

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 Common Sense Issues Inc		3. FEC Identification Number C C90009739
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 8190-A Beechmont Avenue - 103		
(c) City, State and ZIP Code Cincinnati OH 45255		
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 24-Hour Notice 48-Hour Notice
- July 15 Quarterly Report
- October Quarterly Report
- January 31 Year-End Report

(b) Is this Report an amendment? Yes No

5. COVERING PERIOD: FROM

M	M
1	1

 /

D	D
3	0

 /

Y	Y	Y	Y
2	0	0	7

THROUGH

M	M
1	2

 /

D	D
2	9

 /

Y	Y	Y	Y
2	0	0	7

6. TOTAL CONTRIBUTIONS	30000.00
7. TOTAL INDEPENDENT EXPENDITURES.....	28521.00

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in constitution with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee or a 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
Patrick Davis		12/28/2007

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**

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)
Common Sense Issues Inc

A. Full Name (Last, First, Middle Initial) <u>Arch Bonnema</u>			Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 9 / 2 0 0 7	
Mailing Address 604 Kings Lake Drive			Transaction ID: F56.4101	
City	State	Zip Code		
McKinney	TX	75070		
Amount of Each Receipt this Period _____ 2500.00				
FEC ID number of contributing federal political committee. C _____				
Name of Employer		Occupation		
Self-Employed		Financial Services		

B. Full Name (Last, First, Middle Initial) <u>Sherry Bonnema</u>			Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 9 / 2 0 0 7	
Mailing Address 604 Kings Lake Drive			Transaction ID: F56.4103	
City	State	Zip Code		
McKinney	TX	75070		
Amount of Each Receipt this Period _____ 2500.00				
FEC ID number of contributing federal political committee. C _____				
Name of Employer		Occupation		
Self-Employed		Homemaker		

C. Full Name (Last, First, Middle Initial) <u>Joe C. Thompson, Jr.</u>			Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 9 / 2 0 0 7	
Mailing Address 3322 Shorecrest Drive Suite 235			Transaction ID: F56.4099	
City	State	Zip Code		
Dallas	TX	75235		
Amount of Each Receipt this Period _____ 25000.00				
FEC ID number of contributing federal political committee. C _____				
Name of Employer		Occupation		
Self-Employed		Investor		

SUBTOTAL of Receipts This Page (optional)	30000.00
TOTAL This Period (last page carry total to Line 6)	30000.00

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)

Common Sense Issues Inc

Full Name (Last, First, Middle Initial) of Payee
CC Advertising

Date

M M / D D / Y Y Y Y
1 2 / 0 7 / 2 0 0 7

Mailing Address
13800 Coppermine Road

Amount

486.00

City State Zip Code
Herndon VA 20171

Purpose of Expenditure
GOTV

Category/
Type

Office Sought: House State: _____
 Senate District: _____
 Presidential

Name of Federal Candidate Supported or Opposed by Expenditure:
Mike Huckabee

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought 486.00

Disbursement For: Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
CC Advertising

Date

M M / D D / Y Y Y Y
1 2 / 1 2 / 2 0 0 7

Mailing Address
13800 Coppermine Road

Amount

982.00

City State Zip Code
Herndon VA 20171

Purpose of Expenditure
GOTV

Category/
Type

Office Sought: House State: _____
 Senate District: _____
 Presidential

Name of Federal Candidate Supported or Opposed by Expenditure:
Mike Huckabee

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought 1468.00

Disbursement For: Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Design 4 Marketing Communications

Date

M M / D D / Y Y Y Y
1 2 / 2 9 / 2 0 0 7

Mailing Address
2020 West Brandon Boulevard
Suite 202

Amount

500.00

City State Zip Code
Brandon FL 33511

Purpose of Expenditure
Media Production

Category/
Type

Office Sought: House State: _____
 Senate District: _____
 Presidential

Name of Federal Candidate Supported or Opposed by Expenditure:
Mike Huckabee

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought 500.00

Disbursement For: Primary General
 Other (specify) _____

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

1968.00

(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)

Common Sense Issues Inc

Full Name (Last, First, Middle Initial) of Payee
Design 4 Marketing Communications

Date

M M / D D / Y Y Y Y
1 2 / 2 9 / 2 0 0 7

Mailing Address
2020 West Brandon Boulevard
Suite 202

Amount

250.00

City State Zip Code
Brandon FL 33511

Purpose of Expenditure
Media Production

Category/
Type

Office Sought: House State: _____
 Senate
Presidential President District: _____

Check One: Support Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Mitt Romney

Calendar Year-To-Date Per Election
for Office Sought 750.00

Disbursement For: Primary General
2008
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Joseph David Advertising

Date

M M / D D / Y Y Y Y
1 2 / 2 9 / 2 0 0 7

Mailing Address
333 North Michigan Avenue

Amount

13335.34

City State Zip Code
Chicago IL 60601

Purpose of Expenditure
Advertising

Category/
Type

Office Sought: House State: _____
 Senate
Presidential President District: _____

Check One: Support Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Mike Huckabee

Calendar Year-To-Date Per Election
for Office Sought 13335.34

Disbursement For: Primary General
2008
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Joseph David Advertising

Date

M M / D D / Y Y Y Y
1 2 / 2 9 / 2 0 0 7

Mailing Address
333 North Michigan Avenue

Amount

6667.66

City State Zip Code
Chicago IL 60601

Purpose of Expenditure
Advertising

Category/
Type

Office Sought: House State: _____
 Senate
Presidential President District: _____

Check One: Support Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Mitt Romney

Calendar Year-To-Date Per Election
for Office Sought 20003.00

Disbursement For: Primary General
2008
 Other (specify) _____

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

20253.00

(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)

Common Sense Issues Inc

Full Name (Last, First, Middle Initial) of Payee
Kensinger and Associates

Date

M M / D D / Y Y Y Y
1 2 / 0 4 / 2 0 0 7

Mailing Address
PO Box 67146

Amount

6300.00

City State Zip Code
Topeka KS 66667

Purpose of Expenditure
GOTV

Category/
Type

Office Sought: House State: _____
Presidential Senate District: _____
 President

Name of Federal Candidate Supported or Opposed by Expenditure:
Mike Huckabee

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 6300.00

Disbursement For: Primary General
2008
 Other (specify) _____

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

6300.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

28521.00