

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 Public Interest Forum		3. FEC Identification Number C C90014341
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 118 West Ottawa		
(c) City, State and ZIP Code Lansing MI 48933		
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

M M	/	D D	/	Y Y Y Y Y Y
10		01		2012

THROUGH

M M	/	D D	/	Y Y Y Y Y Y
12		31		2012

6. TOTAL CONTRIBUTIONS

2051.69

7. TOTAL INDEPENDENT EXPENDITURES

4038.47

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]

Brad Snavelly

Brad Snavelly

02/02/2013

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-A **ITEMIZED RECEIPTS**

PAGE 2 OF 7

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 FILER (In Full)
Public Interest Forum

A. Full Name (Last, First, Middle Initial) Florida Family Action, Inc.			Date of Receipt <div> <div>MM / DD / YYYY</div> <div>11 / 02 / 2012</div> </div>		
Mailing Address 4853 South Orange Avenue			Transaction ID : F56.000001		
City Orlando	State FL	Zip Code 32806	Amount of Each Receipt this Period <div> <div>Amount</div> <div>172.17</div> </div>		
FEC ID number of contributing federal political committee. <div>C</div>					
Name of Employer			Occupation		

B. Full Name (Last, First, Middle Initial) Florida Family Action, Inc.			Date of Receipt <div> <div>MM / DD / YYYY</div> <div>11 / 03 / 2012</div> </div>		
Mailing Address 4853 South Orange Avenue			Transaction ID : F56.000002		
City Orlando	State FL	Zip Code 32806	Amount of Each Receipt this Period <div> <div>Amount</div> <div>956.50</div> </div>		
FEC ID number of contributing federal political committee. <div>C</div>					
Name of Employer			Occupation		

C. Full Name (Last, First, Middle Initial) Florida Family Action, Inc.			Date of Receipt <div> <div>MM / DD / YYYY</div> <div>11 / 04 / 2012</div> </div>		
Mailing Address 4853 South Orange Avenue			Transaction ID : F56.000003		
City Orlando	State FL	Zip Code 32806	Amount of Each Receipt this Period <div> <div>Amount</div> <div>4.78</div> </div>		
FEC ID number of contributing federal political committee. <div>C</div>					
Name of Employer			Occupation		

D. Full Name (Last, First, Middle Initial) Florida Family Action, Inc.			Date of Receipt <div> <div>MM / DD / YYYY</div> <div>11 / 05 / 2012</div> </div>		
Mailing Address 4853 South Orange Avenue			Transaction ID : F56.000004		
City Orlando	State FL	Zip Code 32806	Amount of Each Receipt this Period <div> <div>Amount</div> <div>765.20</div> </div>		
FEC ID number of contributing federal political committee. <div>C</div>					
Name of Employer			Occupation		

SUBTOTAL of Receipts This Page (optional)

1898.65

TOTAL This Period (last page carry total to Line 6)

SCHEDULE 5-A **ITEMIZED RECEIPTS**

PAGE 3 OF 7

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NAME OF FILER (In Full)
Public Interest Forum

A. Full Name (Last, First, Middle Initial) Florida Family Action, Inc.			Date of Receipt	
Mailing Address 4853 South Orange Avenue			<div> <div>MM / DD / YYYY</div> <div>11 / 06 / 2012</div> </div>	
City	State	Zip Code	Transaction ID : F56.000005	
Orlando	FL	32806	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.			<div> <div>C</div> <div></div> </div> <div> <div></div> <div>153.04</div> </div>	
Name of Employer			Occupation	

B. Full Name (Last, First, Middle Initial)			Date of Receipt	
Mailing Address			<div> <div>MM / DD / YYYY</div> <div></div> </div>	
City	State	Zip Code	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.			<div> <div>C</div> <div></div> </div> <div> <div></div> <div></div> </div>	
Name of Employer			Occupation	

C. Full Name (Last, First, Middle Initial)			Date of Receipt	
Mailing Address			<div> <div>MM / DD / YYYY</div> <div></div> </div>	
City	State	Zip Code	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.			<div> <div>C</div> <div></div> </div> <div> <div></div> <div></div> </div>	
Name of Employer			Occupation	

