

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

Liberty for All Super PAC

ADDRESS (number and street) PO Box 25394

Check if different than previously reported. (ACC) Alexandria VA 22313

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

C C00514653

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

Election on [MM] / [DD] / [YYYY] in the State of []

- (d) 30-Day POST-Election Report for the:
- General (30G) Runoff (30R) Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [MM] / [DD] / [YYYY] 11 / 27 / 2012 through [MM] / [DD] / [YYYY] 12 / 31 / 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 Christopher M Marston

Signature of Treasurer Christopher M Marston [Electronically Filed] Date 01 / 31 / 2013

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

Liberty for All Super PAC

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="6912.66"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="242165.00"/>	<input type="text" value="3367853.03"/>
(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="249077.66"/>	<input type="text" value="3367853.03"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="105873.60"/>	<input type="text" value="3224648.97"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="143204.06"/>	<input type="text" value="143204.06"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY 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

Write or Type Committee Name

Liberty for All Super PAC

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).....	242000.00	3348287.36
(ii) Unitemized	165.00	4957.83
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	242165.00	3353245.19
(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)	242165.00	3353245.19
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	14607.84
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))..... ▶	242165.00	3367853.03
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	242165.00	3367853.03

DETAILED SUMMARY PAGE
of Disbursements

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	104649.80	1499063.82
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	104649.80	1499063.82
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)	1223.80	1725585.15
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)) ..	105873.60	3224648.97
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	105873.60	3224648.97

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)	242165.00	3353245.19
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	242165.00	3353245.19
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	104649.80	1499063.82
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	14607.84
38. Net Operating Expenditures (subtract Line 37 from Line 36)	104649.80	1484455.98

**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 34
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Liberty for All Super PAC

A. ROBERT GELFOND
Full Name (Last, First, Middle Initial)

Mailing Address 45 EAST 25TH STREET, 39B

City NEW YORK State NY Zip Code 10010-2944

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

Name of Employer MQS Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
12 / 19 / 2012
Transaction ID : SA11.199

Amount of Each Receipt this Period
10000.00

CONTRIBUTION

B. MR JOHN RAMSEY
Full Name (Last, First, Middle Initial)

Mailing Address 54 RAINEY ST #535

City AUSTIN State TX Zip Code 78701-4387

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

Name of Employer SELF-EMPLOYED Occupation STUDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3155487.36

Date of Receipt
11 / 29 / 2012
Transaction ID : SA11.198

Amount of Each Receipt this Period
30000.00

CONTRIBUTION

C. MR JOHN RAMSEY
Full Name (Last, First, Middle Initial)

Mailing Address 54 RAINEY ST #535

City AUSTIN State TX Zip Code 78701-4387

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

Name of Employer SELF-EMPLOYED Occupation STUDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3155487.36

Date of Receipt
12 / 18 / 2012
Transaction ID : SA11.200

Amount of Each Receipt this Period
25000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 65000.00

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 34
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Liberty for All Super PAC

Full Name (Last, First, Middle Initial)
A. MR JOHN RAMSEY

Mailing Address 54 RAINEY ST #535

City State Zip Code
AUSTIN TX 78701-4387

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

Name of Employer Occupation
SELF-EMPLOYED STUDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3155487.36

Date of Receipt
12 / 24 / 2012
Transaction ID : SA11.201

Amount of Each Receipt this Period
175000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. RENE RUIZ

Mailing Address 9 STONE BRIDGE LN

City State Zip Code
MILTON MA 02186-3645

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

Name of Employer Occupation
ENTREPRENEUR INVESTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
12 / 31 / 2012
Transaction ID : SA11.202

Amount of Each Receipt this Period
2000.00

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 General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	177000.00
TOTAL This Period (last page this line number only).....▶	242000.00

**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

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NAME OF COMMITTEE (In Full)
Liberty for All Super PAC

Full Name (Last, First, Middle Initial)

A. CAITLYN BATES

Mailing Address 1009 W 25TH ST APT B

City AUSTIN State TX Zip Code 78705

Purpose of Disbursement
REIMBURSEMENT (SEE BELOW)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2012

Transaction ID : SB.103

Amount of Each Disbursement this Period

18.95

Full Name (Last, First, Middle Initial)

