

Anthony J. Ferate

723 Willow Run • Yukon, OK 73099 • (202) 486-7211 • AJ@Feratepllc.com

July 13, 2012

Federal Election Commission
999 E Street
Washington DC, 20463

RE: It's Now or Never quarterly filing

FEC ID: C00519785

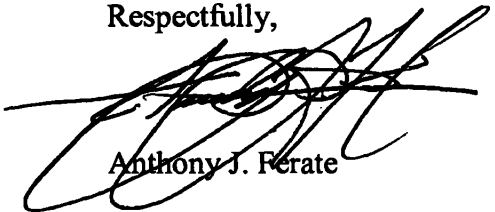
Dear Sir or Madam:

As It's Now or Never sought to comply with FEC filing requirements, the organization realized electronic password difficulties with the online filing system. In order to provide substantial compliance with the filing deadline, please accept this hard copy of our filing.

If the FEC requests that It's Now or Never do so, we will re-file the documents electronically once the password troubles have been corrected.

I welcome your calls if you have any questions.

Respectfully,



Anthony J. Ferate

RECEIVED
2012 JUL 16 AM 10:24
FEC MAIL CENTER

12030842709

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED 2012 JUL 16 AM 10:24 FEDERAL MAIL CENTER

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Its Now or Never Inc.

ADDRESS (number and street) 840 South Rancho Drive, Suite 4175 Las Vegas NV 89106

2. FEC IDENTIFICATION NUMBER C C00519785 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15 (X), October 15, January 31, July 31, 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, Convention, General, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 05 24 2012 through 06 30 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 Anthony J. Ferate

Signature of Treasurer [Handwritten Signature] Date 07 12 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 7 columns and 1 row. FEC FORM 3X Rev. 12/2004

12030842710

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Its Now or Never Inc.

Report Covering the Period: From: MM / DD / YYYY 05 / 24 / 2012 To: MM / DD / YYYY 06 / 30 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>YYYYYY</u> <u>2012</u>	0.00	0.00
(b) Cash on Hand at Beginning of Reporting Period:.....	3803.48	
(c) Total Receipts (from Line 19)	150900.00	171900.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	154703.48	171900.00
7. Total Disbursements (from Line 31).....	145326.05	162522.57
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	9377.43	9377.43
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	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

12030842711

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name
Its Now or Never Inc.

Report Covering the Period: From: **05 / 24 / 2012** To: **06 / 30 / 2012**

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	1000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	1000.00
(b) Political Party Committees	150900.00	160900.00
(c) Other Political Committees (such as PACs).....	0.00	1000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	150900.00	171900.00
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)).....▶	150900.00	171900.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	150900.00	171900.00

12030842712

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B 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	3319.25	5819.25
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	3319.25	5819.25
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)	2006.80	16703.32
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	14000.00	14000.00
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)) ..	145326.05	162522.57
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	145326.05	162522.57

12030842713

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	150900.00	171900.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	150900.00	171900.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	3319.25	5819.25
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3319.25	5819.25

I2030842714

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

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 11

(check only one)

<input type="checkbox"/> 11a 13	<input checked="" type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 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)
Its Now or Never Inc.

A. Its Now or Never 501c4

Full Name (Last, First, Middle Initial)
Mailing Address 840 South Rancho Drive, Suite 4175

City Las Vegas	State NV	Zip Code 89106
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
12000.00

Date of Receipt
05 / 29 / 2012

Transaction ID : 20712.C4

Amount of Each Receipt this Period
2000.00

Receipt

B. Its Now or Never 501c4

Full Name (Last, First, Middle Initial)
Mailing Address 840 South Rancho Drive, Suite 4175

City Las Vegas	State NV	Zip Code 89106
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
120000.00

Date of Receipt
06 / 12 / 2012

Transaction ID : 20712.C5

Amount of Each Receipt this Period
108000.00

Receipt

C. Its Now or Never 501c4

Full Name (Last, First, Middle Initial)
Mailing Address 840 South Rancho Drive, Suite 4175

City Las Vegas	State NV	Zip Code 89106
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
151000.00

Date of Receipt
06 / 13 / 2012

Transaction ID : 20712.C6

Amount of Each Receipt this Period
31000.00

Receipt

SUBTOTAL of Receipts This Page (optional).....▶

141000.00

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

12030842715

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 7 OF 11	
(check only one)			
<input type="checkbox"/> 11a	<input checked="" 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	

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NAME OF COMMITTEE (In Full)
Its Now or Never Inc.

