

# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Concerned American Voters

ADDRESS (number and street)

3030 Clarendon Blvd Ste 204

☐ Check if different than previously reported. (ACC)

Arlington

VA

22201

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00525899

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 Year-End 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)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
07 01 2012

through

M M M / D D D / Y Y Y Y Y Y  
09 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 Edward King

Signature of Treasurer

Edward King

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
10 15 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

### FEC FORM 3X

Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Concerned American Voters

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
07 01 2012 To: M M / D D / Y Y Y Y Y Y  
09 30 2012

|                                                                                                                                                                               | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span><br><span style="border: 1px solid black; padding: 2px;">2012</span> |                         | 0.00                              |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....                                                                                                                     | 0.00                    |                                   |
| (c) Total Receipts (from Line 19) .....                                                                                                                                       | 53150.00                | 53150.00                          |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....                                                                           | 53150.00                | 53150.00                          |
| 7. Total Disbursements (from Line 31) .....                                                                                                                                   | 55587.26                | 55587.26                          |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....                                                                                     | -2437.26                | -2437.26                          |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....                                                               | 0.00                    |                                   |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Concerned American Voters

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y  
07 01 2012

To:

M M / D D / Y Y Y Y Y  
09 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).....

53000.00

53000.00

(ii) Unitemized .....

150.00

150.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

53150.00

53150.00

(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) ..... ▶

53150.00

53150.00

## 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))..... ▶

53150.00

53150.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

53150.00

53150.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements                                                                              | COLUMN A<br>Total This Period | COLUMN B<br>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 .....                                                 | 35478.86                      | 35478.86                          |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 35478.86                      | 35478.86                          |
| 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) .....                                            | 20108.40                      | 20108.40                          |
| 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 .....                                                                  | 0.00                          | 0.00                              |
| 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)) ..      | 55587.26                      | 55587.26                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 55587.26                      | 55587.26                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures                                          | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|----------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....          | 53150.00                      | 53150.00                          |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                              | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....      | 53150.00                      | 53150.00                          |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... ► | 35478.86                      | 35478.86                          |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                   | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) ..... ►              | 35478.86                      | 35478.86                          |

## FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: F3XN

Transaction ID :

All expenditures disclosed on Schedule B supporting Line 21b go toward operation of our PAC and are not direct or in-kind contributions to any federal candidate or campaign. Expenses of \$5,377.53 were paid by Edward King, CAV Treasurer, and have not yet been reimbursed.

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 44

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

**Concerned American Voters**

Full Name (Last, First, Middle Initial)

## **A. Young Americans for Liberty Inc**

Mailing Address PO Box 2751

City

Arlington

State

VA

Zip Code

22202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

43000.00

Date of Receipt

08 / 10 / 2012

Transaction ID : SA11AI.4270

Amount of Each Receipt this Period

43000.00

Contribution

Full Name (Last, First, Middle Initial)

## **B. Young Americans for Liberty Inc**

Mailing Address PO Box 2751

City

Arlington

State

VA

Zip Code

22202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

53000.00

Date of Receipt

09 / 12 / 2012

Transaction ID : SA11AI.4274

Amount of Each Receipt this Period

10000.00

Contribution

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  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

53000.00

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

53000.00



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 44

|                                         |                              |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)

Concerned American Voters

Full Name (Last, First, Middle Initial)

**A. ATM withdrawal 7-Eleven**

Mailing Address 3000 N Washington Blvd

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Arlington | VA    | 22201    |

Purpose of Disbursement  
Food/travel stipend for PAC employees/volunteers

Candidate Name

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

State: District:

|                                                                              |
|------------------------------------------------------------------------------|
| Disbursement For: 2012                                                       |
| <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼                                   |

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    |   | 05    |   | 2012        |

Transaction ID : SB21B.4144

Amount of Each Disbursement this Period

|        |
|--------|
| 400.00 |
|--------|

Full Name (Last, First, Middle Initial)

**B. ATM withdrawal 7-Eleven**

Mailing Address 3000 N Washington Blvd

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Arlington | VA    | 22201    |

Purpose of Disbursement  
Food/travel stipend for PAC employees/volunteers

Candidate Name

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

State: District:

|                                                                              |
|------------------------------------------------------------------------------|
| Disbursement For: 2012                                                       |
| <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼                                   |

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    |   | 21    |   | 2012        |

Transaction ID : SB21B.4218

Amount of Each Disbursement this Period

|        |
|--------|
| 400.00 |
|--------|

Full Name (Last, First, Middle Initial)

**C. ATM withdrawal 7-Eleven**

Mailing Address 3000 N Washington Blvd

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Arlington | VA    | 22201    |

Purpose of Disbursement  
Food/travel stipend for PAC employees/volunteers

Candidate Name

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

State: District:

|                                                                              |
|------------------------------------------------------------------------------|
| Disbursement For: 2012                                                       |
| <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼                                   |

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    |   | 21    |   | 2012        |

Transaction ID : SB21B.4219

Amount of Each Disbursement this Period

|        |
|--------|
| 400.00 |
|--------|

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

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

|         |
|---------|
| 1200.00 |
|---------|

|  |
|--|
|  |
|--|

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 44

|                                         |                              |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)

**Concerned American Voters**

Full Name (Last, First, Middle Initial)