B. US POSTAL SERVICE

Mailing Address 475 L'ENFANT PLZ

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2012

Transaction ID : SB.103A

Amount of Each Disbursement this Period

18.95

[MEMO ITEM]
BATES, 12/11

Full Name (Last, First, Middle Initial)

C. CAITLYN BATES

Mailing Address 1009 W 25TH ST APT B

City AUSTIN State TX Zip Code 78705

Purpose of Disbursement
ADMINISTRATIVE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 05 / 2012

Transaction ID : SB.129

Amount of Each Disbursement this Period

1500.00

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

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

1518.95

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Liberty for All Super PAC

Full Name (Last, First, Middle Initial)

A. CAITLYN BATES

Mailing Address 1009 W 25TH ST APT B

City AUSTIN State TX Zip Code 78705

Purpose of Disbursement
ADMINISTRATIVE CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 21 / 2012

Transaction ID : SB.155

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. PRESTON BATES

Mailing Address 54 RAINEY ST APT 802

City AUSTIN State TX Zip Code 78701

Purpose of Disbursement
MANAGEMENT CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 05 / 2012

Transaction ID : SB.130

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. PRESTON BATES

Mailing Address 54 RAINEY ST APT 802

City AUSTIN State TX Zip Code 78701

Purpose of Disbursement
MANAGEMENT CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 21 / 2012

Transaction ID : SB.156

Amount of Each Disbursement this Period

5000.00

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

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

11500.00

**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

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NAME OF COMMITTEE (In Full)
Liberty for All Super PAC

Full Name (Last, First, Middle Initial)

A. JORDAN BROWN

Mailing Address 22 BEECH ST APT E

City State Zip Code
WOODSVILLE NH 03785

Purpose of Disbursement
CAMPAIGN CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			05			2012			

Transaction ID : SB.131

Amount of Each Disbursement this Period

3	5	0	0	.	0	0
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Full Name (Last, First, Middle Initial)

B. JORDAN BROWN

Mailing Address 22 BEECH ST APT E

City State Zip Code
WOODSVILLE NH 03785

Purpose of Disbursement
CAMPAIGN CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			21			2012			

Transaction ID : SB.157

Amount of Each Disbursement this Period

3	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. JARED CHICOINE

Mailing Address 181 BENTON ROAD APT 18

City State Zip Code
NORTH HAVERHILL NH 03774

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			05			2012			

Transaction ID : SB.132

Amount of Each Disbursement this Period

3	5	0	0	.	0	0
---	---	---	---	---	---	---

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

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

1	0	5	0	0	.	0	0
---	---	---	---	---	---	---	---

3	5	0	0	.	0	0
---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Liberty for All Super PAC

Full Name (Last, First, Middle Initial)

A. JARED CHICOINE

Mailing Address 181 BENTON ROAD APT 18

City NORTH HAVERHILL State NH Zip Code 03774

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 21 / 2012

Transaction ID : **SB.158**

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

B. WILLIAM HENDERSON

Mailing Address 8415 AMBROSE LN APT 208

City LOUISVILLE State KY Zip Code 40299

Purpose of Disbursement
IT CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 05 / 2012

Transaction ID : **SB.133**

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

C. WILLIAM HENDERSON

Mailing Address 8415 AMBROSE LN APT 208

City LOUISVILLE State KY Zip Code 40299

Purpose of Disbursement
IT CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 21 / 2012

Transaction ID : **SB.159**

Amount of Each Disbursement this Period

4000.00

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

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

11500.00

**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

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NAME OF COMMITTEE (In Full)
Liberty for All Super PAC

Full Name (Last, First, Middle Initial)

A. CHRIS KUPER

Mailing Address 5806 COVE LANDING RD APT 101

City State Zip Code
BURKE VA 22015

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 05 / 2012

Transaction ID : **SB.134**

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

B. CHRIS KUPER

Mailing Address 5806 COVE LANDING RD APT 101

City State Zip Code
BURKE VA 22015

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 21 / 2012

Transaction ID : **SB.160**

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

C. DOUG LUSCO

Mailing Address 1507 SHELBUME CT APT 102

City State Zip Code
LOUISVILLE KY 40208

Purpose of Disbursement
GRASSROOTS CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 05 / 2012

Transaction ID : **SB.135**

Amount of Each Disbursement this Period

875.00

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

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

7875.00

**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

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NAME OF COMMITTEE (In Full)
Liberty for All Super PAC

Full Name (Last, First, Middle Initial)

