

FAX

TO:	FEC	FROM:	Friends of Bartlett
FAX:	202-219-0174	FAX:	207-514-9266
PHONE:		PHONE:	
SUBJECT:	Pre-FEC Committee ID	DATE:	November 2, 2012
COMMENTS:			

Friends of Bartlett has mailed its FEC 1 form with letter to become a Super PAC. We do not have an FEC Committee ID so are submitting here instead of filing electronically. This is fax 1 of 2 for today. Due to Hurricane Sandy, Friends of Bartlett is amending its 10/30/2012 filing.

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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

1. (a) Name of Individual, Organization or Corporation Friends of Bartlett		3. FEC Identification Number C
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 701 B St, STE 1160		
(c) City, State and ZIP Code San Diego, CA 92101		
2. Corporate filers only Is this filer a qualified nonprofit corporation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Individual filers only Name of Employer Occupation		

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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 10 30 2012 THROUGH 10 30 2012

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
Michael Clerkin		11-2-12

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, 959 E Street, N.W., Washington, D.C. 20543. Toll Free 800-424-9530. Local 202-694-1100

FEC Schedule 5 (REV. 10/2005)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 1 OF 1
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full) Friends of Bartlett				
Full Name (Last, First, Middle Initial) of Payee Hubbard Radio Washington DC, LLC D/B/A WTOP-FM/WFED-AM			Date 10 30 2012	
Mailing Address 3400 Idaho Avenue NW			Amount 0	
City State Zip Code Washington, DC 20016				
Purpose of Expenditure radio ad	Category Type 004	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MD	District: 6
Name of Federal Candidate Supported or Opposed by Expenditure: Roscoe Bartlett			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 8,000			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	
Mailing Address			Amount	
City State Zip Code				
Purpose of Expenditure	Category Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State:	District:
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	
Mailing Address			Amount	
City State Zip Code				
Purpose of Expenditure	Category Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State:	District:
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.....				
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)				

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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.

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<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked Delivery Confirmation™ Label <input type="checkbox"/>
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input checked="" type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

The document preceding this page was received by FAX at the FEC. The receiving FAX machine has printed at the bottom of each page the date and time of receipt, the phone number of the transmitting machine and the sequential page numbers.

N/A
 PREPARER

N/A
 DATE PREPARED