

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
America's President Committee

ADDRESS (number and street) P O Box 373  
 Check if different than previously reported. (ACC)  
Fairfax Station VA 22039

2. **FEC IDENTIFICATION NUMBER** C00492322  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 01 01 2011 through 03 31 2011

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 Ralph Benko

Signature of Treasurer Electronically Filed by Ralph Benko Date 04 11 2011

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							
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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
America's President Committee

Report Covering the Period: From: 

M M	D D	Y Y Y Y
0 1	0 1	2 0 1 1

 To: 

M M	D D	Y Y Y Y
0 3	3 1	2 0 1 1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date		
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y Y Y Y</td></tr><tr><td>2 0 1 1</td></tr></table>	Y Y Y Y	2 0 1 1		0.00
Y Y Y Y				
2 0 1 1				
(b) Cash on Hand at Beginning of Reporting Period .....	0.00			
(c) Total Receipts (from Line 19) .....	124343.10	124343.10		
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	124343.10	124343.10		
7. Total Disbursements (from Line 31) .....	107838.03	107838.03		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	16505.07	16505.07		
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00			
10. Debts and Obligations owed <b>BY</b> 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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
America's President Committee

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	1

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) .....	120000.00	120000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	120000.00	120000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	120000.00	120000.00
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) .....	4343.10	4343.10
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 Transfer (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)) .....	124343.10	124343.10
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	124343.10	124343.10

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	107838.03	107838.03
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	107838.03	107838.03
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 Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	107838.03	107838.03
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	107838.03	107838.03

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) .....	120000.00	120000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	120000.00	120000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	107838.03	107838.03
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	4343.10	4343.10
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	103494.93	103494.93

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 14  
(check only one)

<input checked="" type="checkbox"/> 11a	<input 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

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)  
America's President Committee

**A.**

Full Name (Last, First, Middle Initial) Jeremiah Milbank, III		Date of Receipt MM / DD / YYYY 01 / 19 / 2011
Mailing Address 654 Madison Avenue Suite 1550, 15th Floor		<b>Transaction ID:</b> 1001
City New York	State NY	Zip Code 10065
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20000.00
Name of Employer Milbank Winthrop & Co.	Occupation Investments	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20000.00	

**B.**

Full Name (Last, First, Middle Initial) Jeremiah Milbank, III		Date of Receipt MM / DD / YYYY 01 / 19 / 2011
Mailing Address 654 Madison Avenue Suite 1550, 15th Floor		<b>Transaction ID:</b> 1002
City New York	State NY	Zip Code 10065
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 15000.00
Name of Employer Milbank Winthrop & Co.	Occupation Investments	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 35000.00	

**C.**

Full Name (Last, First, Middle Initial) Jeremiah Milbank, III		Date of Receipt MM / DD / YYYY 02 / 08 / 2011
Mailing Address 654 Madison Avenue Suite 1550, 15th Floor		<b>Transaction ID:</b> 1004
City New York	State NY	Zip Code 10065
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25000.00
Name of Employer Milbank Winthrop & Co.	Occupation Investments	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 60000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>60000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 7 / 14  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
America's President Committee

**A.** Full Name (Last, First, Middle Initial)  
Peter Morse Morse

Mailing Address 100 Front Street  
Suite 900

City Conshohocken State PA Zip Code 19428

FEC ID number of contributing federal political committee. C

Name of Employer Morse Partners Occupation Investor

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
35000.00

Date of Receipt  
01 / 21 / 2011

**Transaction ID:** 1003

Amount of Each Receipt this Period  
35000.00

**B.** Full Name (Last, First, Middle Initial)  
Peter Morse Morse

Mailing Address 100 Front Street  
Suite 900

City Conshohocken State PA Zip Code 19428

FEC ID number of contributing federal political committee. C

Name of Employer Morse Partners Occupation Investor

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
60000.00

Date of Receipt  
02 / 10 / 2011

**Transaction ID:** 1005

Amount of Each Receipt this Period  
25000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">60000.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;">120000.00</span>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 8 / 14	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
America's President Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Smart Media Group LLC		Date of Receipt
	Mailing Address 814 King Street Suite 400		<input type="text" value="02"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
	City Alexandria	State VA	Zip Code 22314
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID:</b> 1006
	Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="4343.10"/>  Refund - media	
Aggregate Year-to-Date ▼		<input type="text" value="4343.10"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="4343.10"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="4343.10"/>



# 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)

<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

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NAME OF COMMITTEE (In Full)  
America's President Committee

A.

Full Name (Last, First, Middle Initial)  
American Majority Action

Transaction ID: 1014  
Date of Disbursement

Mailing Address P O Box 309

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	5		2	0	1	1

City Purcellville State VA Zip Code 20134

Amount of Each Disbursement this Period

3000.00
---------

Purpose of Disbursement  
Consultant: Social Media

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Knox Bronson

Transaction ID: 1009  
Date of Disbursement

Mailing Address 6389 Dana Street #6

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	8		2	0	1	1

City Oakland State CA Zip Code 94609

Amount of Each Disbursement this Period

2500.00
---------

Purpose of Disbursement  
Website

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Knox Bronson

Transaction ID: 1008  
Date of Disbursement

Mailing Address 6389 Dana Street #6

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	0		2	0	1	1

City Oakland State CA Zip Code 94609

Amount of Each Disbursement this Period

1800.00
---------

Purpose of Disbursement  
Website

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

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

7300.00
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TOTAL This Period (last page this line number only) .....