A. DELBERT K. PERRY

Mailing Address 2 TIMBERLINE DR

City ALEXANDRIA State KY Zip Code 41001

Purpose of Disbursement
RENT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 27 / 2012

Transaction ID : SB.106

Amount of Each Disbursement this Period

2912.55

Full Name (Last, First, Middle Initial)

B. DELBERT K. PERRY

Mailing Address 2 TIMBERLINE DR

City ALEXANDRIA State KY Zip Code 41001

Purpose of Disbursement
RENT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 27 / 2012

Transaction ID : SB.107

Amount of Each Disbursement this Period

2912.55

Full Name (Last, First, Middle Initial)

C. JOHN RAMSEY

Mailing Address 54 RAINEY ST APT 802

City AUSTIN State TX Zip Code 78701

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 05 / 2012

Transaction ID : SB.137

Amount of Each Disbursement this Period

1500.00

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

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

7325.10

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Liberty for All Super PAC

Full Name (Last, First, Middle Initial)

A. EDWARD SCHACK

Mailing Address 221 E 9TH ST STE 202

City AUSTIN State TX Zip Code 78701

Purpose of Disbursement
LEGAL SERVICES

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	27	/	2012

Transaction ID : SB.108

Amount of Each Disbursement this Period

2690.00

B. KATE SCHACKAI

Full Name (Last, First, Middle Initial)

Mailing Address 810 MOUNT MOOSILAUKE HWY

City WENTWORTH State NH Zip Code 03282

Purpose of Disbursement
REIMBURSEMENT (SEE BELOW)

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	11	/	2012

Transaction ID : SB.101

Amount of Each Disbursement this Period

668.10

C. ANTHEM BLUE CROSS BLUE SHIELD

Full Name (Last, First, Middle Initial)

Mailing Address 120 MONUMENT CIR

City INDIANAPOLIS State IN Zip Code 46204

Purpose of Disbursement
EMPLOYEE HEALTH CARE

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	15	/	2012

Transaction ID : SB.101A

Amount of Each Disbursement this Period

668.10

[MEMO ITEM]
SCHACKAI, 12/11A

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

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

3358.10

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Liberty for All Super PAC

Full Name (Last, First, Middle Initial)

A. KATE SCHACKAI

Mailing Address 810 MOUNT MOOSILAUKE HWY

City WENTWORTH State NH Zip Code 03282

Purpose of Disbursement
REIMBURSEMENT

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
12 / 11 / 2012

Transaction ID : SB.102

Amount of Each Disbursement this Period

147.20

Full Name (Last, First, Middle Initial)

B. US POSTAL SERVICE

Mailing Address 475 L'ENFANT PLZ

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
POSTAGE

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
10 / 19 / 2012

Transaction ID : SB.102A

Amount of Each Disbursement this Period

133.90

[MEMO ITEM]
SCHACKAI, 12/11B

Full Name (Last, First, Middle Initial)

C. WAL-MART

Mailing Address 702 SW 8TH ST

City BENTONVILLE State AR Zip Code 72716

Purpose of Disbursement
OFFICE SUPPLIES

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
10 / 19 / 2012

Transaction ID : SB.102B

Amount of Each Disbursement this Period

13.32

[MEMO ITEM]
SCHACKAI, 12/11B

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

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

147.20

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Liberty for All Super PAC

Full Name (Last, First, Middle Initial)

A. KATE SCHACKAI

Mailing Address 810 MOUNT MOOSILAUKE HWY

City WENTWORTH State NH Zip Code 03282

Purpose of Disbursement
REIMBURSEMENT (SEE BELOW)

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
12			27			2012			

Transaction ID : SB.109

Amount of Each Disbursement this Period

7	2	4	5	6	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. SPEARE MEMORIAL HOSPITAL

Mailing Address 16 HOSPITAL RD

City PLYMOUTH State NH Zip Code 03264

Purpose of Disbursement
EMPLOYEE MEDICAL BILL

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
12			03			2012			

Transaction ID : SB.109A

Amount of Each Disbursement this Period

7	2	4	5	6	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

[MEMO ITEM]
SCHACKAI, 12/27a

Full Name (Last, First, Middle Initial)

C. KATE SCHACKAI

Mailing Address 810 MOUNT MOOSILAUKE HWY

City WENTWORTH State NH Zip Code 03282

Purpose of Disbursement
REIMBURSEMENT (SEE BELOW)