D. Full Name (Last, First, Middle Initial)			Date of Receipt	
Mailing Address			<div> <div>MM / DD / YYYY</div> <div></div> </div>	
City	State	Zip Code	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.			<div> <div>C</div> <div></div> </div> <div> <div></div> <div></div> </div>	
Name of Employer			Occupation	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page carry total to Line 6)

153.04

2051.69

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 4 OF 7
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Public Interest Forum

Full Name (Last, First, Middle Initial) of Payee Angler, LLC		Date MM / DD / YYYY 11 / 02 / 2012	
Mailing Address 1100 G Street NW, Ste. 805		Amount 164.78	
City Washington	State DC	Zip Code 20005	
Purpose of Expenditure Advertising: live phone calls		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 type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought .00		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 Florida Family Action, Inc.		Date MM / DD / YYYY 11 / 02 / 2012	
Mailing Address 4853 South Orange Avenue		Amount 172.17	
City Orlando	State FL	Zip Code	
Purpose of Expenditure Advertising: personnel for live phone calls (in kind)		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 type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought .00		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 Angler, LLC		Date MM / DD / YYYY 11 / 03 / 2012	
Mailing Address 1100 G Street NW, Ste. 805		Amount 922.06	
City Washington	State DC	Zip Code 20005	
Purpose of Expenditure Advertising: live phone calls		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 type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....		1259.01	
(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 5 OF 7
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Public Interest Forum

Full Name (Last, First, Middle Initial) of Payee Florida Family Action, Inc.		Date MM / DD / YYYY 11 / 03 / 2012
Mailing Address 4853 South Orange Avenue		Amount 956.50 Transaction ID : F57.000004
City Orlando	State FL	
Zip Code 32806		
Purpose of Expenditure Advertising: personnel for live phone calls (in kind)	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 type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought .00		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 Angler, LLC		Date MM / DD / YYYY 11 / 04 / 2012
Mailing Address 1100 G Steet NW, Ste. 805		Amount 4.38 Transaction ID : F57.000005
City Washington	State DC	
Zip Code 20005		
Purpose of Expenditure Advertising: live phone calls	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 type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought .00		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 Florida Family Action, Inc.		Date MM / DD / YYYY 11 / 04 / 2012
Mailing Address 4853 South Orange Avenue		Amount 4.78 Transaction ID : F57.000006
City Orlando	State FL	
Zip Code 32806		
Purpose of Expenditure Advertising: personnel for live phone calls (in kind)	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 type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures..... ➤

965.66

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

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 6 OF 7
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Public Interest Forum

Full Name (Last, First, Middle Initial) of Payee Angler, LLC		Date MM / DD / YYYY 11 / 05 / 2012	
Mailing Address 1100 G Street NW, Ste. 805		Amount 748.74	
City Washington	State DC	Zip Code 20005	Transaction ID : F57.000007
Purpose of Expenditure Advertising: live phone calls		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 type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought .00		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 Florida Family Action, Inc.		Date MM / DD / YYYY 11 / 05 / 2012	
Mailing Address 4853 South Orange Avenue		Amount 765.20	
City Orlando	State FL	Zip Code 32806	Transaction ID : F57.000008
Purpose of Expenditure Advertising: personnel for live phone calls (in kind)		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 type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought .00		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 Angler, LLC		Date MM / DD / YYYY 11 / 06 / 2012	
Mailing Address 1100 G Street NW, Ste. 805		Amount 146.82	
City Washington	State DC	Zip Code 20005	Transaction ID : F57.000009
Purpose of Expenditure Advertising: live phone calls		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 type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1660.76
(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 7 OF 7
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Public Interest Forum

Full Name (Last, First, Middle Initial) of Payee Florida Family Action, Inc.		Date MM / DD / YYYY 11 / 06 / 2012	
Mailing Address 4853 South Orange Avenue		Amount 153.04	
City Orlando	State FL	Zip Code 32806	Transaction ID : F57.000010
Purpose of Expenditure Advertising: personnel for live phone calls (n kind)		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 type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee		Date MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <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		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee		Date MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <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		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee		Date MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <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		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	153.04
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)	4038.47