

# 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.   
CATHOLICVOTE.ORG CANDIDATE FUND

ADDRESS (number and street)   
Check if different than previously reported. (ACC)   
CITY STATE ZIP CODE

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 Joshua O Mercer

Signature of Treasurer Joshua O Mercer [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

**CATHOLICVOTE.ORG CANDIDATE FUND**

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=""/>	<input type="text" value="66.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="59953.97"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="121412.00"/>	<input type="text" value="475905.73"/>
(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="181365.97"/>	<input type="text" value="475971.73"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="94838.57"/>	<input type="text" value="389444.33"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="86527.40"/>	<input type="text" value="86527.40"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> 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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**CATHOLICVOTE.ORG CANDIDATE FUND**

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).....	104060.00	326810.00
(ii) Unitemized .....	17352.00	149095.73
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	121412.00	475905.73
(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) .....	121412.00	475905.73
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))..... ▶	121412.00	475905.73
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	121412.00	475905.73

**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 .....	1347.48	96103.40
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	1347.48	96103.40
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) .....	93491.09	293340.93
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)) ..	94838.57	389444.33
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	94838.57	389444.33

**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) .....	121412.00	475905.73
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	121412.00	475905.73
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	1347.48	96103.40
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1347.48	96103.40

**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 20
	<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	

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)  
**CATHOLICVOTE.ORG CANDIDATE FUND**

**A. David Barry**  
Full Name (Last, First, Middle Initial)

Mailing Address 11540 Petersham Falls Ln

City Jacksonville State FL Zip Code 32258

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

Name of Employer CSX Transportation Occupation accountant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt **11 / 01 / 2012**

**Transaction ID : SA11AI.12924**

Amount of Each Receipt this Period **250.00**

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

Mailing Address 2018 224th PL NE

City Sammamish State WA Zip Code 98074

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

Name of Employer NA Occupation unemployed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **10 / 19 / 2012**

**Transaction ID : SA11AI.12888**

Amount of Each Receipt this Period **300.00**

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

Mailing Address 8831 Taunton Drive

City Huntersville State NC Zip Code 28078

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

Name of Employer University Medical Center Occupation CRNA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **10 / 19 / 2012**

**Transaction ID : SA11AI.13342**

Amount of Each Receipt this Period **50.00**

**SUBTOTAL** of Receipts This Page (optional)..... **600.00**

**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: (check only one)	PAGE 7 OF 20
	<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)  
**CATHOLICVOTE.ORG CANDIDATE FUND**

Full Name (Last, First, Middle Initial) <b>A. Judy DeFrench</b>		Date of Receipt
Mailing Address 12040 Landover Lane		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City Fishers	State IN	Zip Code 46037
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.13116</b>
Name of Employer N/A		Occupation N/A
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>		

Full Name (Last, First, Middle Initial) <b>B. cheryl gaedcke</b>		Date of Receipt
Mailing Address 37105 Highview st.		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>
City new baltimore	State MI	Zip Code 48047
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.12880</b>
Name of Employer anchor bay schools		Occupation teacher
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>		

Full Name (Last, First, Middle Initial) <b>C. Catherine Garnett</b>		Date of Receipt
Mailing Address 8270 N Hayden Rd Unit 2008		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City Scottsdale	State AZ	Zip Code 85258
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.13624</b>
Name of Employer Information Requested		Occupation Information Requested
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="50.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="550.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 20
	<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)  
**CATHOLICVOTE.ORG CANDIDATE FUND**

Full Name (Last, First, Middle Initial) <b>A. Catherine Garnett</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2012 <b>Transaction ID : SA11AI.13575</b>
Mailing Address 8270 N Hayden Rd Unit 2008		Amount of Each Receipt this Period 310.00
City Scottsdale	State AZ	Zip Code 85258
FEC ID number of contributing federal political committee. C		
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00	

Full Name (Last, First, Middle Initial) <b>B. Joseph P Glas</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2012 <b>Transaction ID : SA11AI.13108</b>
Mailing Address 40 Brays Island Dr		Amount of Each Receipt this Period 50.00
City Sheldon	State SC	Zip Code 29941
FEC ID number of contributing federal political committee. C		
Name of Employer Myriant Corporation	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>C. Peter Hansen</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2012 <b>Transaction ID : SA11AI.13320</b>
Mailing Address Rio Monday 185		Amount of Each Receipt this Period 250.00
City Asuncion	State FL	Zip Code 34202
FEC ID number of contributing federal political committee. C		
Name of Employer self-employed	Occupation economist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	310.00
<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 9 OF 20
<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)  
**CATHOLICVOTE.ORG CANDIDATE FUND**

**A. Thoomas Keane**  
Full Name (Last, First, Middle Initial)  
Mailing Address 18860 Pheasant Circle  
City Eden Prairie State MN Zip Code 55346  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Esthesia Oral Surgery Care, P.A. Occupation Oral and Maxillofacial Surgeon  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 250.00

Date of Receipt 10 / 31 / 2012  
Transaction ID : SA11AI.13432  
Amount of Each Receipt this Period 250.00

**B. John Kennedy**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4436 Broadmoor SE  
City Kentwood State MI Zip Code 49512  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Autocam Occupation CEO  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 200000.00