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
12			27			2012			

Transaction ID : SB.110

Amount of Each Disbursement this Period

6	6	8	1	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

7	9	1	3	7	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

7	9	1	3	7	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Liberty for All Super PAC

Full Name (Last, First, Middle Initial)

A. ANTHEM BLUE CROSS BLUE SHIELD

Mailing Address 120 MONUMENT CIR

City INDIANAPOLIS State IN Zip Code 46204

Purpose of Disbursement
EMPLOYEE HEALTH CARE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2012

Transaction ID : SB.110A

Amount of Each Disbursement this Period

668.10

[MEMO ITEM]
SCHACKAI, 12/27b

Full Name (Last, First, Middle Initial)

B. KATE SCHACKAI

Mailing Address 810 MOUNT MOOSILAUKE HWY

City WENTWORTH State NH Zip Code 03282

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 05 / 2012

Transaction ID : SB.138

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

C. KATE SCHACKAI

Mailing Address 810 MOUNT MOOSILAUKE HWY

City WENTWORTH State NH Zip Code 03282

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 21 / 2012

Transaction ID : SB.161

Amount of Each Disbursement this Period

3500.00

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

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

7000.00

**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

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NAME OF COMMITTEE (In Full)
Liberty for All Super PAC

Full Name (Last, First, Middle Initial)

A. NICK SELIGH

Mailing Address 300 WINDRIDGE LN APT 4

City FLORENCE State KY Zip Code 41042

Purpose of Disbursement
GRASSROOTS CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 05 / 2012

Transaction ID : SB.136

Amount of Each Disbursement this Period

1750.00

Full Name (Last, First, Middle Initial)

B. 37 SIGNALS

Mailing Address 30 N RACINE AVE #200

City CHICAGO State IL Zip Code 60607

Purpose of Disbursement
COMPUTER SERVICE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 24 / 2012

Transaction ID : SB.165

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BOULEVARD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL - AIRFARE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 03 / 2012

Transaction ID : SB.122

Amount of Each Disbursement this Period

166.80

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

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

1966.80

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Liberty for All Super PAC

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code
FORT WORTH TX 76155

Purpose of Disbursement
TRAVEL - AIRFARE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 03 / 2012

Transaction ID : SB.124

Amount of Each Disbursement this Period

166.80

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code
FORT WORTH TX 76155

Purpose of Disbursement
TRAVEL - AIRFARE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 07 / 2012

Transaction ID : SB.141

Amount of Each Disbursement this Period

60.00

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address 200 VESEY ST

City State Zip Code
MANHATTAN NY 10080

Purpose of Disbursement
CC PROCESSING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 03 / 2012

Transaction ID : SB.120

Amount of Each Disbursement this Period

7.95

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

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

234.75

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Liberty for All Super PAC

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address 200 VESEY ST

City MANHATTAN State NY Zip Code 10080

Purpose of Disbursement
CC PROCESSING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 24 / 2012

Transaction ID : SB.162

Amount of Each Disbursement this Period

289.15

Full Name (Last, First, Middle Initial)

B. AMTRAK

Mailing Address 60 MASSACHUSSETS AVE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
TRAVEL - TRAIN

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 03 / 2012

Transaction ID : SB.125

Amount of Each Disbursement this Period

158.00

Full Name (Last, First, Middle Initial)

C. AMTRAK

Mailing Address 60 MASSACHUSSETS AVE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
TRAVEL - RAIL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 12 / 2012

Transaction ID : SB.148

Amount of Each Disbursement this Period

158.00

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

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

605.15

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Liberty for All Super PAC

Full Name (Last, First, Middle Initial)

A. CLARK HILL PLC

Mailing Address 601 PENNSYLVANIA AVE NW STE 1000

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement
LEGAL SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
12 / 27 / 2012

Transaction ID : SB.105

Amount of Each Disbursement this Period

22011.00

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement
CC PROCESSING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
12 / 10 / 2012

Transaction ID : SB.143

Amount of Each Disbursement this Period

0.63

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement
DATABASE SERVICE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
12 / 19 / 2012

Transaction ID : SB.152

Amount of Each Disbursement this Period

500.00

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

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

22511.63

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Liberty for All Super PAC

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 7704 LEESBURG PIKE

City State Zip Code
FALLS CHURCH VA 22043

Purpose of Disbursement
CC PROCESSING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 24 / 2012

Transaction ID : SB.164

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. COMMON MAN INN

Mailing Address 231 MAIN ST.

