

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.
AMERICA SHINING

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

5. Covering Period 10 / 18 / 2012 through 11 / 26 / 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 Tara M. Geise

Signature of Treasurer Tara M. Geise [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.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

AMERICA SHINING

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="238117.21"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="350000.00"/>	<input type="text" value="1115000.00"/>
(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="588117.21"/>	<input type="text" value="1115000.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="548677.71"/>	<input type="text" value="1075560.50"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="39439.50"/>	<input type="text" value="39439.50"/>
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="465.15"/>	

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

AMERICA SHINING

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).....	350000.00	1115000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	350000.00	1115000.00
(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)	350000.00	1115000.00
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))..... ▶	350000.00	1115000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	350000.00	1115000.00

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	9433.27	20115.82
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	9433.27	20115.82
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)	539244.44	1055444.68
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)) ..	548677.71	1075560.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	548677.71	1075560.50

DETAILED SUMMARY PAGE
of Disbursements

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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)	350000.00	1115000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	350000.00	1115000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	9433.27	20115.82
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	9433.27	20115.82

**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 24
(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)
AMERICA SHINING

A. Nain Lai Chen
 Full Name (Last, First, Middle Initial)
 Mailing Address 2148 Punta Del Este Dr.
 City State Zip Code
 Hacienda Heights CA 91745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 150000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2012
Transaction ID : SA11AI.4434
 Amount of Each Receipt this Period
 150000.00

B. Nain Lai Chen
 Full Name (Last, First, Middle Initial)
 Mailing Address 2148 Punta Del Este Dr.
 City State Zip Code
 Hacienda Heights CA 91745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 350000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2012
Transaction ID : SA11AI.4433
 Amount of Each Receipt this Period
 200000.00

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

SUBTOTAL of Receipts This Page (optional).....▶	350000.00
TOTAL This Period (last page this line number only).....▶	350000.00

**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)
AMERICA SHINING

Full Name (Last, First, Middle Initial)

A. Carr Workplaces

Mailing Address 4 Embarcadero Center
14th Floor

City San Francisco State CA Zip Code 94111

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
11 / 02 / 2012

Transaction ID : **SB21B.4492**

Amount of Each Disbursement this Period

1850.00

Full Name (Last, First, Middle Initial)

B. Chain Bridge Bank

Mailing Address 1445-A Laughlin Ave.

City McLean State VA Zip Code 22101

Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 18 / 2012

Transaction ID : **SB21B.4340**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. Chain Bridge Bank

Mailing Address 1445-A Laughlin Ave.

City McLean State VA Zip Code 22101

Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 18 / 2012

Transaction ID : **SB21B.4351**

Amount of Each Disbursement this Period

20.00

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

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

1890.00

**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)
AMERICA SHINING

Full Name (Last, First, Middle Initial)

A. Chain Bridge Bank

Mailing Address 1445-A Laughlin Ave.

City McLean State VA Zip Code 22101

Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 19 / 2012

Transaction ID : **SB21B.4353**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. Chain Bridge Bank

Mailing Address 1445-A Laughlin Ave.

City McLean State VA Zip Code 22101

Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 22 / 2012

Transaction ID : **SB21B.4366**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. Chain Bridge Bank

Mailing Address 1445-A Laughlin Ave.

City McLean State VA Zip Code 22101

Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 23 / 2012

Transaction ID : **SB21B.4374**

Amount of Each Disbursement this Period

20.00

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

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

60.00

**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)
AMERICA SHINING

Full Name (Last, First, Middle Initial)

A. Chain Bridge Bank

Mailing Address 1445-A Laughlin Ave.

City McLean State VA Zip Code 22101

Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 31 / 2012

Transaction ID : **SB21B.4442**

Amount of Each Disbursement this Period

60.00

Full Name (Last, First, Middle Initial)

B. Chain Bridge Bank

Mailing Address 1445-A Laughlin Ave.

City McLean State VA Zip Code 22101

Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 01 / 2012

Transaction ID : **SB21B.4443**

Amount of Each Disbursement this Period

60.00

Full Name (Last, First, Middle Initial)

C. Embarcadero 4 Parking Garage

Mailing Address 4 Embarcadero Center

City San Francisco State CA Zip Code 94111

Purpose of Disbursement
Parking

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 01 / 2012

Transaction ID : **SB21B.4449**

Amount of Each Disbursement this Period

32.00

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

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

152.00

**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)
AMERICA SHINING

Full Name (Last, First, Middle Initial)

A. Geise2 Strategies, LLC

Mailing Address 4320 S. Thatcher Ave.