**A. ATM withdrawal 7-Eleven**

Mailing Address 3000 N Washington Blvd

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Arlington | VA    | 22201    |

Purpose of Disbursement  
Food/travel stipend for PAC employees/volunteers

Candidate Name

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

State: District:

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    |   | 26    |   | 2012        |

**Transaction ID : SB21B.4238**

Amount of Each Disbursement this Period

|        |
|--------|
| 400.00 |
|--------|

Full Name (Last, First, Middle Initial)

**B. ATM withdrawal Wells Fargo**

Mailing Address 3140 N Washington Blvd

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Arlington | VA    | 22201    |

Purpose of Disbursement  
Food/travel stipend for PAC employees/volunteers

Candidate Name

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

State: District:

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    |   | 15    |   | 2012        |

**Transaction ID : SB21B.4201**

Amount of Each Disbursement this Period

|        |
|--------|
| 400.00 |
|--------|

Full Name (Last, First, Middle Initial)

**C. ATM withdrawal Wells Fargo**

Mailing Address 3140 N Washington Blvd

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Arlington | VA    | 22201    |

Purpose of Disbursement  
Food/travel stipend for PAC employees/volunteers

Candidate Name

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

State: District:

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    |   | 18    |   | 2012        |

**Transaction ID : SB21B.4208**

Amount of Each Disbursement this Period

|        |
|--------|
| 400.00 |
|--------|

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

|         |
|---------|
| 1200.00 |
|---------|

|  |
|--|
|  |
|--|

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 44

|                                         |                              |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)

**Concerned American Voters**

Full Name (Last, First, Middle Initial)

**A. ATM withdrawal Wells Fargo**

Mailing Address 3140 N Washington Blvd

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Arlington | VA    | 22201    |

Purpose of Disbursement  
Food/travel stipend for PAC employees/volunteers

Candidate Name

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    |   | 19    |   | 2012        |

**Transaction ID : SB21B.4212**

Amount of Each Disbursement this Period

|        |
|--------|
| 400.00 |
|--------|

Full Name (Last, First, Middle Initial)

**B. ATM withdrawal Wells Fargo**

Mailing Address 3140 N Washington Blvd

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Arlington | VA    | 22201    |

Purpose of Disbursement  
Food/travel stipend for PAC employees/volunteers

Candidate Name

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    |   | 21    |   | 2012        |

**Transaction ID : SB21B.4220**

Amount of Each Disbursement this Period

|        |
|--------|
| 500.00 |
|--------|

Full Name (Last, First, Middle Initial)

**C. ATM withdrawal Wells Fargo**

Mailing Address 3140 N Washington Blvd

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Arlington | VA    | 22201    |

Purpose of Disbursement  
Food/travel stipend for PAC employees/volunteers

Candidate Name

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    |   | 27    |   | 2012        |

**Transaction ID : SB21B.4239**

Amount of Each Disbursement this Period

|        |
|--------|
| 400.00 |
|--------|

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

|         |
|---------|
| 1300.00 |
|---------|

|  |
|--|
|  |
|--|

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 44

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 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)

**Concerned American Voters**

Full Name (Last, First, Middle Initial)

**A. Boston Market**

Mailing Address 2046 Wilson Blvd

City State Zip Code  
Arlington VA 22201Purpose of Disbursement  
Food for PAC employees/volunteers

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    |   | 10    |   | 2012        |

**Transaction ID : SB21B.4171**

Amount of Each Disbursement this Period

|        |
|--------|
| 222.52 |
|--------|

Full Name (Last, First, Middle Initial)

**B. Boston Market**

Mailing Address 2046 Wilson Blvd

City State Zip Code  
Arlington VA 22201Purpose of Disbursement  
Food for PAC employees/volunteers

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    |   | 12    |   | 2012        |

**Transaction ID : SB21B.4178**

Amount of Each Disbursement this Period

|        |
|--------|
| 222.52 |
|--------|

Full Name (Last, First, Middle Initial)

**C. Boston Market**

Mailing Address 2046 Wilson Blvd

City State Zip Code  
Arlington VA 22201Purpose of Disbursement  
Food for PAC employees/volunteers

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    |   | 21    |   | 2012        |

**Transaction ID : SB21B.4216**

Amount of Each Disbursement this Period

|        |
|--------|
| 222.52 |
|--------|

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

667.56





|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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 |

## Concerned American Voters

Category/  
Type

143.66

Category/  
TypeCategory/  
Type

169.08

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 44

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 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)

**Concerned American Voters**

Full Name (Last, First, Middle Initial)

**A. Greyhound**

Mailing Address 350 N Saint Paul St

City State Zip Code  
Dallas TX 75201
Purpose of Disbursement  
Travel for PAC employees/volunteers

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☒ Primary    ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 22 2012
**Transaction ID : SB21B.4221**

Amount of Each Disbursement this Period

84.50

Full Name (Last, First, Middle Initial)

**B. Greyhound**

Mailing Address 350 N Saint Paul St

City State Zip Code  
Dallas TX 75201
Purpose of Disbursement  
Travel for PAC employees/volunteers

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☒ Primary    ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 27 2012
**Transaction ID : SB21B.4241**

Amount of Each Disbursement this Period

84.50

Full Name (Last, First, Middle Initial)