Full Name (Last, First, Middle Initial)
A. Its Now or Never 501c4

Mailing Address **840 South Rancho Drive, Suite 4175**

City Las Vegas	State NV	Zip Code 89106
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
152000.00

Date of Receipt
 M M / D D / Y Y Y Y
06 13 2012

Transaction ID : **20712.C7**

Amount of Each Receipt this Period
1000.00

Receipt

Full Name (Last, First, Middle Initial)
B. Its Now or Never 501c4

Mailing Address **840 South Rancho Drive, Suite 4175**

City Las Vegas	State NV	Zip Code 89106
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
160900.00

Date of Receipt
 M M / D D / Y Y Y Y
06 18 2012

Transaction ID : **20712.C8**

Amount of Each Receipt this Period
8900.00

Receipt

Full Name (Last, First, Middle Initial)
C.

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	9900.00
TOTAL This Period (last page this line number only).....▶	150900.00

12030842716

**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)

PAGE 8 OF 11

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 20	<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

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)
Its Now or Never Inc.

Full Name (Last, First, Middle Initial)

A. Morning In America

Date of Disbursement

Mailing Address 2710 Thomes Ave.

M M / D D / Y Y Y Y Y Y
05 / 25 / 2012

City State Zip Code
Cheyenne OK 82001-

Transaction ID : 20712.E7

Purpose of Disbursement
Reimbursement for travel

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

649.37

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

REIMBURSEMENT FOR TRAVEL

Full Name (Last, First, Middle Initial)

B. Morning In America

Date of Disbursement

Mailing Address 2710 Thomes Ave.

M M / D D / Y Y Y Y Y Y
06 / 12 / 2012

City State Zip Code
Cheyenne OK 82001-

Transaction ID : 20712.E12

Purpose of Disbursement
Reimbursement for travel

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

760.93

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

REIMBURSEMENT FOR TRAVEL

Full Name (Last, First, Middle Initial)

C. Smith Capitol Strategies

Date of Disbursement

Mailing Address 3224 Timmons Lane #142

M M / D D / Y Y Y Y Y Y
06 / 19 / 2012

City State Zip Code
Houston TX 77027-

Transaction ID : 20712.E18

Purpose of Disbursement
Reimbursement for travel

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

766.60

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

REIMBURSEMENT FOR TRAVEL

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

2176.90

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

12030842717

**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)

PAGE 9 OF 11

<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

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)
Its Now or Never Inc.

Full Name (Last, First, Middle Initial)

A. Smith Capitol Strategies

Date of Disbursement

MM / DD / YYYY
06 / 19 / 2012

Mailing Address 3224 Timmons Lane #142

City State Zip Code
Houston TX 77027-

Transaction ID : 20712.E17

Purpose of Disbursement
Consulting services

Amount of Each Disbursement this Period

1000.00

Candidate Name

Category/
Type

CONSULTING SERVICES

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

MM / DD / YYYY

Mailing Address

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

MM / DD / YYYY

Mailing Address

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

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

1000.00

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

3176.90

12030842718

**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)						PAGE 10 OF 11	
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input checked="" type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

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)
Its Now or Never Inc.

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. Crossroads Media		MM / DD / YYYY 06 / 14 / 2012	
Mailing Address 66 Canal Center Plaza, Suite 555		Transaction ID : 20712.E15	
City Alexandria	State VA	Zip Code 22314-	Amount of Each Disbursement this Period 140000.00
Purpose of Disbursement MEDIA OPPOSING SEAN REYESUT AG RACE		Category/ Type	
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B.		MM / DD / YYYY	
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:	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C.		MM / DD / YYYY	
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:	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional).....▶	140000.00
TOTAL This Period (last page this line number only).....▶	140000.00

12030842719

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Its Now or Never Inc.	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00519785 </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 Republic Strategies		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM 05</div> <div style="border: 1px solid black; padding: 2px;">DD 25</div> <div style="border: 1px solid black; padding: 2px;">YYYY 2012</div> </div>
Mailing Address 111 E Dunlap 1-449		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">506.80</div>
City Phoenix State AZ Zip Code 85020-	Transaction ID : 20712.E9	
Purpose of Expenditure Voter contact	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARBARA CEGAVSKE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">8703.32</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Republic Strategies		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM 06</div> <div style="border: 1px solid black; padding: 2px;">DD 12</div> <div style="border: 1px solid black; padding: 2px;">YYYY 2012</div> </div>
Mailing Address 111 E Dunlap 1-449		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1500.00</div>
City Phoenix State AZ Zip Code 85020-		Transaction ID : 20712.E13
Purpose of Expenditure Voter contact	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARBARA CEGAVSKE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">8703.32</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;">2006.80</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;">2006.80</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.

Signature Anthony J. Ferraro

Date

MM
07

DD
12

YYYY
2012

12030842720

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.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *fedexp* Shipping Date
7/13/12
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

[Signature] *7/16/12*
PREPARER DATE PREPARED

1203082721