

# 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.

Government Is Not God

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  /  /  through  /  /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Nancy Murray

Signature of Treasurer Nancy Murray [Electronically Filed] Date  /  /

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Government Is Not God**

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"/>		6890.45
(b) Cash on Hand at Beginning of Reporting Period.....	6890.45	
(c) Total Receipts (from Line 19) .....	15213.00	15213.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	22103.45	22103.45
7. Total Disbursements (from Line 31).....	13354.11	13354.11
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	8749.34	8749.34
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Government Is Not God**

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).....	6648.00	6648.00
(ii) Unitemized .....	8565.00	8565.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	15213.00	15213.00
(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) .....	15213.00	15213.00
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))..... ▶	15213.00	15213.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	15213.00	15213.00

**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 .....	10354.11	10354.11
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	10354.11	10354.11
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3000.00	3000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
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)) ..	13354.11	13354.11
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	13354.11	13354.11

**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) .....	15213.00	15213.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	15213.00	15213.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	10354.11	10354.11
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	10354.11	10354.11

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 19
<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

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)  
**Government Is Not God**

**A. Craig Almquist**  
Full Name (Last, First, Middle Initial)

Mailing Address 4803 Virginia Ave.

City Charleston	State WV	Zip Code 25804
--------------------	-------------	-------------------

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

Name of Employer Home Depot	Occupation dept. manager
--------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	19	/	2012

**Transaction ID : SA11AI.10089**

Amount of Each Receipt this Period  

300.00
--------

 political donation

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

Mailing Address 528 Hightrail Drive

City Allen	State TX	Zip Code 75002
---------------	-------------	-------------------

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

Name of Employer FAA	Occupation air traffic controller
-------------------------	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	28	/	2012

**Transaction ID : SA11AI.10155**

Amount of Each Receipt this Period  

240.00
--------

 political donation

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

Mailing Address 2129 12th Avenue E.

City Hibbing	State MN	Zip Code 55746
-----------------	-------------	-------------------

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

Name of Employer self employed	Occupation contractor
-----------------------------------	--------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	22	/	2012

**Transaction ID : SA11AI.10042**

Amount of Each Receipt this Period  

150.00
--------

 political donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	690.00
<b>TOTAL</b> 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: (check only one)	PAGE 7 OF 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Government Is Not God**

**A. Unitemized Contributions**

Full Name (Last, First, Middle Initial)  
Mailing Address P. O. Box 77237

City Washington	State DC	Zip Code 20013
--------------------	-------------	-------------------

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

Name of Employer N/A	Occupation N/A
-------------------------	-------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1478.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2012  
**Transaction ID : SA11Al.10191**

Amount of Each Receipt this Period  
 1478.00  
 small donations unitemized

**B. Mr. Kendall Miller**

Full Name (Last, First, Middle Initial)  
Mailing Address 7350 Wakefield Ave.

City Reedley	State CA	Zip Code 93654
-----------------	-------------	-------------------

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

Name of Employer N/A	Occupation retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 27 / 2012  
**Transaction ID : SA11Al.10074**

Amount of Each Receipt this Period  
 500.00  
 political donation

**C. Irene Pederson**

Full Name (Last, First, Middle Initial)  
Mailing Address 200 Sunnyside Ave

City Plentywood	State MT	Zip Code 59254
--------------------	-------------	-------------------

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

Name of Employer n/a	Occupation retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 22 / 2012  
**Transaction ID : SA11Al.10116**

Amount of Each Receipt this Period  
 50.00  
 political donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2028.00
<b>TOTAL</b> 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: (check only one)	PAGE 8 OF 19
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Government Is Not God**

Full Name (Last, First, Middle Initial) <b>A. Mrs. Dorothy Scholten</b>		Date of Receipt MM / DD / YYYY 03 / 05 / 2012 <b>Transaction ID : SA11Al.10176</b>
Mailing Address 716 Wisner Shore Lane		Amount of Each Receipt this Period 1500.00 political donation
City Lynden	State WA	Zip Code 98264
FEC ID number of contributing federal political committee. C	Name of Employer N/A	Occupation retired
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Henry Scholten</b>		Date of Receipt MM / DD / YYYY 03 / 05 / 2012 <b>Transaction ID : SA11Al.10175</b>
Mailing Address 716 Wisner Shore Lane		Amount of Each Receipt this Period 1580.00 political donation
City Lynden	State WA	Zip Code 98264
FEC ID number of contributing federal political committee. C	Name of Employer self employed	Occupation consruction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1580.00	

Full Name (Last, First, Middle Initial) <b>C. Victor Tripp</b>		Date of Receipt MM / DD / YYYY 03 / 01 / 2012 <b>Transaction ID : SA11Al.10099</b>
Mailing Address 4396 Lake Ivanhoe Dr		Amount of Each Receipt this Period 100.00 political donation
City Tucker	State GA	Zip Code 30084
FEC ID number of contributing federal political committee. C	Name of Employer unknown	Occupation unknown
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3180.00
<b>TOTAL</b> 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 9 OF 19
	(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