**C. Greyhound**

Mailing Address 350 N Saint Paul St

City State Zip Code  
Dallas TX 75201
Purpose of Disbursement  
Travel for PAC employees/volunteers

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☒ Primary    ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 27 2012
**Transaction ID : SB21B.4242**

Amount of Each Disbursement this Period

103.20

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

272.20



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 44

|                                         |                              |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)

**Concerned American Voters**

Full Name (Last, First, Middle Initial)

**A. Hard Times**

Mailing Address 3028 Wilson Blvd

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Arlington | VA    | 22201    |

Purpose of Disbursement  
Food for PAC employees/volunteers

Candidate Name

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

State: District:

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    |   | 07    |   | 2012        |

**Transaction ID : SB21B.4159**

Amount of Each Disbursement this Period

|        |
|--------|
| 416.57 |
|--------|

Full Name (Last, First, Middle Initial)

**B. Jimmy John's**

Mailing Address 550 N Quincy St

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Arlington | VA    | 22203    |

Purpose of Disbursement  
Food for PAC employees/volunteers

Candidate Name

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

State: District:

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    |   | 13    |   | 2012        |

**Transaction ID : SB21B.4179**

Amount of Each Disbursement this Period

|        |
|--------|
| 139.52 |
|--------|

Full Name (Last, First, Middle Initial)

**C. Jimmy John's**

Mailing Address 550 N Quincy St

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Arlington | VA    | 22203    |

Purpose of Disbursement  
Food for PAC employees/volunteers

Candidate Name

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

State: District:

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    |   | 19    |   | 2012        |

**Transaction ID : SB21B.4211**

Amount of Each Disbursement this Period

|        |
|--------|
| 173.72 |
|--------|

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

|        |
|--------|
| 729.81 |
|--------|

|  |
|--|
|  |
|--|

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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 |

## Concerned American Voters

1466.66

Category/  
Type

State:  District:

08 / 16 / 2012

174.40

Category/  
Type

State:  District:

223.23

Category/  
Type

State:  District:

1864.29

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 44

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 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)

**Concerned American Voters**

Full Name (Last, First, Middle Initial)

**A. Motel 6**

Mailing Address 6868 Springfield Blvd

City Springfield      State VA      Zip Code 22150

Purpose of Disbursement  
Lodging for PAC employees/volunteers

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

Disbursement For: 2012

☒ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07      29      2012
**Transaction ID : SB21B.4102**

Amount of Each Disbursement this Period

6213.00

Full Name (Last, First, Middle Initial)

**B. Motel 6**

Mailing Address 6868 Springfield Blvd

City Springfield      State VA      Zip Code 22150

Purpose of Disbursement  
Lodging for PAC employees/volunteers

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

Disbursement For: 2012

☒ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08      08      2012
**Transaction ID : SB21B.4164**

Amount of Each Disbursement this Period

4349.10

Full Name (Last, First, Middle Initial)

**C. Motel 6**

Mailing Address 6868 Springfield Blvd

City Springfield      State VA      Zip Code 22150

Purpose of Disbursement  
Lodging for PAC employees/volunteers

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

Disbursement For: 2012

☒ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08      13      2012
**Transaction ID : SB21B.4185**

Amount of Each Disbursement this Period

62.13

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

10624.23

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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 |

## Concerned American Voters

### A. Motel 6

Category/  
Type

4411.23

State:  District:

Full Name (Last, First, Middle Initial)

### B. Motel 6

Date of Disbursement

Mailing Address 6868 Springfield Blvd

| City        | State | Zip Code |
|-------------|-------|----------|
| Springfield | VA    | 22150    |

|                         |                                      |
|-------------------------|--------------------------------------|
| Purpose of Disbursement | Lodging for PAC employees/volunteers |
|-------------------------|--------------------------------------|

Candidate Name

Category/  
Type

Transaction ID : SB21B.4224

Amount of Each Disbursement this Period

3479.28

|                |                          |           |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House     |
|                | <input type="checkbox"/> | Senate    |
|                | <input type="checkbox"/> | President |

Disbursement For: 2012

☒ Primary ☐ General

☐ Other (specify) ▼

State:  District:

Full Name (Last, First, Middle Initial)

### C. Motel 6

Date of Disbursement

M M / D D / Y Y Y Y  
08 22 2012

Mailing Address 6868 Springfield Blvd

| City        | State | Zip Code |
|-------------|-------|----------|
| Springfield | VA    | 22150    |

|                         |                                      |
|-------------------------|--------------------------------------|
| Purpose of Disbursement | Lodging for PAC employees/volunteers |
|-------------------------|--------------------------------------|

Candidate Name

Category/  
Type

Transaction ID : SB21B.4225

Amount of Each Disbursement this Period

434.91

|                |                          |           |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House     |
|                | <input type="checkbox"/> | Senate    |
|                | <input type="checkbox"/> | President |

Disbursement For: 2012

☒ Primary ☐ General

☐ Other (specify) ▼

State:  District:

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

8325.42

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

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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 |

## Concerned American Voters

### A. Motel 6

Mailing Address 6868 Springfield Blvd

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| Springfield | VA    | 22150    |

|                         |                                      |
|-------------------------|--------------------------------------|
| Purpose of Disbursement | Lodging for PAC employees/volunteers |
|-------------------------|--------------------------------------|