City Tampa State FL Zip Code 33611

Purpose of Disbursement
Consultant - Compliance

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 01 / 2012

Transaction ID : **SB21B.4445**

Amount of Each Disbursement this Period

6095.00

Full Name (Last, First, Middle Initial)

B. Royal Taxi

Mailing Address 2060 Newcomb Ave.

City San Francisco State CA Zip Code 94124

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 19 / 2012

Transaction ID : **SB21B.4495**

Amount of Each Disbursement this Period

52.75

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Sandler, Reiff, Young & Lamb, P.C.

Mailing Address 1025 Vermont Ave., NW

City Washington State DC Zip Code 20005

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

MM / DD / YYYY
10 / 30 / 2012

Transaction ID : **SB21B.4444**

Amount of Each Disbursement this Period

810.00

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

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

6905.00

**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)
AMERICA SHINING

Full Name (Last, First, Middle Initial)

A. Speedway Digital Printing

Mailing Address 227 Front St.

City San Francisco State CA Zip Code 94111

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 22 / 2012

Transaction ID : **SB21B.4371**

Amount of Each Disbursement this Period

137.14

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Frederick Tsai

Mailing Address 1592 Union St.
Suite 320

City San Francisco State CA Zip Code 94123

Purpose of Disbursement
Reimbursement - See memo entries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 19 / 2012

Transaction ID : **SB21B.4486**

Amount of Each Disbursement this Period

108.00

Full Name (Last, First, Middle Initial)

C. Yellow Cab

Mailing Address 1200 Mississippi Street

City San Francisco State CA Zip Code 94107

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 19 / 2012

Transaction ID : **SB21B.4498**

Amount of Each Disbursement this Period

55.25

[MEMO ITEM]

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

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

108.00

9115.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 12 OF 24
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
AMERICA SHINING

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Facebook	Nature of Debt (Purpose): Facebook ads
Mailing Address 1601 Willow Rd.	
City State Zip Code Menlo Park CA 94025	

Outstanding Balance Beginning This Period <input type="text" value="249.73"/>	Transaction ID : SD10.4523	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="249.73"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Facebook	Nature of Debt (Purpose): Facebook ads
Mailing Address 1601 Willow Rd.	
City State Zip Code Menlo Park CA 94025	

Outstanding Balance Beginning This Period <input type="text" value="113.40"/>	Transaction ID : SD10.4524	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="113.40"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Facebook	Nature of Debt (Purpose): Facebook ads
Mailing Address 1601 Willow Rd.	
City State Zip Code Menlo Park CA 94025	

Outstanding Balance Beginning This Period <input type="text" value="24.00"/>	Transaction ID : SD10.4525	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="24.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="387.13"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
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 D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 13 OF 24
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
AMERICA SHINING

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Facebook	Nature of Debt (Purpose): Facebook ads
Mailing Address 1601 Willow Rd.	
City State Zip Code Menlo Park CA 94025	

Outstanding Balance Beginning This Period <input type="text" value="29.34"/>	Transaction ID : SD10.4526	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="29.34"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Facebook	Nature of Debt (Purpose): Facebook ads
Mailing Address 1601 Willow Rd.	
City State Zip Code Menlo Park CA 94025	

Outstanding Balance Beginning This Period <input type="text" value="33.68"/>	Transaction ID : SD10.4527	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="33.68"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Facebook	Nature of Debt (Purpose): Facebook ads
Mailing Address 1601 Willow Rd.	
City State Zip Code Menlo Park CA 94025	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10.4528	
Amount Incurred This Period <input type="text" value="15.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="15.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="78.02"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="465.15"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="465.15"/>

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) AMERICA SHINING	FEC IDENTIFICATION NUMBER ▼ C C00525618
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 EnVogue Global Inc.		Date MM / DD / YYYY 10 / 25 / 2012
Mailing Address 1426 Stardust Dr.		Amount 1545.00
City Diamond Bar	State CA	Zip Code 91765
Purpose of Expenditure Television Ad Production - disseminated 10/24/12	Category/ Type	Transaction ID : SE.4398
Name of Federal Candidate Supported or Opposed by Expenditure: EDWARD R ROYCE		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 39 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
747845.93		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee EnVogue Global Inc.		Date MM / DD / YYYY 10 / 25 / 2012
Mailing Address 1426 Stardust Dr.		Amount 140.00
City Diamond Bar	State CA	Zip Code 91765
Purpose of Expenditure Newspaper Ad Design- Disseminated 10/24/12	Category/ Type	Transaction ID : SE.4407
Name of Federal Candidate Supported or Opposed by Expenditure: EDWARD R ROYCE		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 39 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
747985.93		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	1685.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Tara M. Geise
Signature

