

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 ENVIRONMENT NORTH CAROLINA		3. FEC Identification Number C C90011016
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 112 SOUTH BLOUNT STREET SUITE 102		
(c) City, State and ZIP Code RALEIGH NC 27601		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Individual filers only	Name of Employer	Occupation

4. TYPE OF REPORT (check appropriate boxes):

- (a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☒ January 31 Year-End Report
- ☐ 24-Hour Report
☐ 48-Hour Report

b) Is this Report an amendment? Yes ☐ No ☒

5. COVERING PERIOD: FROM

07 / **01** / **2012**
 THROUGH
12 / **31** / **2012**

6. TOTAL CONTRIBUTIONS

0.00

7. TOTAL INDEPENDENT EXPENDITURES

774.24

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]

Elizabeth Ouzts

Elizabeth Ouzts

12/31/2012

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 EXPENDITURESPAGE 2 OF 4
FOR LINE 7 OF FORM 5NAME OF FILER (In Full)
ENVIRONMENT NORTH CAROLINA

Full Name (Last, First, Middle Initial) of Payee Convio		Date MM / DD / YYYY 10 / 11 / 2012	
Mailing Address 2000 Daniels Island Drive		Amount 17.27	
City Charleston	State SC	Zip Code 29492	Transaction ID : F57.4116
Purpose of Expenditure cost to send several GOTV e-mails		Category/ Type 004	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 293.21		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Elizabeth Ouzts		Date MM / DD / YYYY 09 / 30 / 2012	
Mailing Address 112 SOUTH BLOUNT STREET SUITE 102		Amount 61.22	
City RALEIGH	State NC	Zip Code 27601	Transaction ID : F57.4106
Purpose of Expenditure staff time on phone bank		Category/ Type 001	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 180.82		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Elizabeth Ouzts		Date MM / DD / YYYY 10 / 03 / 2012	
Mailing Address 112 SOUTH BLOUNT STREET SUITE 102		Amount 95.12	
City RALEIGH	State NC	Zip Code 27601	Transaction ID : F57.4111
Purpose of Expenditure staff time developing materials		Category/ Type 001	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 275.94		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....		173.61	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)			

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 3 OF 4
FOR LINE 7 OF FORM 5NAME OF FILER (In Full)
ENVIRONMENT NORTH CAROLINA

Full Name (Last, First, Middle Initial) of Payee Elizabeth Ouzts		Date MM / DD / YYYY 10 / 13 / 2012	
Mailing Address 112 SOUTH BLOUNT STREET SUITE 102		Amount 91.83	
City RALEIGH	State NC	Zip Code 27601	Transaction ID : F57.4112
Purpose of Expenditure staff time on endorsements	Category/ Type 001	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 385.04		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee David Rogers		Date MM / DD / YYYY 09 / 28 / 2012	
Mailing Address 112 SOUTH BLOUNT STREET SUITE 102		Amount 14.95	
City RALEIGH	State NC	Zip Code 27601	Transaction ID : F57.4104
Purpose of Expenditure staff time on phone bank	Category/ Type 001	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 14.95		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee David Rogers		Date MM / DD / YYYY 09 / 30 / 2012	
Mailing Address 112 SOUTH BLOUNT STREET SUITE 102		Amount 104.65	
City RALEIGH	State NC	Zip Code 27601	Transaction ID : F57.4105
Purpose of Expenditure staff time on phone bank	Category/ Type 001	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 119.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	211.43
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)	

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 4 OF 4
FOR LINE 7 OF FORM 5NAME OF FILER (In Full)
ENVIRONMENT NORTH CAROLINA

Full Name (Last, First, Middle Initial) of Payee David Rogers		Date MM / DD / YYYY 10 / 16 / 2012	
Mailing Address 112 SOUTH BLOUNT STREET SUITE 102		Amount 194.35	
City RALEIGH	State NC	Zip Code 27601	Transaction ID : F57.4114
Purpose of Expenditure staff time on GOTV	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 579.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee David Rogers		Date MM / DD / YYYY 10 / 26 / 2012	
Mailing Address 112 SOUTH BLOUNT STREET SUITE 102		Amount 150.00	
City RALEIGH	State NC	Zip Code 27601	Transaction ID : F57.4117
Purpose of Expenditure cost of phonebanking equipment	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 729.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee David Rogers		Date MM / DD / YYYY 10 / 28 / 2012	
Mailing Address 112 SOUTH BLOUNT STREET SUITE 102		Amount 44.85	
City RALEIGH	State NC	Zip Code 27601	Transaction ID : F57.4115
Purpose of Expenditure staff time on GOTV	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 774.24		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....		389.20	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)		774.24	