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NAME OF COMMITTEE (In Full)  
**Government Is Not God**

Full Name (Last, First, Middle Initial) <b>A. Rev. Raymond Uschold</b>		Date of Receipt MM / DD / YYYY 03 / 22 / 2012 <b>Transaction ID : SA11AI.10088</b>
Mailing Address 10 Rosary Ave.		Amount of Each Receipt this Period 300.00 political donation
City Lackawanna	State NY	Zip Code 14218
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 300.00	
Name of Employer St. Hyacinth parish	Occupation priest	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mr. John Valerius</b>		Date of Receipt MM / DD / YYYY 02 / 23 / 2012 <b>Transaction ID : SA11AI.10058</b>
Mailing Address 1909 Canterbury St.		Amount of Each Receipt this Period 100.00 political donation
City Irving	State TX	Zip Code 75062
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 300.00	
Name of Employer self employed	Occupation attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Mr. John Valerius</b>		Date of Receipt MM / DD / YYYY 03 / 22 / 2012 <b>Transaction ID : SA11AI.10156</b>
Mailing Address 1909 Canterbury St.		Amount of Each Receipt this Period 100.00 political donation
City Irving	State TX	Zip Code 75062
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 400.00	
Name of Employer self employed	Occupation attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> 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 10 OF 19  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Government Is Not God**

**A.** Full Name (Last, First, Middle Initial)  
**Ted Willis**

Mailing Address 19507 Copperoaks Dr

City Tyler State TX Zip Code 75703

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

Name of Employer Trinity Clinic Occupation radiologist

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2012  
**Transaction ID : SA11AI.10157**

Amount of Each Receipt this Period  
 250.00

political donation

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	6648.00

**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)  
**Government Is Not God**

Full Name (Last, First, Middle Initial)

**A. Citibank Business Card**

Mailing Address P. O. Box 10327

City Boston State MA Zip Code 01259

Purpose of Disbursement  
travel expenses

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2012  
 Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 23 / 2012

**Transaction ID : SB21B.10135**

Amount of Each Disbursement this Period

404.73

**B. Conservative Social Media Management**

Full Name (Last, First, Middle Initial)

Mailing Address 10908 Courthouse Rd Ste 102-230

City Fredericksburg State VA Zip Code 22408

Purpose of Disbursement  
consulting fees

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2012  
 Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 16 / 2012

**Transaction ID : SB21B.10144**

Amount of Each Disbursement this Period

200.00

**C. Conservative Social Media Management**

Full Name (Last, First, Middle Initial)

Mailing Address 10908 Courthouse Rd Ste 102-230

City Fredericksburg State VA Zip Code 22408

Purpose of Disbursement  
consulting fees

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2012  
 Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 16 / 2012

**Transaction ID : SB21B.10146**

Amount of Each Disbursement this Period

200.00

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

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

804.73

**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)  
**Government Is Not God**

Full Name (Last, First, Middle Initial)

**A. Constant Contact**

Mailing Address 1601 Trapelo Rd  
# 329

City Waltham State MA Zip Code 02451

Purpose of Disbursement  
news releases

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2012

**Transaction ID : SB21B.10136**

Amount of Each Disbursement this Period

140.00

Full Name (Last, First, Middle Initial)

**B. Constant Contact**

Mailing Address 1601 Trapelo Rd  
# 329

City Waltham State MA Zip Code 02451

Purpose of Disbursement  
email distribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 27 / 2012

**Transaction ID : SB21B.10150**

Amount of Each Disbursement this Period

35.00

Full Name (Last, First, Middle Initial)

**C. Frank York Consulting**

Mailing Address 7046 Bonnavent Dr

City Hermitage State TN Zip Code 37076

Purpose of Disbursement  
consulting fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 23 / 2012

**Transaction ID : SB21B.10039**

Amount of Each Disbursement this Period

650.00

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

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

825.00

**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)  
**Government Is Not God**

Full Name (Last, First, Middle Initial)

**A. Frank York Consulting**

Mailing Address 7046 Bonnavent Dr

City Hermitage State TN Zip Code 37076

Purpose of Disbursement consulting fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

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

Transaction ID : SB21B.10127

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

**B. Frank York Consulting**

Mailing Address 7046 Bonnavent Dr

City Hermitage State TN Zip Code 37076

Purpose of Disbursement consulting fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

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

Transaction ID : SB21B.10143

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

**C. Leadership Institute**

Mailing Address 1101 North Highland St.