Candidate Name

|                |                          |           |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House     |
|                | <input type="checkbox"/> | Senate    |
|                | <input type="checkbox"/> | President |

Disbursement For: 2012

☒ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement



Transaction ID : SB21B.4245

Amount of Each Disbursement this Period

62.13

Full Name (Last, First, Middle Initial)

## B. NorthStar Campaign Systems

Mailing Address 11235 Davenport St Ste 110B

| City  | State | Zip Code |
|-------|-------|----------|
| Omaha | NE    | 68154    |

| Purpose of Disbursement |
|-------------------------|
| CRM monthly fee         |

Candidate Name

|                |                          |           |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House     |
|                | <input type="checkbox"/> | Senate    |
|                | <input type="checkbox"/> | President |

Disbursement For: 2012

☒ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.4452

Amount of Each Disbursement this Period

2250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

### C. Paisano's Pizza

Mailing Address 3650 S Glebe Rd Ste 185

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Arlington | VA    | 22202    |

|                         |                                   |
|-------------------------|-----------------------------------|
| Purpose of Disbursement | Food for PAC employees/volunteers |
|-------------------------|-----------------------------------|

Candidate Name

|                |                          |           |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House     |
|                | <input type="checkbox"/> | Senate    |
|                | <input type="checkbox"/> | President |

Disbursement For: 2012

☒ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.4152

Amount of Each Disbursement this Period

201.63

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

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

263.76

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 27 OF 44

|                                         |                              |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)

**Concerned American Voters**

Full Name (Last, First, Middle Initial)

**A. Paisano's Pizza**

Mailing Address 3650 S Glebe Rd Ste 185

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Arlington | VA    | 22202    |

Purpose of Disbursement  
Food for PAC employees/volunteers

Candidate Name

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

State: District:

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    | / | 15    | / | 2012        |

**Transaction ID : SB21B.4198**

Amount of Each Disbursement this Period

|        |
|--------|
| 196.15 |
|--------|

Full Name (Last, First, Middle Initial)

**B. Papa John's**

Mailing Address 2440 Wilson Blvd

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Arlington | VA    | 22201    |

Purpose of Disbursement  
Food for PAC employees/volunteers

Candidate Name

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

State: District:

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    | / | 10    | / | 2012        |

**Transaction ID : SB21B.4168**

Amount of Each Disbursement this Period

|        |
|--------|
| 135.00 |
|--------|

Full Name (Last, First, Middle Initial)

**C. Papa John's**

Mailing Address 2440 Wilson Blvd

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Arlington | VA    | 22201    |

Purpose of Disbursement  
Food for PAC employees/volunteers

Candidate Name

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

State: District:

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    | / | 28    | / | 2012        |

**Transaction ID : SB21B.4244**

Amount of Each Disbursement this Period

|        |
|--------|
| 132.78 |
|--------|

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

463.93







|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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 |

## Concerned American Voters

### A. Trader Joe's

Category/  
Type

62.90

State:  District:

### B. Trader Joe's

08 / 11 / 2012

Category/  
Type

65.62

State:  District:

### C. Trader Joe's

Category/  
Type

12.27

State:  District:

140.79









**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 36 OF 44

|                                         |                              |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)

**Concerned American Voters**

Full Name (Last, First, Middle Initial)

**A. Trader Joe's**

Mailing Address 1109 N Highland St

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Arlington | VA    | 22201    |

Purpose of Disbursement  
Food for PAC employees/volunteers

Candidate Name

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

State: District:

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    | / | 27    | / | 2012        |

**Transaction ID : SB21B.4240**

Amount of Each Disbursement this Period

|       |
|-------|
| 20.45 |
|-------|

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address 600 Jefferson St Ste 1900

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| Houston | TX    | 77002    |

Purpose of Disbursement  
Travel for PAC employees/volunteers

Candidate Name

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

State: District:

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    | / | 07    | / | 2012        |

**Transaction ID : SB21B.4161**

Amount of Each Disbursement this Period

|        |
|--------|
| 544.20 |
|--------|

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

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

Purpose of Disbursement

Candidate Name

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|-------|---|-------|---|-------------|

Amount of Each Disbursement this Period

|  |
|--|
|  |
|--|

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

564.65

33164.55

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 37 OF 44  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                         |                                                                                                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>Concerned American Voters</b>                                                                                                                                                                                         | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00525899         </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 <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> |                                                                                                                                                     |

|                                                                                                                                               |                                                                                                        |                                                                                                                                                       |                                                                                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) of Payee<br><b>CAV call agent salary</b>                                                              |                                                                                                        | Date<br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY </div>                                             |                                                                                        |
| Mailing Address 3030 Clarendon Blvd Ste 204                                                                                                   |                                                                                                        | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> 5990.00 </div>                                                  |                                                                                        |
| City<br>Arlington                                                                                                                             | State<br>VA                                                                                            | Zip Code<br>22201                                                                                                                                     | <b>Transaction ID : SE.4281</b>                                                        |
| Purpose of Expenditure<br>Salary                                                                                                              | Category/<br>Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div> | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: MI District: 11 | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose |
| Name of Federal Candidate Supported or Opposed by Expenditure:<br>Kerry Bentivolio                                                            |                                                                                                        | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2012 <input type="checkbox"/> Other (specify) ▶     |                                                                                        |
| Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">6738.40</div> |                                                                                                        |                                                                                                                                                       |                                                                                        |