[Electronically Filed] Date MM / DD / YYYY
01 / 31 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) AMERICA SHINING	FEC IDENTIFICATION NUMBER ▼ C C00525618
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 EnVogue Global Inc.		Date MM / DD / YYYY 11 / 05 / 2012
Mailing Address 1426 Stardust Dr.		Amount 70.00
City Diamond Bar	State CA	
Zip Code 91765	Transaction ID : SE.4481	
Purpose of Expenditure Newspaper Ad Design- Disseminated 11/3/12	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: RICKY GILL		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 3325.84		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Facebook [MEMO ITEM]		Date MM / DD / YYYY 11 / 03 / 2012
Mailing Address 1601 Willow Rd.		Amount 15.00
City Menlo Park	State CA	
Zip Code 94025	Transaction ID : SE.4545	
Purpose of Expenditure Facebook ads - disseminated 11/3/12	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JERRY MCNERNEY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 3255.84		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	70.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Tara M. Geise
Signature

[Electronically Filed]

Date MM / DD / YYYY
01 / 31 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) AMERICA SHINING	FEC IDENTIFICATION NUMBER ▼ C C00525618
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 LUC Media Group Inc.		Date MM / DD / YYYY 10 / 18 / 2012
Mailing Address 25 Whitlock Place #201		Amount 88740.00
City Marietta	State GA	
Zip Code 30064	Transaction ID : SE.4341	
Purpose of Expenditure Television Ad - disseminated 10/18/12	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 39 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: EDWARD R ROYCE		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
599557.64		2012

Full Name (Last, First, Middle Initial) of Payee LUC Media Group Inc.		Date MM / DD / YYYY 10 / 22 / 2012
Mailing Address 25 Whitlock Place #201		Amount 88740.00
City Marietta	State GA	
Zip Code 30064	Transaction ID : SE.4410	
Purpose of Expenditure Television Ad - disseminated 10/25/12	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 39 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: EDWARD R ROYCE		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
720221.93		2012

(a) SUBTOTAL of Itemized Independent Expenditures.....	177480.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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Tara M. Geise
Signature

[Electronically Filed] Date **01 / 31 / 2013**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) AMERICA SHINING	FEC IDENTIFICATION NUMBER ▼ C C00525618
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 M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee LUC Media Group Inc.		Date M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 25 Whitlock Place #201		Amount 105000.00
City Marietta	State GA	Zip Code 30064
Purpose of Expenditure Television Ad - disseminated 11/2/12	Category/Type 	Transaction ID : SE.4466
Name of Federal Candidate Supported or Opposed by Expenditure: JAY CHEN		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 39 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 1004544.92		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee LUC Media Group Inc.		Date M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 25 Whitlock Place #201		Amount 45000.00
City Marietta	State GA	Zip Code 30064
Purpose of Expenditure Television Ad - disseminated 11/2/12	Category/Type 	Transaction ID : SE.4467
Name of Federal Candidate Supported or Opposed by Expenditure: EDWARD R ROYCE		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 39 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 1049544.92		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	150000.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Tara M. Geise

Signature [Electronically Filed] Date M M / D D / Y Y Y Y
01 / 31 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) AMERICA SHINING	FEC IDENTIFICATION NUMBER ▼ C C00525618
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 M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee MCB Design		Date M M / D D / Y Y Y Y Y Y 10 / 23 / 2012
Mailing Address 540 Alcatraz Ave. #206		Amount 1079.00
City Oakland	State CA	Zip Code 94609
Purpose of Expenditure Website - disseminated 10/22/12	Category/ Type 	Transaction ID : SE.4387
Name of Federal Candidate Supported or Opposed by Expenditure: EDWARD R ROYCE		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 39 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 746300.93		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Revolution Media		Date M M / D D / Y Y Y Y Y Y 10 / 18 / 2012
Mailing Address 1343 Massachusetts Ave. SE		Amount 16476.30
City Washington	State DC	Zip Code 20003
Purpose of Expenditure Television Ad Production - disseminated 10/18/12	Category/ Type 	Transaction ID : SE.4343
Name of Federal Candidate Supported or Opposed by Expenditure: EDWARD R ROYCE		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 39 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 616033.94		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	17555.30
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Tara M. Geise
Signature