City Arlington State VA Zip Code 22201

Purpose of Disbursement convention exhibit expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 19 / 2012

Transaction ID : SB21B.10148

Amount of Each Disbursement this Period

1250.00

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

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

2450.00

**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)  
**Government Is Not God**

Full Name (Last, First, Middle Initial)

**A. Marmak Designs**

Mailing Address 2081 Hutton Dr. #301

City State Zip Code  
Carrollton TX 75006

Purpose of Disbursement  
printing educational materials

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 02 / 2012

**Transaction ID : SB21B.10129**

Amount of Each Disbursement this Period

826.05

Full Name (Last, First, Middle Initial)

**B. Marmak Designs**

Mailing Address 2081 Hutton Dr. #301

City State Zip Code  
Carrollton TX 75006

Purpose of Disbursement  
printing educational materials

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 05 / 2012

**Transaction ID : SB21B.10137**

Amount of Each Disbursement this Period

475.24

Full Name (Last, First, Middle Initial)

**C. Marmak Designs**

Mailing Address 2081 Hutton Dr. #301

City State Zip Code  
Carrollton TX 75006

Purpose of Disbursement  
postage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2012

**Transaction ID : SB21B.10147**

Amount of Each Disbursement this Period

311.14

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

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

1612.43

**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)  
**Government Is Not God**

Full Name (Last, First, Middle Initial)

**A. Mr. William Murray**

Mailing Address P. O. Box 7416

City State Zip Code  
Fredericksburg VA 22404

Purpose of Disbursement  
travel expenses

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	4		2	0	1	2

**Transaction ID : SB21B.10030**

Amount of Each Disbursement this Period

2	5	4	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Mr. William Murray**

Mailing Address P. O. Box 7416

City State Zip Code  
Fredericksburg VA 22404

Purpose of Disbursement  
travel expenses

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	8		2	0	1	2

**Transaction ID : SB21B.10034**

Amount of Each Disbursement this Period

3	9	3	.	6	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Mr. William Murray**

Mailing Address P. O. Box 7416

City State Zip Code  
Fredericksburg VA 22404

Purpose of Disbursement  
travel expenses

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	2		2	0	1	2

**Transaction ID : SB21B.10128**

Amount of Each Disbursement this Period

5	0	1	.	8	1
---	---	---	---	---	---

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

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

1	1	4	.	9	4	1
---	---	---	---	---	---	---

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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)  
**Government Is Not God**

Full Name (Last, First, Middle Initial)

**A. Mr. William Murray**

Mailing Address P. O. Box 7416

City State Zip Code  
Fredericksburg VA 22404

Purpose of Disbursement  
travel expenses

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	1	2

**Transaction ID : SB21B.10142**

Amount of Each Disbursement this Period

5	3	2	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. RICK SANTORUM FOR PRESIDENT**

Mailing Address P.O. BOX 37

City State Zip Code  
VERONA PA 15147

Purpose of Disbursement  
political donation

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	6		2	0	1	2

**Transaction ID : SB21B.10145**

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

**C. United States Post Office**

Mailing Address 115 Massachusetts Ave.

City State Zip Code  
Washington DC 20013

Purpose of Disbursement  
mailing educational materials

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	2		2	0	1	2

**Transaction ID : SB21B.10032**

Amount of Each Disbursement this Period

8	3	0	.	7	7
---	---	---	---	---	---

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

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

1	8	6	2	.	7	7
---	---	---	---	---	---	---

1	8	6	2	.	7	7
---	---	---	---	---	---	---



**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)  
**Government Is Not God**

Full Name (Last, First, Middle Initial)

**A. United States Post Office**

Mailing Address 115 Massachusetts Ave.

City Washington State DC Zip Code 20013

Purpose of Disbursement  
business reply mail permit

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 18 / 2012

**Transaction ID : SB21B.10033**

Amount of Each Disbursement this Period

400.00

Full Name (Last, First, Middle Initial)

**B. United States Post Office**

Mailing Address 115 Massachusetts Ave.

City Washington State DC Zip Code 20013

Purpose of Disbursement  
postage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 22 / 2012

**Transaction ID : SB21B.10131**

Amount of Each Disbursement this Period

243.48

Full Name (Last, First, Middle Initial)

**C. United States Post Office**

Mailing Address 115 Massachusetts Ave.

City Washington State DC Zip Code 20013

Purpose of Disbursement  
postage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 05 / 2012

**Transaction ID : SB21B.10139**

Amount of Each Disbursement this Period

320.00

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

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

963.48

# 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)  
**Government Is Not God**

Full Name (Last, First, Middle Initial)

**A. Verizon**

Mailing Address P. O. Box 17577

City Baltimore State MD Zip Code 21247

Purpose of Disbursement telephone service

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 27 / 2012

Transaction ID : SB21B.10153

Amount of Each Disbursement this Period: 29.36

Category/Type

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

Amount of Each Disbursement this Period:

Category/Type

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

Amount of Each Disbursement this Period:

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 29.36

**TOTAL** This Period (last page this line number only)..... ▶ 9697.18

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**Government Is Not God**

Full Name (Last, First, Middle Initial)

**A. RICK SANTORUM FOR PRESIDENT**

Mailing Address P.O. BOX 37

City VERONA State PA Zip Code 15147

Purpose of Disbursement  
political donation

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2012

**Transaction ID : SB23.10130**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. RICHARD J. SANTORUM**

Mailing Address P.O. BOX 37

City VERONA State PA Zip Code 15147

Purpose of Disbursement  
political contribution

Candidate Name

**RICK SANTORUM FOR PRESIDENT**

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
01 / 28 / 2012

**Transaction ID : SB23.10124**

Amount of Each Disbursement this Period

2500.00

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)..... ▶

3000.00

3000.00