11/04/2012 17 : 15

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FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

(a) Name of Individual, Organization or Corporation WISCONSIN FAMILY ACTION INC		
(b) Address (number and street) check if different than previous 222 S HAMILTON ST STE 24	usly reported	
(c) City, State and ZIP Code	3. FEC Identification Number	iber
MADISON	WI 53703	
Corporate filers only Is the filer a qualified nonprofit corporation	n?	ينـــــــــــــــــــــــــــــــــــــ
Individual filers only Name of Employer	Occupation	
4. TYPE OF REPORT (check appropriate boxes):		
(a) April 15 Quarterly Report		
July 15 Quarterly Report	✓ 24-Hour Report	
October 15 Quarterly Report	,	
January 31 Year-End Report	48-Hour Report	
b) Is this Report an amendment? Yes No 5. COVERING PERIOD: FROM 11 11 11 103 THROUGH	2012 1 2012	
6. TOTAL CONTRIBUTIONS	908.68	3
7. TOTAL INDEPENDENT EXPENDITURES	1214.42	2
Under penalty of perjury I certify that the independent expenditures reported herein we suggestion of, any candidate or authorized committee or agent of either, or any politherein were made by a corporation) I certify that the corporation is a qualified nonpression.	itical party committee or its agent. In addition, (if the independent expenditures reporte	reported
TYPE OR PRINT NAME OF PERSON COMPLETING FORM	SIGNATURE DATE [Electronically Filed]	
Judith Brant	Judith Brant 11/04/2012	
NOTE: Submission of false, erroneous or incomplete information may	y 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

5PG021 FEC **Schedule 5** (REV. 09/2005)

SCHEDULE 5-A ITEMIZED RECEIPTS

PAGE	2	OF	4
1 / (_	01	_

or commercial purposes, other than using the name and address of any political committee to solicit contributions from such NAME OF FILER (In Full) WISCONSIN FAMILY ACTION INC Full Name (Last, First, Middle Initial) Florida Family Action Mailing Address 4853 \$ Orange Ave Zity Orlando FL 32806 FL 32806 Transaction ID: F56.000 Amount of Each Receipt the first of		Statements may not be sold or used by any pe	
Florida Family Action Mailing Address 4853 S Orange Ave Date of Receipt Transaction ID: F56.000 Amount of Each Receipt in 11 03 1 1 1 03 1 1 1 03 1 1 1 1 03 1 1 1 1	mercial purposes, other than using th DF FILER (In Full)		
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		<u> </u>	908.68

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 3 OF 4 FOR LINE 7 OF FORM 5

AME OF FILER (In Full) WISCONSIN FAMILY ACTION INC					
Full Name (Last, First, Middle Initial) of Pa	ayee			Date	
Angler, LLC				M = M / D = D / Y	1 Y 1 Y 1 Y
Mailing Address 1100 G St NW				11 04	2012
Suite 805		- : 0 :		Amount	
City Washington	State DC	Zip Code 20005			152.87
Purpose of Expenditure		_		Transaction ID : F57.000001	
Advertising: Live phone calls		Category/ Type	004	Senate	tate: trict:
Name of Federal Candidate Supported or Mitt Romney	Opposed by Expend	liture:		President Check One: Support	Oppose
Calendar Year-To-Date Per Election for Office Sought		4	.00	Disbursement For: Primary 2012 Other (specify)	General
Full Name (Last, First, Middle Initial) of Pa	ayee			Date	
Angler, LLC				M M / D D / Y	- Y - Y - Y
Mailing Address 1100 G St NW				11 04	2012
Suite 805				Amount	
City	State	Zip Code			152.87
Washington	DC	20005		Transaction ID : F57.000002	102.07
Purpose of Expenditure Advertising: Live phone calls		Category/ Type	004	X Senate	tate: WI
Name of Federal Candidate Supported or Tommy Thompson	Opposed by Expend	liture:		President Check One: X Support	Oppose
Calendar Year-To-Date Per Election for Office Sought		1	.00	Disbursement For: Primary 2012 Other (specify)	General
Full Name (Last, First, Middle Initial) of Pa	ayee			Date	
Florida Family Action				11 / 03 / Y	2012
Mailing Address 4853 S Orange Ave				Amount	
City	State	Zip Code		Amount	
Orlando	FL	32806			454.34
		_		Transaction ID : F57.000003	
Purpose of Expenditure Advertising: personnel for live phone calls	in-kind	Category/ Type	004	Office Sought: House S	tate:
Name of Federal Candidate Supported or	Opposed by Expend	liture:		X President Dis	trict:
Mitt Romney	Special by Experie			Check One: X Support	Oppose
Calendar Year-To-Date Per Election for Office Sought		5	.00	Disbursement For: Primary 2012 Other (specify)	General
(a) SUBTOTAL of Itemized Independent E	xpenditures			>	760.08
(b) SUBTOTAL of Unitemized Independent	Expenditures			·	
(c) TOTAL Independent Expenditures (carry total from last page forwar				>	

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 4 OF 4 FOR LINE 7 OF FORM 5

AME OF FILER (In Full) WISCONSIN FAMILY ACTION INC						
Full Name (Last, First, Middle Initial) o Florida Family Action	f Payee			Date	/ D D /	Y
Mailing Address 4853 S Orange Ave				11	03	2012
lood of oralligo vitto				Amount		
City	State FL	Zip Code			7	454.34
Purpose of Expenditure		32806 Category/		Transact Office Sought:	House	004 State: WI
Advertising: live phone calls		Type	004	Omoc Gougni.	X Senate	District:
Name of Federal Candidate Supported Tommy Thompson	or Opposed by Expend	liture:		Check One:	President Support	Oppose
Calendar Year-To-Date Per Election for Office Soug			.00	Disbursement F 201: Other		General
Full Name (Last, First, Middle Initial) o	f Payee		'	Date		
Mailing Address				M = N	/ D D /	Y - Y - Y - Y
				Amount		
City	State	Zip Code			, ,	
Purpose of Expenditure		Category/ Type		Office Sought:	House	State:
Name of Federal Candidate Supported	or Opposed by Expend				Senate President	District:
Thank of Fourier Cartalage Cappenda	o. Opposed by Expend			Check One:	Support	Oppose
Calendar Year-To-Date Per Electio for Office Sough				Disbursement F	or: Primary (specify)	General
Full Name (Last, First, Middle Initial) o	f Payee			Date		
Mailing Address				M	/ D D /	YIYIY
Mailing Address				Amount		
City	State	Zip Code			7	
Purpose of Expenditure		Catagony		Office Sought:	House	_
Tarpood of Exponential		Category/ Type		Office Godgitt.	Senate	State:
Name of Federal Candidate Supported	or Opposed by Expend	liture:			President	
				Check One:	Support	Oppose
Calendar Year-To-Date Per Electic for Office Sougl	ht	.,		Disbursement F Other	or: Primary (specify)	General
(a) SUBTOTAL of Itemized Independen	t Expenditures			.	, , ,	454.34
(b) SUBTOTAL of Unitemized Independent	lent Expenditures			·	7 1 1 7	
(c) TOTAL Independent Expenditures (carry total from last page for				·	, , , , , , , , , , , , , , , , , , ,	1214.42