

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 SUSAN B ANTHONY LIST INC		3. FEC Identification Number C C90011313
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1707 L STREET NW STE 550		
(c) City, State and ZIP Code WASHINGTON DC 20036		
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

/ /
 THROUGH
 / /

6. TOTAL CONTRIBUTIONS

7. TOTAL 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 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
Frank Cannon	<i>Frank Cannon</i> <i>[Electronically Filed]</i>	08/21/2012

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 EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee AMERICAN AIRLINES		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address P.O. BOX 619612 MD 2400		Amount 110.90 Transaction ID : F57.5224
City DFW AIRPORT	State TX	
Purpose of Expenditure Flight	Category/ Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <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 130397.01		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Brand Imaging Group		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 5358 Mt View Rd,		Amount 4831.38 Transaction ID : F57.5228
City Antioch	State TN	
Purpose of Expenditure Bus wrap	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <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 136086.99		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Emily Buchanan		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 1707 L Street NW Ste 550		Amount 67.50 Transaction ID : F57.5213
City Washington	State DC	
Purpose of Expenditure Meals	Category/ Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <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 155002.69		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	5009.78
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee Austin Cline		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 1707 L Street Ste 550		Amount 70.00 Transaction ID : F57.5449
City Washington	State DC	
Zip Code 20036	Category/ Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Purpose of Expenditure Per Diem		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 156297.69		

Full Name (Last, First, Middle Initial) of Payee Billy Cody		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 1707 L Street NW Ste 550		Amount 192.50 Transaction ID : F57.5219
City Washington	State DC	
Zip Code 20036	Category/ Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Purpose of Expenditure Meals		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 156157.69		

Full Name (Last, First, Middle Initial) of Payee Design 4, Inc.		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 106 North Collins Street		Amount 1625.00 Transaction ID : F57.5425
City Plant City	State FL	
Zip Code 33563	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Purpose of Expenditure Bus wrap		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 178990.19		

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	1887.50
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	
(carry total from last page forward to Line 7)		

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee Carlyle Gregory		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 140 Little Falls Street Suite 104		Amount 105.00 Transaction ID : F57.5209
City Falls Church	State VA	
Purpose of Expenditure Meals	Category/ Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <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 154445.19		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Anne Gray Herring		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 140 Little Falls Street Suite 104		Amount 105.00 Transaction ID : F57.5210
City Falls Church	State VA	
Purpose of Expenditure Meals	Category/ Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <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 154550.19		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Holiday Inn Express and Suites		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 4723 Southern Hills Drive		Amount 65.52 Transaction ID : F57.5232
City Sioux City	State IA	
Purpose of Expenditure Hotel	Category/ Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <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 153476.51		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	275.52
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee Holiday Inn Express and Suites		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 4723 Southern Hills Drive		Amount 65.52 Transaction ID : F57.5233
City Sioux City	State IA	
Zip Code 51106	Category/Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Purpose of Expenditure Hotel		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 153542.03		

Full Name (Last, First, Middle Initial) of Payee Greg Letiecq		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 9702 Dublin Drive		Amount 192.50 Transaction ID : F57.5211
City Manassas	State VA	
Zip Code 20109	Category/Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Purpose of Expenditure Meals		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 154742.69		

Full Name (Last, First, Middle Initial) of Payee Kaile Mattice		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 15833 Cindy Court		Amount 210.00 Transaction ID : F57.5218
City Canyon Country	State CA	
Zip Code 91387	Category/Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Purpose of Expenditure Meals		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 155965.19		

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	468.02
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	▶	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee Marilyn Musgrave		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 1707 L Street NW Ste 550		Amount 192.50 Transaction ID : F57.5215
City Washington	State DC	
Purpose of Expenditure Meals	Category/ Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <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 155352.69		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Steven Musgrave		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 1707 L Street NW Ste 550		Amount 192.50 Transaction ID : F57.5216
City Washington	State DC	
Purpose of Expenditure Meals	Category/ Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <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 155545.19		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Nova Digital Films		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 9702 Dublin Drive		Amount 5737.50 Transaction ID : F57.5231
City Manassa	State VA	
Purpose of Expenditure Video Production	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <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 153410.99		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	6122.50
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	
(carry total from last page forward to Line 7)		

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee POUND, FEINSTEIN & ASSOCIATES		Date 08 / 20 / 2012
Mailing Address 5505 CONNECTICUT AVE STE 270		Amount 550.00 Transaction ID : F57.5446
City WASHINGTON	State DC	
Purpose of Expenditure Fans	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <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 181973.27		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Mallory Quigley		Date 08 / 20 / 2012
Mailing Address 1707 L Street NW Ste 550		Amount 157.50 Transaction ID : F57.5214
City Washington	State DC	
Purpose of Expenditure Meals	Category/ Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <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 155160.19		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Mark Roepke		Date 08 / 20 / 2012
Mailing Address 5550 Columbia Pike #742		Amount 210.00 Transaction ID : F57.5217
City Arlington	State VA	
Purpose of Expenditure Meals	Category/ Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <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 155755.19		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	917.50
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee Mark Roepke		Date 08 / 20 / 2012
Mailing Address 5550 Columbia Pike #742		Amount 9000.00 Transaction ID : F57.5229
City Arlington	State VA	
Purpose of Expenditure Bus Tour Management	Category/ Type 001	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <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 145086.99		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 Mark Roepke		Date 08 / 20 / 2012
Mailing Address 5550 Columbia Pike #742		Amount 2586.50 Transaction ID : F57.5230
City Arlington	State VA	
Purpose of Expenditure Travel Expenses	Category/ Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <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 147673.49		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 Mark Roepke		Date 08 / 20 / 2012
Mailing Address 5550 Columbia Pike #742		Amount 1000.00 Transaction ID : F57.5421
City Arlington	State VA	
Purpose of Expenditure Meals	Category/ Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <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 157490.19		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	12586.50
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	
(carry total from last page forward to Line 7)		

