

# 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.

Character Counts Political Action Committee

ADDRESS (number and street)

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

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:
- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on  /  /  in the State of

- (d) 30-Day POST-Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

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 John Lemmon

Signature of Treasurer John Lemmon [Electronically Filed] Date  /  /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Character Counts Political Action Committee**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="84980.00"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="80000.00"/>	<input type="text" value="180000.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="164980.00"/>	<input type="text" value="180000.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="162492.74"/>	<input type="text" value="177512.74"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2487.26"/>	<input type="text" value="2487.26"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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)

Write or Type Committee Name

**Character Counts Political Action Committee**

Report Covering the Period: From:  /  /  To:  /  /

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).....	80000.00	180000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	80000.00	180000.00
(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) .....	80000.00	180000.00
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))..... ▶	80000.00	180000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	80000.00	180000.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B 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 .....	30602.56	45622.56
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	30602.56	45622.56
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) .....	131890.18	131890.18
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)) ..	162492.74	177512.74
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	162492.74	177512.74

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	80000.00	180000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	80000.00	180000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	30602.56	45622.56
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	30602.56	45622.56

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

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

FOR LINE NUMBER: PAGE 6 OF 11  
(check only one)  
 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)  
**Character Counts Political Action Committee**

**A. Richard L Chilton Jr**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9 Indian Spring Trail  
 City Darien State CT Zip Code 06820  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Chilton Investment Co Inc Occupation President & Ceo  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 25 / 2012  
**Transaction ID : 1014**  
 Amount of Each Receipt this Period  
 50000.00

**B. Alice B Haney**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 250 Jungle Road  
 City Palm Beach State FL Zip Code 33480  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HCR Inc Occupation VP Investments  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 26 / 2012  
**Transaction ID : 1025**  
 Amount of Each Receipt this Period  
 5000.00

**C. William Lee Hanley Jr**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 250 Jungle Road  
 City Palm Beach State FL Zip Code 33480  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Lex Management Occupation Investor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 25 / 2012  
**Transaction ID : 1013**  
 Amount of Each Receipt this Period  
 15000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 70000.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 7 OF 11  
(check only one)  
 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)  
**Character Counts Political Action Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Sarah J Humphrey**

Mailing Address Information Requested

City State Zip Code

Information Reques

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Information Requested

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 13 / 2012

**Transaction ID : 1023**

Amount of Each Receipt this Period  
 10000.00

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	80000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**Character Counts Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. New Strategies Group**

Mailing Address 3923 Byron Street

City Houston State TX Zip Code 77005

Purpose of Disbursement  
Consulting:Political Strategy Consulting

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 03 / 2012

**Transaction ID : 1016**

Amount of Each Disbursement this Period

10000.00

Category/Type

Full Name (Last, First, Middle Initial)

**B. New Strategies Group**

Mailing Address 3923 Byron Street

City Houston State TX Zip Code 77005

Purpose of Disbursement  
Consulting:Political Strategy Consulting

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 07 / 2012

**Transaction ID : 1017**

Amount of Each Disbursement this Period

10000.00

Category/Type

Full Name (Last, First, Middle Initial)

**C. Political Compliance Services Inc**

Mailing Address P O Box 373

City Fairfax Station State VA Zip Code 22039

Purpose of Disbursement  
Consultant:Compliance

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 05 / 2012

**Transaction ID : 1018**

Amount of Each Disbursement this Period

2500.00

Category/Type

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

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

22500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**Character Counts Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Venable LLP**

Mailing Address P O Box 62727

City Baltimore State MD Zip Code 21264

Purpose of Disbursement  
Legal

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 03 / 2012

**Transaction ID : 1019**

Amount of Each Disbursement this Period

6347.73

Full Name (Last, First, Middle Initial)

**B. Venable LLP**

Mailing Address P O Box 62727

City Baltimore State MD Zip Code 21264

Purpose of Disbursement  
Legal

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 26 / 2012

**Transaction ID : 1020**

Amount of Each Disbursement this Period

1552.50

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / 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)..... ▶

7900.23

30400.23

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

NAME OF COMMITTEE (In Full) <b>Character Counts Political Action Committee</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00521757
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="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Painter Communications</b>		Date <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>08 / 14 / 2012</b>
Mailing Address <b>75 Maple Street</b> <b>#203</b>		Amount <span style="margin-left: 20px;">11890.18</span>
City <b>Conshohocken</b>	State <b>PA</b>	Zip Code <b>19428</b>
Purpose of Expenditure <b>Phone Banks - FL 08-13-12</b>	Category/Type	<b>Transaction ID : 1011</b>
Name of Federal Candidate Supported or Opposed by Expenditure: <b>HENRY J RADEL III</b>		Office Sought: <input checked="" type="checkbox"/> House    State: <b>FL</b> <input type="checkbox"/> Senate    District: <b>19</b> <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">131890.18</span>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee <b>American Media &amp; Advocacy Group</b>		Date <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>07 / 27 / 2012</b>
Mailing Address <b>815 Slaters Lane</b>		Amount <span style="margin-left: 20px;">10000.00</span>
City <b>Alexandria</b>	State <b>VA</b>	Zip Code <b>22314</b>
Purpose of Expenditure <b>Media Buy - FL for 8/1/12 ad</b>	Category/Type	<b>Transaction ID : 1007</b>
Name of Federal Candidate Supported or Opposed by Expenditure: <b>HENRY J RADEL III</b>		Office Sought: <input checked="" type="checkbox"/> House    State: <b>FL</b> <input type="checkbox"/> Senate    District: <b>19</b> <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">131890.18</span>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="margin-left: 20px;">111890.18</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	
(c) <b>TOTAL</b> 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.

*John Lemmon*  
Signature [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**08 / 14 / 2012**

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

NAME OF COMMITTEE (In Full) <b>Character Counts Political Action Committee</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00521757
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 <b>JDA Frontline</b>		Date MM / DD / YYYY <b>07 / 31 / 2012</b>
Mailing Address <b>438 King Street</b> <b>Suite B</b>		Amount <b>20000.00</b>
City <b>Charleston</b>	State <b>SC</b> Zip Code <b>29403</b>	
Purpose of Expenditure <b>Media production - FL for 8/1/12 ad</b>	Category/Type	<b>Transaction ID : 1009</b>
Name of Federal Candidate Supported or Opposed by Expenditure: <b>HENRY J RADEL III</b>		Office Sought: <input checked="" type="checkbox"/> House    State: <b>FL</b> <input type="checkbox"/> Senate    District: <b>19</b> <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <b>131890.18</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

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

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>20000.00</b>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... ▶	
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<b>131890.18</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.

*John Lemmon*  
Signature

[Electronically Filed]    Date **08 / 01 / 2012**