| City<br><b>San Francisco</b>   | State<br><b>CA</b>              |  |
| Zip Code<br><b>94105</b>   | <b>Transaction ID : SE.5286</b> |  |
| Purpose of Expenditure<br><b>Salaries &amp; Benefits</b>                               | Category/Type<br><b>001</b>     | Office Sought: <input checked="" type="checkbox"/> House    State: <b>HI</b><br><input type="checkbox"/> Senate    District: <b>02</b><br><input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure:<br><b>TULSI GABBARD</b> |                                 | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose   |
| Calendar Year-To-Date Per Election for Office Sought<br><b>86245.30</b>                |                                 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶                                 |

|  |               |
|--|---------------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶   | <b>223.92</b> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶ |               |
| (c) <b>TOTAL</b> Independent Expenditures.....▶                  |               |

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.

*Catherine Duvall*

Signature \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY **12 / 14 / 2012**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br><b>SIERRA CLUB INDEPENDENT ACTION</b>   | <b>FEC IDENTIFICATION NUMBER</b> ▼<br><b>C</b> C00483693 |
| 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<br><b>Mack Crouse Group LLC</b> |                                 | Date<br>MM / DD / YYYY<br><b>07 / 24 / 2012</b>  |
| Mailing Address 2001 N. Beauregard Street<br>Suite 420                           |                                 | Amount<br><b>27978.57</b>  |
| City<br>Alexandria   | State<br>VA                     |  |
| Zip Code<br>22311  | <b>Transaction ID : SE.5269</b> |  |
| Purpose of Expenditure<br>Consultants - Direct Mailing                           | Category/<br>Type <b>006</b>    | Office Sought: <input checked="" type="checkbox"/> House    State: <u>HI</u><br><input type="checkbox"/> Senate    District: <u>02</u><br><input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure:<br>TULSI GABBARD  |                                 | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose   |
| Calendar Year-To-Date Per Election<br>for Office Sought <b>30092.16</b>          |                                 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶                                 |

|  |                                 |  |
|--|---------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee<br><b>Mack Crouse Group LLC</b> |                                 | Date<br>MM / DD / YYYY<br><b>07 / 26 / 2012</b>  |
| Mailing Address 2001 N. Beauregard Street<br>Suite 420                           |                                 | Amount<br><b>27978.57</b>  |
| City<br>Alexandria   | State<br>VA                     |  |
| Zip Code<br>22311  | <b>Transaction ID : SE.5279</b> |  |
| Purpose of Expenditure<br>Consultants - Direct Mailing                           | Category/<br>Type <b>006</b>    | Office Sought: <input checked="" type="checkbox"/> House    State: <u>HI</u><br><input type="checkbox"/> Senate    District: <u>02</u><br><input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure:<br>TULSI GABBARD  |                                 | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose   |
| Calendar Year-To-Date Per Election<br>for Office Sought <b>58070.73</b>          |                                 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶                                 |

|  |                 |
|--|-----------------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶   | <b>55957.14</b> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶ |                 |
| (c) <b>TOTAL</b> Independent Expenditures.....▶                  |                 |

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.

*Catherine Duvall*

Signature

[Electronically Filed]

Date

MM / DD / YYYY  
**12 / 14 / 2012**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br><b>SIERRA CLUB INDEPENDENT ACTION</b>   | <b>FEC IDENTIFICATION NUMBER ▼</b><br><b>C</b> C00483693 |
| 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<br><b>Mack Crouse Group LLC</b> |                              | Date<br>MM / DD / YYYY<br><b>07 / 31 / 2012</b>  |
| Mailing Address 2001 N. Beauregard Street<br>Suite 420                           |                              | Amount<br><b>27978.57</b>  |
| City<br>Alexandria   | State<br>VA                  | Zip Code<br>22311  |
| Purpose of Expenditure<br>Consultants - Direct Mailing                           | Category/<br>Type <b>006</b> | <b>Transaction ID : SE.5283</b>  |
| Name of Federal Candidate Supported or Opposed by Expenditure:<br>TULSI GABBARD  |                              | Office Sought: <input checked="" type="checkbox"/> House    State: <u>HI</u><br><input type="checkbox"/> Senate    District: <u>02</u><br><input type="checkbox"/> President |
| Calendar Year-To-Date Per Election for Office Sought <b>86049.30</b>             |                              | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose   |
|  |                              | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶                                 |

|   |                              |  |
|---|------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee<br><b>Trey Pollard</b>         |                              | Date<br>MM / DD / YYYY<br><b>07 / 31 / 2012</b>  |
| Mailing Address 50 F Street, NW, Eighth Floor                                   |                              | Amount<br><b>121.36</b>  |
| City<br>Washington  | State<br>DC                  | Zip Code<br>20001  |
| Purpose of Expenditure<br>Salaries & Benefits                                   | Category/<br>Type <b>001</b> | <b>Transaction ID : SE.5285</b>  |
| Name of Federal Candidate Supported or Opposed by Expenditure:<br>TULSI GABBARD |                              | Office Sought: <input checked="" type="checkbox"/> House    State: <u>HI</u><br><input type="checkbox"/> Senate    District: <u>02</u><br><input type="checkbox"/> President |
| Calendar Year-To-Date Per Election for Office Sought <b>86170.66</b>            |                              | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose   |
|   |                              | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶                                 |

|  |                 |
|--|-----------------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶   | <b>28099.93</b> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶ |                 |
| (c) <b>TOTAL</b> Independent Expenditures.....▶                  |                 |

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.

*Catherine Duvall*

Signature \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY **12 / 14 / 2012**



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

|  |  |   |
|--|--|---|
| NAME OF COMMITTEE (In Full)<br><b>SIERRA CLUB INDEPENDENT ACTION</b>   |  | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black;">C</span> C00483693       </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<br><b>Sierra Club</b>  |  | Date<br>MM / DD / YYYY<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">07 / 24 / 2012</div>                                      |
| Mailing Address 85 2nd St., 2nd Floor   |  | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">1776.00</div>                            |
| City<br>San Francisco   | State<br>CA  |  |
| Zip Code<br>94105   | <b>Transaction ID : SE.5255</b>  |  |
| Purpose of Expenditure<br>List Acquisition  | Category/<br>Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">006</div> | Office Sought: <input checked="" type="checkbox"/> House    State: HI<br><input type="checkbox"/> Senate    District: 02<br><input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure:<br>TULSI GABBARD   |  | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose   |
| Calendar Year-To-Date Per Election for Office Sought<br><div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">2113.59</div> |  | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶                   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial) of Payee   |   | Date<br>MM / DD / YYYY  |
| Mailing Address  |   | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;"></div>                              |
| City   | State   |   |
| Zip Code   |   |   |
| Purpose of Expenditure   | Category/<br>Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> | Office Sought: <input type="checkbox"/> House    State: _____<br><input type="checkbox"/> Senate    District: _____<br><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<br><div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;"></div> |   | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶                         |

|  |  |
|--|--|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶   | <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">1776.00</div>  |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;"></div>         |
| (c) <b>TOTAL</b> Independent Expenditures.....▶                  | <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">87111.52</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.

*Catherine Duvall*

Signature \_\_\_\_\_ [Electronically Filed] Date

MM / DD / YYYY

  
12 / 14 / 2012