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**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 / 14

<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

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NAME OF COMMITTEE (In Full)  
America's President Committee

A.	Full Name (Last, First, Middle Initial) Knox Bronson	Transaction ID: 1010 Date of Disbursement 01 / 20 / 2011
	Mailing Address 6389 Dana Street #6	Amount of Each Disbursement this Period 1700.00
	City Oakland State CA Zip Code 94609	
	Purpose of Disbursement Website Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Capitol City Partners LLC	Transaction ID: 1027 Date of Disbursement 02 / 03 / 2011
	Mailing Address 1100 H Street NW Suite 700	Amount of Each Disbursement this Period 20000.00
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Website Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Thomas Cheplick	Transaction ID: 1017 Date of Disbursement 02 / 04 / 2011
	Mailing Address 3030 Polk Street Apt #12	Amount of Each Disbursement this Period 3000.00
	City San Francisco State CA Zip Code 94109	
	Purpose of Disbursement Research Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	24700.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# 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)

<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

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NAME OF COMMITTEE (In Full)  
America's President Committee

A.	Full Name (Last, First, Middle Initial) Creative Response Concepts	Transaction ID: 1011 Date of Disbursement
	Mailing Address 2760 Eisenhower Avenue 4th Floor	<input type="text" value="01"/> / <input type="text" value="21"/> / <input type="text" value="2011"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement Consultant: Public Relations	<input type="text" value="10000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Gammon & Grange PC	Transaction ID: 1015 Date of Disbursement
	Mailing Address 8280 Greensboro Drive 7th Floor	<input type="text" value="02"/> / <input type="text" value="10"/> / <input type="text" value="2011"/>
	City Mc Lean State VA Zip Code 22102	Amount of Each Disbursement this Period
	Purpose of Disbursement Legal	<input type="text" value="1467.06"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Gammon & Grange PC	Transaction ID: 1024 Date of Disbursement
	Mailing Address 8280 Greensboro Drive 7th Floor	<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2011"/>
	City Mc Lean State VA Zip Code 22102	Amount of Each Disbursement this Period
	Purpose of Disbursement Legal	<input type="text" value="89.10"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="11556.16"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# 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)

<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

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NAME OF COMMITTEE (In Full)  
America's President Committee

A.	Full Name (Last, First, Middle Initial) Kross Publishing	Transaction ID: 1012 Date of Disbursement 01 / 24 / 2011
	Mailing Address P O Box 464 717 Lambs Creek Road	Amount of Each Disbursement this Period 2000.00
	City Mansfield State PA Zip Code 16933	
	Purpose of Disbursement Web marketing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) David Nammo	Transaction ID: 1016 Date of Disbursement 01 / 26 / 2011
	Mailing Address 5011 N 27th Street	Amount of Each Disbursement this Period 30661.20
	City Arlington State VA Zip Code 22207	
	Purpose of Disbursement Political consultant; list purchasing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) David Nammo	Transaction ID: 1020 Date of Disbursement 02 / 04 / 2011
	Mailing Address 5011 N 27th Street	Amount of Each Disbursement this Period 352.44
	City Arlington State VA Zip Code 22207	
	Purpose of Disbursement Meeting expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	33013.64
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# 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)

<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

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NAME OF COMMITTEE (In Full)  
America's President Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) David Nammo</p> <p>Mailing Address 5011 N 27th Street</p> <p>City Arlington State VA Zip Code 22207</p> <p>Purpose of Disbursement Political consultant; meeting expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 1025 <b>Date of Disbursement</b> 02 / 12 / 2011</p> <p>Amount of Each Disbursement this Period 562.50</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Political Compliance Services</p> <p>Mailing Address P O Box 373</p> <p>City Fairfax Station State VA Zip Code 22039</p> <p>Purpose of Disbursement Consultant: Compliance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 1018 <b>Date of Disbursement</b> 02 / 08 / 2011</p> <p>Amount of Each Disbursement this Period 1437.50</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Political Compliance Services</p> <p>Mailing Address P O Box 373</p> <p>City Fairfax Station State VA Zip Code 22039</p> <p>Purpose of Disbursement Federal Express reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 1022 <b>Date of Disbursement</b> 03 / 01 / 2011</p> <p>Amount of Each Disbursement this Period 83.59</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ► 2083.59

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

**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 14 / 14

<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

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NAME OF COMMITTEE (In Full)  
America's President Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Smart Media Group LLC <hr/> Mailing Address 814 King Street Suite 400 <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Media Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1007 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 1 / 2 0 1 1
	Amount of Each Disbursement this Period 16999.71
<b>B.</b> Full Name (Last, First, Middle Initial) Sullivan & Associates PLLC <hr/> Mailing Address 601 Pennsylvania Avenue NW Suite 900 <hr/> City Washington State DC Zip Code 20004 <hr/> Purpose of Disbursement Legal Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1021 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 1 1
	Amount of Each Disbursement this Period 11620.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

28619.71

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

107273.10