[Electronically Filed] Date M M / D D / Y Y Y Y Y Y
01 / 31 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) AMERICA SHINING	FEC IDENTIFICATION NUMBER ▼ C C00525618
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 Revolution Media		Date MM / DD / YYYY 10 / 31 / 2012	
Mailing Address 1343 Massachusetts Ave. SE		Amount 8951.75	
City Washington	State DC	Zip Code 20003	
Purpose of Expenditure Television Ad Production - disseminated 11/1/12	Category/Type	Transaction ID : SE.4461	
Name of Federal Candidate Supported or Opposed by Expenditure: JAY CHEN		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 39 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought 867017.87		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee Targeting Direct		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 6114 LaSalle Ave. Suite 604		Amount 3999.81	
City Oakland	State CA	Zip Code 94611	
Purpose of Expenditure Direct Mail & Postage - disseminated 10/19/12	Category/Type	Transaction ID : SE.4354	
Name of Federal Candidate Supported or Opposed by Expenditure: EDWARD R ROYCE		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 39 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought 620033.75		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	12951.56
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Tara M. Geise

Signature _____ [Electronically Filed] Date MM / DD / YYYY **01 / 31 / 2013**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) AMERICA SHINING	FEC IDENTIFICATION NUMBER ▼ C C00525618
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 M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Targeting Direct		Date M M M / D D D / Y Y Y Y Y Y 10 / 19 / 2012
Mailing Address 6114 LaSalle Ave. Suite 604		Amount 11448.18
City Oakland	State CA	Zip Code 94611
Purpose of Expenditure Direct Mail & Postage - disseminated 10/19/12	Category/ Type	Transaction ID : SE.4355
Name of Federal Candidate Supported or Opposed by Expenditure: EDWARD R ROYCE		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 39 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 631481.93		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Targeting Direct		Date M M M / D D D / Y Y Y Y Y Y 10 / 23 / 2012
Mailing Address 6114 LaSalle Ave. Suite 604		Amount 25000.00
City Oakland	State CA	Zip Code 94611
Purpose of Expenditure Direct Mail & Postage - disseminated 10/24/12	Category/ Type	Transaction ID : SE.4375
Name of Federal Candidate Supported or Opposed by Expenditure: EDWARD R ROYCE		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 39 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 745221.93		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	36448.18
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Tara M. Geise
Signature

[Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
01 / 31 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) AMERICA SHINING	FEC IDENTIFICATION NUMBER ▼ C C00525618
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 Targeting Direct		Date MM / DD / YYYY 11 / 01 / 2012
Mailing Address 6114 LaSalle Ave. Suite 604		Amount 32527.05
City Oakland State CA Zip Code 94611	Transaction ID : SE.4463	
Purpose of Expenditure Direct Mail & Postage - disseminated 11/1/12	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 39 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JAY CHEN		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 899544.92		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee The Sacramento Bee		Date MM / DD / YYYY 11 / 01 / 2012
Mailing Address P.O. Box 15779		Amount -2500.00
City Sacramento State CA Zip Code 95852	Transaction ID : SE.4475	
Purpose of Expenditure Voided check. Replaced by payment made on 11/1	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: RICKY GILL		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 293.68		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	30027.05
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Tara M. Geise **[Electronically Filed]** Date **01 / 31 / 2013**

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) AMERICA SHINING	FEC IDENTIFICATION NUMBER ▼ C C00525618
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 The Sacramento Bee		Date MM / DD / YYYY 11 / 01 / 2012
Mailing Address P.O. Box 15779		Amount 2947.16
City Sacramento	State CA	
Zip Code 95852	Transaction ID : SE.4476	
Purpose of Expenditure Newspaper Ad - disseminated 11/3/12	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: RICKY GILL		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
3240.84		2012

Full Name (Last, First, Middle Initial) of Payee		Date
Mailing Address		MM / DD / YYYY
City	State	Amount
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) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	2947.16
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	539244.44

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.

Tara M. Geise

Signature _____ [Electronically Filed] Date MM / DD / YYYY
01 / 31 / 2013