|                                                                                                                                               |                                                                                                        |                                                                                                                                                       |                                                                                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) of Payee<br><b>CAV call agent salary</b>                                                              |                                                                                                        | Date<br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY </div>                                             |                                                                                        |
| Mailing Address 3030 Clarendon Blvd Ste 204                                                                                                   |                                                                                                        | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2000.00 </div>                                                  |                                                                                        |
| City<br>Arlington                                                                                                                             | State<br>VA                                                                                            | Zip Code<br>22201                                                                                                                                     | <b>Transaction ID : SE.4282</b>                                                        |
| Purpose of Expenditure<br>Salary                                                                                                              | Category/<br>Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div> | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: AZ District: 06 | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose |
| Name of Federal Candidate Supported or Opposed by Expenditure:<br>David Schweikert                                                            |                                                                                                        | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2012 <input type="checkbox"/> Other (specify) ▶     |                                                                                        |
| Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2000.00</div> |                                                                                                        |                                                                                                                                                       |                                                                                        |

|                                                                   |                                                                                          |
|-------------------------------------------------------------------|------------------------------------------------------------------------------------------|
| <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....▶    | <div style="border: 1px solid black; padding: 2px; display: inline-block;">7990.00</div> |
| <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>        |
| <b>(c) TOTAL</b> Independent Expenditures.....▶                   | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></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.

Edward King

Signature

[Electronically Filed]

Date

MM / DD / YYYY

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 38 OF 44  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |                                                   |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>Concerned American Voters</b>                                                                                                              |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00525899 |
| 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 |  | MM / DD / YYYY                                    |

|                                                                                   |                       |                                                                                                                                                       |
|-----------------------------------------------------------------------------------|-----------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) of Payee<br><b>CAV call agent salary</b>  |                       | Date<br>MM / DD / YYYY<br>08 / 08 / 2012                                                                                                              |
| Mailing Address 3030 Clarendon Blvd Ste 204                                       |                       | Amount<br>2000.00                                                                                                                                     |
| City<br>Arlington                                                                 | State<br>VA           |                                                                                                                                                       |
| Zip Code<br>22201                                                                 |                       | Transaction ID : SE.4283                                                                                                                              |
| Purpose of Expenditure<br>Salary                                                  | Category/<br>Type 001 | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: AZ District: 09 |
| Name of Federal Candidate Supported or Opposed by Expenditure:<br>Travis Grantham |                       | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose                                                                |
| Calendar Year-To-Date Per Election for Office Sought 2000.00                      |                       | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2012 <input type="checkbox"/> Other (specify) _____ |

|                                                                                    |                       |                                                                                                                                                       |
|------------------------------------------------------------------------------------|-----------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) of Payee<br><b>CAV call agent salary</b>   |                       | Date<br>MM / DD / YYYY<br>08 / 15 / 2012                                                                                                              |
| Mailing Address 3030 Clarendon Blvd Ste 204                                        |                       | Amount<br>2000.00                                                                                                                                     |
| City<br>Arlington                                                                  | State<br>VA           |                                                                                                                                                       |
| Zip Code<br>22201                                                                  |                       | Transaction ID : SE.4284                                                                                                                              |
| Purpose of Expenditure<br>Salary                                                   | Category/<br>Type 001 | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: AZ District: 06 |
| Name of Federal Candidate Supported or Opposed by Expenditure:<br>David Schweikert |                       | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose                                                                |
| Calendar Year-To-Date Per Election for Office Sought 4000.00                       |                       | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2012 <input type="checkbox"/> Other (specify) _____ |

|                                                           |         |
|-----------------------------------------------------------|---------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....    | 4000.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... |         |
| (c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Edward King

Signature

[Electronically Filed]

Date

MM / DD / YYYY  
10 / 15 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 39 OF 44  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                         |                                                                                                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>Concerned American Voters</b>                                                                                                                                                                                         | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00525899         </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 <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> |                                                                                                                                                     |

|                                                                                                                                               |                                                                                                        |                                                                                                                                                                     |                                 |
|-----------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|
| Full Name (Last, First, Middle Initial) of Payee<br><b>CAV call agent salary</b>                                                              |                                                                                                        | Date<br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY </div>                                                           |                                 |
| Mailing Address 3030 Clarendon Blvd Ste 204                                                                                                   |                                                                                                        | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2000.00 </div>                                                                |                                 |
| City<br>Arlington                                                                                                                             | State<br>VA                                                                                            | Zip Code<br>22201                                                                                                                                                   | <b>Transaction ID : SE.4285</b> |
| Purpose of Expenditure<br>Salary                                                                                                              | Category/<br>Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div> | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: <u>AZ</u> District: <u>09</u> |                                 |
| Name of Federal Candidate Supported or Opposed by Expenditure:<br>Travis Grantham                                                             |                                                                                                        | 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; display: inline-block;">4000.00</div> |                                                                                                        | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2012 <input type="checkbox"/> Other (specify) ▶                   |                                 |