City State Zip Code
PLYMOUTH NH 03264

Purpose of Disbursement
TRAVEL - LODGING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 28 / 2012

Transaction ID : SB.113

Amount of Each Disbursement this Period

215.80

Full Name (Last, First, Middle Initial)

C. COMMON MAN INN

Mailing Address 231 MAIN ST.

City State Zip Code
PLYMOUTH NH 03264

Purpose of Disbursement
TRAVEL - LODGING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 30 / 2012

Transaction ID : SB.114

Amount of Each Disbursement this Period

110.00

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

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

575.80

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Liberty for All Super PAC

Full Name (Last, First, Middle Initial)

A. ELAVON MERCHANT SERVICES

Mailing Address 2 CONCOURSE PKWY STE 800

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
CC PROCESSING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 03 / 2012

Transaction ID : SB.119

Amount of Each Disbursement this Period

121.10

Full Name (Last, First, Middle Initial)

B. ELECTIONCFO, LLC

Mailing Address PO BOX 26141

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 27 / 2012

Transaction ID : SB.111

Amount of Each Disbursement this Period

6000.00

Full Name (Last, First, Middle Initial)

C. GOOGLE

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement
INTERNET SERVICE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 03 / 2012

Transaction ID : SB.121

Amount of Each Disbursement this Period

85.00

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

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

6206.10

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Liberty for All Super PAC

Full Name (Last, First, Middle Initial)

A. HOLIDAY INN

Mailing Address 11766 WILSHIRE BLVD STE 1450

City LOS ANGELES State CA Zip Code 90025

Purpose of Disbursement
TRAVEL - LODGING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2012

Transaction ID : SB.149

Amount of Each Disbursement this Period

238.74

B. INTUIT

Full Name (Last, First, Middle Initial)

Mailing Address 2632 MARINE WAY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement
ACCOUNTING SOFTWARE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 10 / 2012

Transaction ID : SB.145

Amount of Each Disbursement this Period

29.90

C. JMC ENTERPRISES OF LOUISIANA

Full Name (Last, First, Middle Initial)

Mailing Address 1025 CHIPPENHAM DR

City BATON ROUGE State LA Zip Code 70808

Purpose of Disbursement
DATA

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 27 / 2012

Transaction ID : SB.112

Amount of Each Disbursement this Period

250.00

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

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

518.64

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Liberty for All Super PAC

Full Name (Last, First, Middle Initial)

A. KAYAK

Mailing Address 55 N WATER ST STE 1

City NORWALK State CT Zip Code 06854

Purpose of Disbursement
TRAVEL - AIRFARE

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. LEXISNEXIS

Mailing Address PO BOX 7247-7090

City PHILADELPHIA State PA Zip Code 19170

Purpose of Disbursement
RESEARCH SERVICE

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. RESIDENCE INN

Mailing Address 10400 FERNWOOD RD

City BETHESDA State MD Zip Code 20817

Purpose of Disbursement
TRAVEL - LODGING

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 04 / 2012

Transaction ID : SB.126

Amount of Each Disbursement this Period

1098.90

Date of Disbursement

MM / DD / YYYY
12 / 12 / 2012

Transaction ID : SB.104

Amount of Each Disbursement this Period

250.00

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2012

Transaction ID : SB.116

Amount of Each Disbursement this Period

262.21

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

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

1611.11

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Liberty for All Super PAC

Full Name (Last, First, Middle Initial)

A. RESIDENCE INN

Mailing Address 10400 FERNWOOD RD

City State Zip Code
BETHESDA MD 20817

Purpose of Disbursement
TRAVEL - LODGING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 07 / 2012

Transaction ID : SB.140

Amount of Each Disbursement this Period

262.21

Full Name (Last, First, Middle Initial)

B. RESIDENCE INN

Mailing Address 10400 FERNWOOD RD

City State Zip Code
BETHESDA MD 20817

Purpose of Disbursement
TRAVEL - LODGING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 17 / 2012

Transaction ID : SB.151

Amount of Each Disbursement this Period

992.73

Full Name (Last, First, Middle Initial)

C. SOUTHWEST

Mailing Address 2702 LOVE FIELD DR

City State Zip Code
DALLAS TX 75235

Purpose of Disbursement
TRAVEL - AIRFARE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2012