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee Mark Roepke		Date 08 / 20 / 2012
Mailing Address 5550 Columbia Pike #742		Amount 2000.00 Transaction ID : F57.5423
City Arlington	State VA	
Zip Code 22204	Category/Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Purpose of Expenditure Mileage		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 177365.19		

Full Name (Last, First, Middle Initial) of Payee Mark Roepke		Date 08 / 20 / 2012
Mailing Address 5550 Columbia Pike #742		Amount 500.00 Transaction ID : F57.5484
City Arlington	State VA	
Zip Code 22204	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Purpose of Expenditure Hotel & Meal		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 183173.76		

Full Name (Last, First, Middle Initial) of Payee Laura Schaefer		Date 08 / 20 / 2012
Mailing Address 1707 L Street NW Ste 550		Amount 192.50 Transaction ID : F57.5212
City Washington	State DC	
Zip Code 20036	Category/Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Purpose of Expenditure Meals		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 154935.19		

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	2692.50
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	
(carry total from last page forward to Line 7)		

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee Signs by Tomorrow		Date
Mailing Address 4717 Southern Hills Drive		MM / DD / YYYY 08 / 20 / 2012
City	State	Zip Code
Sioux City	IA	51106
Purpose of Expenditure Printing		Amount
Category/Type	004	31.03
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Transaction ID : F57.5456
Office Sought:		<input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Check One:		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For:
182673.76		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Jill Stanek		Date
Mailing Address 11664 Sundance Trail		MM / DD / YYYY 08 / 20 / 2012
City	State	Zip Code
Mokena	IL	60448
Purpose of Expenditure Meals		Amount
Category/Type	002	192.50
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Transaction ID : F57.5208
Office Sought:		<input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Check One:		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For:
156490.19		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee United Airlines		Date
Mailing Address 6000 N Terminal Pkwy		MM / DD / YYYY 08 / 20 / 2012
City	State	Zip Code
Atlanta	GA	30337
Purpose of Expenditure Flight		Amount
Category/Type	002	203.80
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Transaction ID : F57.5220
Office Sought:		<input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Check One:		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For:
129975.41		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	427.33
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	▶	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee US AIRWAYS		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 111 W RIO SALADO PKWY		Amount 115.40 Transaction ID : F57.5221
City TEMPE	State AZ	
Zip Code 85281		
Purpose of Expenditure Flight	Category/ Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <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 130090.81		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee US AIRWAYS		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 111 W RIO SALADO PKWY		Amount 115.40 Transaction ID : F57.5222
City TEMPE	State AZ	
Zip Code 85281		
Purpose of Expenditure Flight	Category/ Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <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 130206.21		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee US AIRWAYS		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 111 W RIO SALADO PKWY		Amount 79.90 Transaction ID : F57.5223
City TEMPE	State AZ	
Zip Code 85281		
Purpose of Expenditure Flight	Category/ Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <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 130286.11		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	310.70
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	
(carry total from last page forward to Line 7)		

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee US AIRWAYS		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 111 W RIO SALADO PKWY		Amount 286.20 Transaction ID : F57.5225
City TEMPE	State AZ	
Zip Code 85281		
Purpose of Expenditure Flight	Category/ Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <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 130683.21		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee US AIRWAYS		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 111 W RIO SALADO PKWY		Amount 286.20 Transaction ID : F57.5226
City TEMPE	State AZ	
Zip Code 85281		
Purpose of Expenditure Flight	Category/ Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <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 130969.41		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee US AIRWAYS		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 111 W RIO SALADO PKWY		Amount 286.20 Transaction ID : F57.5227
City TEMPE	State AZ	
Zip Code 85281		
Purpose of Expenditure Flight	Category/ Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <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 131255.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	858.60
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	
(carry total from last page forward to Line 7)		

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee Billy Valentine		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 1707 L Street NW Ste 550		Amount 70.00 Transaction ID : F57.5450
City Washington	State DC	
Zip Code 20036	Category/ Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Purpose of Expenditure Per Diem		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 156227.69		

Full Name (Last, First, Middle Initial) of Payee		Date MM / DD / YYYY
Mailing Address		Amount
City	State	
Zip Code	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Purpose of Expenditure		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought		

Full Name (Last, First, Middle Initial) of Payee		Date MM / DD / YYYY
Mailing Address		Amount
City	State	
Zip Code	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Purpose of Expenditure		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought		

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	70.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	31626.45
(carry total from last page forward to Line 7)		