|                                                                                                                                               |                                                                                                        |                                                                                                                                                                     |                                 |
|-----------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|
| Full Name (Last, First, Middle Initial) of Payee<br><b>CAV call agent salary</b>                                                              |                                                                                                        | Date<br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY </div>                                                           |                                 |
| Mailing Address 3030 Clarendon Blvd Ste 204                                                                                                   |                                                                                                        | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2685.00 </div>                                                                |                                 |
| City<br>Arlington                                                                                                                             | State<br>VA                                                                                            | Zip Code<br>22201                                                                                                                                                   | <b>Transaction ID : SE.4286</b> |
| Purpose of Expenditure<br>Salary                                                                                                              | Category/<br>Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div> | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: <u>AZ</u> District: <u>06</u> |                                 |
| Name of Federal Candidate Supported or Opposed by Expenditure:<br>David Schweikert                                                            |                                                                                                        | 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; display: inline-block;">6685.00</div> |                                                                                                        | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2012 <input type="checkbox"/> Other (specify) ▶                   |                                 |

|                                                                   |                                                                                          |
|-------------------------------------------------------------------|------------------------------------------------------------------------------------------|
| <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....▶    | <div style="border: 1px solid black; padding: 2px; display: inline-block;">4685.00</div> |
| <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>        |
| <b>(c) TOTAL</b> Independent Expenditures.....▶                   | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></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.

Edward King

[Electronically Filed]

Date

MM / DD / YYYY

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 40 OF 44  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                  |                                                                                                                                                     |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>Concerned American Voters</b>                                                                                                                                                                                                  | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00525899         </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 <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> |                                                                                                                                                     |

|                                                                                                                                                                                                                 |                                                                                     |                                                                                                                                                                                                                                                                                                              |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) of Payee<br><b>CAV call agent salary</b>                                                                                                                                |                                                                                     | Date<br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;">M M</span> / <span style="border: 1px solid black; padding: 0 5px;">D D</span> / <span style="border: 1px solid black; padding: 0 5px;">Y Y Y Y Y Y</span> </div> |
| Mailing Address 3030 Clarendon Blvd Ste 204                                                                                                                                                                     |                                                                                     | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;">2685.00</span> </div>                                                                                                                                           |
| City<br>Arlington                                                                                                                                                                                               | State<br>VA                                                                         |                                                                                                                                                                                                                                                                                                              |
| Purpose of Expenditure<br>Salary                                                                                                                                                                                | Category/<br>Type <span style="border: 1px solid black; padding: 0 5px;">001</span> | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: <u>AZ</u> District: <u>09</u>                                                                                                                                          |
| Name of Federal Candidate Supported or Opposed by Expenditure:<br>Travis Grantham                                                                                                                               |                                                                                     | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose                                                                                                                                                                                                                       |
| Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;">6685.00</span> </span> |                                                                                     | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2012 <input type="checkbox"/> Other (specify) ▶                                                                                                                                                            |

Transaction ID : SE.4287

|                                                                                                                                                                                                                |                                                                                     |                                                                                                                                                                                                                                                                                                              |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) of Payee<br><b>i360</b>                                                                                                                                                |                                                                                     | Date<br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;">M M</span> / <span style="border: 1px solid black; padding: 0 5px;">D D</span> / <span style="border: 1px solid black; padding: 0 5px;">Y Y Y Y Y Y</span> </div> |
| Mailing Address PO Box 37046                                                                                                                                                                                   |                                                                                     | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;">748.40</span> </div>                                                                                                                                            |
| City<br>Baltimore                                                                                                                                                                                              | State<br>MD                                                                         |                                                                                                                                                                                                                                                                                                              |
| Purpose of Expenditure<br>List purchase                                                                                                                                                                        | Category/<br>Type <span style="border: 1px solid black; padding: 0 5px;">001</span> | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: <u>MI</u> District: <u>11</u>                                                                                                                                          |
| Name of Federal Candidate Supported or Opposed by Expenditure:<br>Kerry Bentivolio                                                                                                                             |                                                                                     | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose                                                                                                                                                                                                                       |
| Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;">748.40</span> </span> |                                                                                     | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2012 <input type="checkbox"/> Other (specify) ▶                                                                                                                                                            |

Transaction ID : SE.4266

|                                                                    |                                                                                                                                                          |
|--------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;">3433.40</span> </div> |
| <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;"></span> </div>        |
| <b>(c) TOTAL</b> Independent Expenditures..... ▶                   | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;"></span> </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.

Edward King

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 41 OF 44  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                  |                                                                                                                              |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>Concerned American Voters</b>                                                                                                                                                                                                  | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00525899         </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 <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> |                                                                                                                              |

|                                                                                                                       |                                                                                   |                                                                                                                                                                                                                                                                                                                       |  |
|-----------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee<br><b>Edward King</b><br><b>[MEMO ITEM]</b>                          |                                                                                   | Date<br><div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span><br/>           07 / 31 / 2012         </div> |  |
| Mailing Address 3030 Clarendon Blvd Ste 204                                                                           |                                                                                   | Amount<br><div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">302.20</span> </div>                                                                                                                                                                              |  |
| City<br>Arlington                                                                                                     | State<br>VA                                                                       |                                                                                                                                                                                                                                                                                                                       |  |
| Purpose of Expenditure<br>CAV full-time salary                                                                        | Category/<br>Type <span style="border: 1px solid black; padding: 2px;">001</span> | Office Sought: <input type="checkbox"/> House State: TX<br><input checked="" type="checkbox"/> Senate District:<br><input type="checkbox"/> President                                                                                                                                                                 |  |
| Name of Federal Candidate Supported or Opposed by Expenditure:<br>Ted Cruz                                            |                                                                                   | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose                                                                                                                                                                                                                                |  |
| Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">0.00</span> |                                                                                   | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br>2012 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff                                                                                                                                                              |  |