Transaction ID : SB.147

Amount of Each Disbursement this Period

170.60

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

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

1425.54

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Liberty for All Super PAC

Full Name (Last, First, Middle Initial)

A. SUREPAYROLL

Mailing Address 2350 RAVINE WAY STE 100

City GLENVIEW State IL Zip Code 60025

Purpose of Disbursement
EMPLOYER PAYROLL TAXES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 05 / 2012

Transaction ID : SB.127

Amount of Each Disbursement this Period

438.00

Full Name (Last, First, Middle Initial)

B. SUREPAYROLL

Mailing Address 2350 RAVINE WAY STE 100

City GLENVIEW State IL Zip Code 60025

Purpose of Disbursement
PAYROLL PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 05 / 2012

Transaction ID : SB.128

Amount of Each Disbursement this Period

47.79

Full Name (Last, First, Middle Initial)

C. SUREPAYROLL

Mailing Address 2350 RAVINE WAY STE 100

City GLENVIEW State IL Zip Code 60025

Purpose of Disbursement
PAYROLL PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 14 / 2012

Transaction ID : SB.150

Amount of Each Disbursement this Period

87.12

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

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

572.91

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Liberty for All Super PAC

Full Name (Last, First, Middle Initial)

A. SUREPAYROLL

Mailing Address 2350 RAVINE WAY STE 100

City GLENVIEW State IL Zip Code 60025

Purpose of Disbursement
PAYROLL PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 21 / 2012

Transaction ID : SB.153

Amount of Each Disbursement this Period

42.57

Full Name (Last, First, Middle Initial)

B. SUREPAYROLL

Mailing Address 2350 RAVINE WAY STE 100

City GLENVIEW State IL Zip Code 60025

Purpose of Disbursement
EMPLOYER PAYROLL TAXES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 21 / 2012

Transaction ID : SB.154

Amount of Each Disbursement this Period

267.75

Full Name (Last, First, Middle Initial)

C. TIME WARNER CABLE

Mailing Address 12012 N MO PAC EXPY

City AUSTIN State TX Zip Code 78758

Purpose of Disbursement
UTILITY BILL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 10 / 2012

Transaction ID : SB.146

Amount of Each Disbursement this Period

300.50

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

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

610.82

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Liberty for All Super PAC

Full Name (Last, First, Middle Initial)

A. US POSTAL SERVICE

Mailing Address 475 L'ENFANT PLZ

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2012

Transaction ID : SB.166

Amount of Each Disbursement this Period

144.00

Full Name (Last, First, Middle Initial)

B. VERIZON WIRELESS

Mailing Address 482 OHIO PIKE

City CINCINNATI State OH Zip Code 45255

Purpose of Disbursement
CELL SERVICE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 07 / 2012

Transaction ID : SB.139

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

C. VOICEBROADCASTING.COM

Mailing Address 1527 S COOPER ST

City ARLINGTON State TX Zip Code 76010

Purpose of Disbursement
DBEIT FOR PRE-PAID IE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 03 / 2012

Transaction ID : SB.901

Amount of Each Disbursement this Period

-464.78

AUTOMATED PHONE CALL MINUTES ORIGINALLY
PURCHASED FROM FRC TECHNOLOGIES 3/12/2012

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

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

-290.78

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Liberty for All Super PAC

Full Name (Last, First, Middle Initial)

A. VOICEBROADCASTING.COM

Mailing Address 1527 S COOPER ST

City ARLINGTON State TX Zip Code 76010

Purpose of Disbursement
DBEIT FOR PRE-PAID IE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 04 / 2012

Transaction ID : SB.902

Amount of Each Disbursement this Period

-367.00

AUTOMATED PHONE CALL MINUTES ORIGINALLY PURCHASED FROM FRC TECHNOLOGIES 3/12/2012

Full Name (Last, First, Middle Initial)

B. VOICEBROADCASTING.COM

Mailing Address 1527 S COOPER ST

City ARLINGTON State TX Zip Code 76010

Purpose of Disbursement
DBEIT FOR PRE-PAID IE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 05 / 2012

Transaction ID : SB.903

Amount of Each Disbursement this Period

-392.02

AUTOMATED PHONE CALL MINUTES ORIGINALLY PURCHASED FROM FRC TECHNOLOGIES 3/12/2012

Full Name (Last, First, Middle Initial)

