

# FEC FORM 5

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

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

1 (a) Name of Individual, Organization or Corporation <b>TRENT FRANKS</b>		3. FEC Identification Number <b>C90014374</b>
(b) Address (number and street) check if different than previously reported <b>6828 W. CAMINO DE ORO</b>		
(c) City, State and ZIP Code <b>Peoria, AZ 85383</b>		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Individual filers only	Name of Employer <b>U.S. HOUSE</b>	Occupation <b>REPRESENTATIVE</b>

4. TYPE OF REPORT (check appropriate boxes):

(a) April 15 Quarterly Report

July 15 Quarterly Report

October 15 Quarterly Report

January 31 Year-End Report

24-Hour Report

48-Hour Report

b) Is this Report an amendment? Yes  No

5. COVERING PERIOD: FROM

THROUGH **10-1-2012 - 12-31-2012**

6. TOTAL CONTRIBUTIONS.....

7. TOTAL INDEPENDENT EXPENDITURES ..... **17,500.00**

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

TYPE OR PRINT NAME OF PERSON COMPLETING FORM	SIGNATURE	DATE
<b>LISA TESCHLER</b>	<i>Trent Franks</i>	<b>3/7/13</b>

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

For further information, contact: Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20469 Toll Free 800-424-9630, Local 202-694-1100

SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 2 OF 2  
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)  
**TRENT FRANKS**

Full Name (Last, First, Middle Initial) of Payee <b>MARKETEL MEDIA, INC.</b>	Date <b>11 01 2012</b>
Mailing Address <b>33175 TEMECUIA PKWY, #A-203</b>	Amount <b>13,000.00</b>
City State Zip Code <b>TEMECUIA, CA 92592</b>	

Purpose of Expenditure <b>MASS EMAIL + SOCIAL MEDIA</b>	Category/Type <b>04</b>	Office Sought: House _____ Senate _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <b>MITT ROMNEY FOR PRESIDENT</b>	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>13,000.00</b>	Disbursement For: Primary _____ <input checked="" type="checkbox"/> General _____ Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>GREG HENCOLES</b>	Date <b>11 02 2012</b>
Mailing Address <b>808 VIA LORENTE</b>	Amount <b>1,500.00</b>
City State Zip Code <b>CAMARILLO, CA 93012</b>	

Purpose of Expenditure <b>Video Production + Editing</b>	Category/Type <b>04</b>	Office Sought: House _____ Senate _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <b>MITT ROMNEY FOR PRESIDENT</b>	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>1,500.00</b>	Disbursement For: Primary _____ <input checked="" type="checkbox"/> General _____ Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>REAL ACTION</b>	Date <b>11 02 2012</b>
Mailing Address <b>11330 CAMPO RD</b>	Amount <b>3,000.00</b>
City State Zip Code <b>LA MESA, CA 91941</b>	

Purpose of Expenditure <b>LINK DISTRIBUTION</b>	Category/Type <b>04</b>	Office Sought: House _____ Senate _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <b>MITT ROMNEY FOR PRESIDENT</b>	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>3,000.00</b>	Disbursement For: Primary _____ <input checked="" type="checkbox"/> General _____ Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	<b>17,500.00</b>

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE  
 FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked Delivery Confirmation™ Label <input type="checkbox"/>
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input checked="" type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<p>The document preceding this page was received by FAX at the FEC. The receiving FAX machine has printed at the bottom of each page the date and time of receipt, the phone number of the transmitting machine and the sequential page numbers.</p>	

N/A  
 PREPARER

N/A  
 DATE PREPARED