Transaction ID : SE.4387

|                                                                                                                          |                                                                                   |                                                                                                                                                                                                                                                                                                                       |  |
|--------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee<br><b>Edward King</b><br><b>[MEMO ITEM]</b>                             |                                                                                   | Date<br><div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span><br/>           08 / 07 / 2012         </div> |  |
| Mailing Address 3030 Clarendon Blvd Ste 204                                                                              |                                                                                   | Amount<br><div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">1057.70</span> </div>                                                                                                                                                                             |  |
| City<br>Arlington                                                                                                        | State<br>VA                                                                       |                                                                                                                                                                                                                                                                                                                       |  |
| Purpose of Expenditure<br>CAV full-time salary                                                                           | Category/<br>Type <span style="border: 1px solid black; padding: 2px;">001</span> | Office Sought: <input checked="" type="checkbox"/> House State: MI<br><input type="checkbox"/> Senate District: 11<br><input type="checkbox"/> President                                                                                                                                                              |  |
| Name of Federal Candidate Supported or Opposed by Expenditure:<br>Kerry Bentivolio                                       |                                                                                   | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose                                                                                                                                                                                                                                |  |
| Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">6738.40</span> |                                                                                   | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2012 <input type="checkbox"/> Other (specify) ▶                                                                                                                                                                     |  |

Transaction ID : SE.4388

|                                                                    |                                                                                                                              |
|--------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">0.00</span> </div> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ | <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>     |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   | <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </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.

Edward King

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 42 OF 44  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                  |                                                                                                                                                   |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>Concerned American Voters</b>                                                                                                                                                                                                  | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00525899       </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 <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> |                                                                                                                                                   |

|                                                                                                                                                                      |                                                                                                           |                                                                                                                                                                     |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee<br><b>Edward King</b><br><b>[MEMO ITEM]</b>                                                                         |                                                                                                           | Date<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y<br/>           08 / 28 / 2012         </div>  |  |
| Mailing Address 3030 Clarendon Blvd Ste 204                                                                                                                          |                                                                                                           | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">           1586.55         </div>                                              |  |
| City<br>Arlington                                                                                                                                                    | State<br>VA                                                                                               |                                                                                                                                                                     |  |
| Purpose of Expenditure<br>CAV full-time salary                                                                                                                       | Category/<br>Type<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div> | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: <u>AZ</u> District: <u>06</u> |  |
| Name of Federal Candidate Supported or Opposed by Expenditure:<br>David Schweikert                                                                                   |                                                                                                           | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose                                                                              |  |
| Calendar Year-To-Date Per Election for Office Sought<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">           6685.00         </div> |                                                                                                           | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2012 <input type="checkbox"/> Other (specify) _____               |  |

|                                                                                                                                                                      |                                                                                                           |                                                                                                                                                                     |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee<br><b>Edward King</b><br><b>[MEMO ITEM]</b>                                                                         |                                                                                                           | Date<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y<br/>           08 / 28 / 2012         </div>  |  |
| Mailing Address 3030 Clarendon Blvd Ste 204                                                                                                                          |                                                                                                           | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">           1586.55         </div>                                              |  |
| City<br>Arlington                                                                                                                                                    | State<br>VA                                                                                               |                                                                                                                                                                     |  |
| Purpose of Expenditure<br>CAV full-time salary                                                                                                                       | Category/<br>Type<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div> | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: <u>AZ</u> District: <u>09</u> |  |
| Name of Federal Candidate Supported or Opposed by Expenditure:<br>Travis Grantham                                                                                    |                                                                                                           | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose                                                                              |  |
| Calendar Year-To-Date Per Election for Office Sought<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">           6685.00         </div> |                                                                                                           | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2012 <input type="checkbox"/> Other (specify) _____               |  |

|                                                                  |                                                                                       |
|------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....    | <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div> |
| <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>     |
| <b>(c) TOTAL</b> Independent Expenditures.....                   | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></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.

Edward King  
 Signature \_\_\_\_\_

**[Electronically Filed]**

Date 
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 43 OF 44  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                  |                                                                                                                              |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>Concerned American Voters</b>                                                                                                                                                                                                  | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00525899         </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 <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> |                                                                                                                              |