C. WELLS FARGO

Mailing Address 10401 ANDERSON MILL RD

City AUSTIN State TX Zip Code 78750

Purpose of Disbursement
BANK CHARGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 03 / 2012

Transaction ID : SB.118

Amount of Each Disbursement this Period

12.95

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

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

-746.07

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Liberty for All Super PAC

Full Name (Last, First, Middle Initial)

A. WELLS FARGO

Mailing Address 10401 ANDERSON MILL RD

City AUSTIN State TX Zip Code 78750

Purpose of Disbursement
BANK CHARGE

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
12 / 10 / 2012

Transaction ID : SB.142

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

B. WELLS FARGO

Mailing Address 10401 ANDERSON MILL RD

City AUSTIN State TX Zip Code 78750

Purpose of Disbursement
BANK CHARGE

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
12 / 10 / 2012

Transaction ID : SB.144

Amount of Each Disbursement this Period

3.00

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)..... ▶

13.00

104453.45

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 32 OF 34
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Liberty for All Super PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor CLARK HILL PLC	Nature of Debt (Purpose): LEGAL SERVICES
Mailing Address 601 PENNSYLVANIA AVE NW	
City WASHINGTON State DC Zip Code 20004	

Outstanding Balance Beginning This Period <input type="text" value="22011.00"/>	Transaction ID : SD10.002	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="22011.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="0.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Liberty for All Super PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00514653 </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	

Full Name (Last, First, Middle Initial) of Payee VOICEBROADCASTING.COM	Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 12 / 03 / 2012 </div>					
Mailing Address 1527 S COOPER ST	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 464.78 </div>					
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">City</td> <td style="width:30%;">State</td> <td style="width:40%;">Zip Code</td> </tr> <tr> <td>ARLINGTON</td> <td>TX</td> <td>76010</td> </tr> </table>		City	State	Zip Code	ARLINGTON	TX
City	State	Zip Code				
ARLINGTON	TX	76010				
Purpose of Expenditure TELEPHONE VOTER CONTACT	Category/Type 	Office Sought: <input checked="" type="checkbox"/> House State: LA <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President				
Name of Federal Candidate Supported or Opposed by Expenditure: CHARLES W BOUSTANY JR		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose				
Calendar Year-To-Date Per Election for Office Sought 464.78		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input checked="" type="checkbox"/> Other (specify) ▶				

Transaction ID : SE.001

Full Name (Last, First, Middle Initial) of Payee VOICEBROADCASTING.COM	Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 12 / 04 / 2012 </div>					
Mailing Address 1527 S COOPER ST	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 367.00 </div>					
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">City</td> <td style="width:30%;">State</td> <td style="width:40%;">Zip Code</td> </tr> <tr> <td>ARLINGTON</td> <td>TX</td> <td>76010</td> </tr> </table>		City	State	Zip Code	ARLINGTON	TX
City	State	Zip Code				
ARLINGTON	TX	76010				
Purpose of Expenditure TELEPHONE VOTER CONTACT	Category/Type 	Office Sought: <input checked="" type="checkbox"/> House State: LA <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President				
Name of Federal Candidate Supported or Opposed by Expenditure: CHARLES W BOUSTANY JR		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose				
Calendar Year-To-Date Per Election for Office Sought 831.78		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input checked="" type="checkbox"/> Other (specify) ▶				

Transaction ID : SE.002

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 831.78 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </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.

CHRISTOPHER M MARSTON

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
12 / 03 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Liberty for All Super PAC	FEC IDENTIFICATION NUMBER ▼ C C00514653
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 VOICEBROADCASTING.COM	Date MM / DD / YYYY 12 / 05 / 2012
Mailing Address 1527 S COOPER ST	Amount 392.02
City ARLINGTON State TX Zip Code 76010	
Purpose of Expenditure TELEPHONE VOTER CONTACT	Category/Type
Name of Federal Candidate Supported or Opposed by Expenditure: CHARLES W BOUSTANY JR	Office Sought: <input checked="" type="checkbox"/> House State: LA <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 1223.80	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" 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
Name of Federal Candidate Supported or Opposed by Expenditure:	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought	Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	392.02
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	1223.80

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.

CHRISTOPHER M MARSTON

Signature _____ [Electronically Filed] Date **12 / 05 / 2012**