

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

1. (a) Name of Individual, Organization or Corporation FIDELIS		3. FEC Identification Number C C90011800
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported P.O. BOX 2709		
(c) City, State and ZIP Code CHICAGO IL 60690		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Individual filers only	Name of Employer	Occupation

4. TYPE OF REPORT (check appropriate boxes):

(a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year-End Report

24-Hour Report
 48-Hour Report

b) Is this Report an amendment? Yes No

5. COVERING PERIOD: FROM

M M	/	D D	/	Y Y Y Y
02	/	18	/	2012

 THROUGH

M M	/	D D	/	Y Y Y Y
02	/	19	/	2012

6. TOTAL CONTRIBUTIONS00

7. TOTAL INDEPENDENT EXPENDITURES 4500.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent. In addition, (if the independent expenditures reported herein were made by a corporation) I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM	SIGNATURE	DATE
Joshua Ohmann Mercer	<i>Joshua Ohmann Mercer</i> [Electronically Filed]	02/19/2012

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

For further information, contact:
Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
FIDELIS

Full Name (Last, First, Middle Initial) of Payee
Ave Maria Radio
Mailing Address PO BOX 504
City Ann Arbor State MI Zip Code 48106

Date 02 / 19 / 2012
Amount 4500.00
Transaction ID : F57.000001

Purpose of Expenditure Rick Santorum for President
Category/Type 004
Name of Federal Candidate Supported or Opposed by Expenditure: Richard J Santorum

Office Sought: House State: MI
 Senate District: _____
 President
Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought .00

Disbursement For: Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Mailing Address
City State Zip Code

Date
Amount

Purpose of Expenditure
Category/Type
Name of Federal Candidate Supported or Opposed by Expenditure:

Office Sought: House State: _____
 Senate District: _____
 President
Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought

Disbursement For: Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Mailing Address
City State Zip Code

Date
Amount

Purpose of Expenditure
Category/Type
Name of Federal Candidate Supported or Opposed by Expenditure:

Office Sought: House State: _____
 Senate District: _____
 President
Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought

Disbursement For: Primary General
 Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	4500.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)	▶	4500.00