|                                                                                                                          |                                                                                   |                                                                                                                                                                                                                                                                                                                       |  |
|--------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee<br><b>NorthStar Campaign Systems</b><br><b>[MEMO ITEM]</b>              |                                                                                   | Date<br><div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span><br/>           07 / 31 / 2012         </div> |  |
| Mailing Address 11235 Davenport St Ste 110B                                                                              |                                                                                   | Amount<br><div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">505.52</span> </div>                                                                                                                                                                              |  |
| City<br>Omaha                                                                                                            | State<br>NE                                                                       |                                                                                                                                                                                                                                                                                                                       |  |
| Purpose of Expenditure<br>Phone minutes                                                                                  | Category/<br>Type <span style="border: 1px solid black; padding: 2px;">001</span> | Office Sought: <input type="checkbox"/> House State: TX<br><input checked="" type="checkbox"/> Senate District:<br><input type="checkbox"/> President                                                                                                                                                                 |  |
| Name of Federal Candidate Supported or Opposed by Expenditure:<br>Ted Cruz                                               |                                                                                   | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose                                                                                                                                                                                                                                |  |
| Calendar Year-To-Date Per Election<br>for Office Sought <span style="border: 1px solid black; padding: 2px;">0.00</span> |                                                                                   | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br>2012 <input checked="" type="checkbox"/> Other (specify) <span style="border: 1px solid black; padding: 2px;">Runoff</span>                                                                                                    |  |

|                                                                                                                             |                                                                                   |                                                                                                                                                                                                                                                                                                                       |  |
|-----------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee<br><b>NorthStar Campaign Systems</b><br><b>[MEMO ITEM]</b>                 |                                                                                   | Date<br><div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span><br/>           08 / 07 / 2012         </div> |  |
| Mailing Address 11235 Davenport St Ste 110B                                                                                 |                                                                                   | Amount<br><div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">1655.27</span> </div>                                                                                                                                                                             |  |
| City<br>Omaha                                                                                                               | State<br>NE                                                                       |                                                                                                                                                                                                                                                                                                                       |  |
| Purpose of Expenditure<br>Phone minutes                                                                                     | Category/<br>Type <span style="border: 1px solid black; padding: 2px;">001</span> | Office Sought: <input checked="" type="checkbox"/> House State: MI<br><input type="checkbox"/> Senate District: 11<br><input type="checkbox"/> President                                                                                                                                                              |  |
| Name of Federal Candidate Supported or Opposed by Expenditure:<br>Kerry Bentivolio                                          |                                                                                   | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose                                                                                                                                                                                                                                |  |
| Calendar Year-To-Date Per Election<br>for Office Sought <span style="border: 1px solid black; padding: 2px;">6738.40</span> |                                                                                   | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2012 <input type="checkbox"/> Other (specify) <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                          |  |

|                                                                  |                                                                                                                              |
|------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|
| <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....    | <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">0.00</span> </div> |
| <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... | <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>     |
| <b>(c) TOTAL</b> Independent Expenditures.....                   | <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </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.

Edward King

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 44 OF 44  
 FOR LINE 24 OF FORM 3X

|                                                                                          |  |                                                                                     |  |
|------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>Concerned American Voters</b>                          |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00525899                                   |  |
| 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<br><b>NorthStar Campaign Systems</b><br>[MEMO ITEM] |                                 | Date<br>MM / DD / YYYY<br><b>08 / 28 / 2012</b>                                                                                                       |                                         |
| Mailing Address 11235 Davenport St Ste 110B                                                          |                                 | Amount<br><b>2259.75</b>                                                                                                                              |                                         |
| City<br>Omaha                                                                                        | State<br>NE                     | Zip Code<br>68154                                                                                                                                     | Transaction ID : <b>SE.4401</b>         |
| Purpose of Expenditure<br>Phone minutes                                                              | Category/<br>Type<br><b>001</b> | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President                           | State: <b>AZ</b><br>District: <b>06</b> |
| Name of Federal Candidate Supported or Opposed by Expenditure:<br>David Schweikert                   |                                 | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose                                                                |                                         |
| Calendar Year-To-Date Per Election for Office Sought<br><b>6685.00</b>                               |                                 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2012 <input type="checkbox"/> Other (specify) _____ |                                         |

|                                                                                                      |                                 |                                                                                                                                                       |                                         |
|------------------------------------------------------------------------------------------------------|---------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|
| Full Name (Last, First, Middle Initial) of Payee<br><b>NorthStar Campaign Systems</b><br>[MEMO ITEM] |                                 | Date<br>MM / DD / YYYY<br><b>08 / 28 / 2012</b>                                                                                                       |                                         |
| Mailing Address 11235 Davenport St Ste 110B                                                          |                                 | Amount<br><b>2259.75</b>                                                                                                                              |                                         |
| City<br>Omaha                                                                                        | State<br>NE                     | Zip Code<br>68154                                                                                                                                     | Transaction ID : <b>SE.4402</b>         |
| Purpose of Expenditure<br>Phone minutes                                                              | Category/<br>Type<br><b>001</b> | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President                           | State: <b>AZ</b><br>District: <b>09</b> |
| Name of Federal Candidate Supported or Opposed by Expenditure:<br>Travis Grantham                    |                                 | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose                                                                |                                         |
| Calendar Year-To-Date Per Election for Office Sought<br><b>6685.00</b>                               |                                 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2012 <input type="checkbox"/> Other (specify) _____ |                                         |

|                                                           |                 |
|-----------------------------------------------------------|-----------------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....    | <b>0.00</b>     |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... |                 |
| (c) TOTAL Independent Expenditures.....                   | <b>20108.40</b> |

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.

Edward King

[Electronically Filed]

Date

MM / DD / YYYY  
**10 / 15 / 2012**

Signature