Date of Receipt 10 / 18 / 2012  
Transaction ID : SA11AI.13667  
Amount of Each Receipt this Period 100000.00

**c. Jeffrey LaCour**  
Full Name (Last, First, Middle Initial)  
Mailing Address 69489 Fair Oaks Lane  
City Covington State LA Zip Code 70433  
FEC ID number of contributing federal political committee. **C**  
Name of Employer North Oaks Hospital Occupation Physician  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 250.00

Date of Receipt 10 / 23 / 2012  
Transaction ID : SA11AI.13062  
Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional)..... 100500.00  
**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: (check only one)	PAGE 10 OF 20
	<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)  
**CATHOLICVOTE.ORG CANDIDATE FUND**

Full Name (Last, First, Middle Initial) <b>A. elizabeth laemmle</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 20 / 2012 <b>Transaction ID : SA11AI.12969</b>
Mailing Address 2352 38th			Amount of Each Receipt this Period 150.00
City los alamos	State NM	Zip Code 87544	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 350.00	
Name of Employer los alamos county		Occupation librarian	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Christine Martinez</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2012 <b>Transaction ID : SA11AI.12895</b>
Mailing Address 1263 Monument St			Amount of Each Receipt this Period 50.00
City Pacific palisades	State CA	Zip Code 90272	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 300.00	
Name of Employer self		Occupation artist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Patricia Mays</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 19 / 2012 <b>Transaction ID : SA11AI.13302</b>
Mailing Address 120 Primrose			Amount of Each Receipt this Period 500.00
City San Antonio	State TX	Zip Code 78209	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 500.00	
Name of Employer Not employed at this time		Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	700.00
<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 11 OF 20  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**CATHOLICVOTE.ORG CANDIDATE FUND**

**A. Kara Miller**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 531 Affirmed Lane  
 City Milton State GA Zip Code 30004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer do not work Occupation homemaker  
 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  
 10 / 19 / 2012  
**Transaction ID : SA11AI.13120**  
 Amount of Each Receipt this Period  
**250.00**

**B. Georg Mueller**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 348 SE Walnut St. Apt. 3  
 City Hillsboro State OR Zip Code 97123  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Intel Occupation Manufacturing Technician  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2012  
**Transaction ID : SA11AI.12991**  
 Amount of Each Receipt this Period  
**1000.00**

**C. Peter Pillitteri**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 155 Roy Ct.  
 City Helena State AL Zip Code 35080  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CAI Occupation Accountant  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **225.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 20 / 2012  
**Transaction ID : SA11AI.13319**  
 Amount of Each Receipt this Period  
**100.00**

**SUBTOTAL** of Receipts This Page (optional)..... **1350.00**  
**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 12 OF 20  
(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)  
**CATHOLICVOTE.ORG CANDIDATE FUND**

**A. Melanie Quinn**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1513 Berenda Pl.  
City El Cajon State CA Zip Code 92020  
FEC ID number of contributing federal political committee. **C**  
Name of Employer John Paul the Great Catholic Universit Occupation Librarian  
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  
10 / 20 / 2012  
**Transaction ID : SA11Al.13260**  
Amount of Each Receipt this Period  
50.00

**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).....▶	50.00
<b>TOTAL</b> This Period (last page this line number only).....▶	104060.00

**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

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)  
**CATHOLICVOTE.ORG CANDIDATE FUND**

Full Name (Last, First, Middle Initial)

**A. JP Morgan Chase Bank**

Mailing Address 10 S Dearborn

City Chicago State IL Zip Code 60603

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.12790**

Amount of Each Disbursement this Period

1079.23

Full Name (Last, First, Middle Initial)

**B. PayPal**

Mailing Address 2211 N. 1st St

City San Jose State CA Zip Code 95131

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.12791**

Amount of Each Disbursement this Period

89.65

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

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

1168.88

1168.88

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>CATHOLICVOTE.ORG CANDIDATE FUND</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00494021
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 <b>American Majority Action</b>		Date MM / DD / YYYY <b>10 / 26 / 2012</b>
Mailing Address <b>PO Box 309</b>		Amount <b>2250.00</b>
City <b>Purcellville</b>	State      Zip Code <b>VA              20134</b>	
Purpose of Expenditure <b>Mailer</b>	Category/Type <b>004</b>	Transaction ID : <b>SE.12754</b>
Name of Federal Candidate Supported or Opposed by Expenditure: <b>MITT ROMNEY</b>		Office Sought: <input type="checkbox"/> House      State: <b>FL</b> <input type="checkbox"/> Senate      District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <b>2250.00</b>		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 <b>American Majority Action</b>		Date MM / DD / YYYY <b>10 / 26 / 2012</b>
Mailing Address <b>PO Box 309</b>		Amount <b>2250.00</b>
City <b>Purcellville</b>	State      Zip Code <b>VA              20134</b>	
Purpose of Expenditure <b>Mailer</b>	Category/Type <b>004</b>	Transaction ID : <b>SE.12756</b>
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BILL NELSON</b>		Office Sought: <input type="checkbox"/> House      State: <b>FL</b> <input type="checkbox"/> Senate      District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <b>4500.00</b>		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) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>4500.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	
(c) <b>TOTAL</b> 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.

*Joshua O Mercer*

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

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>CATHOLICVOTE.ORG CANDIDATE FUND</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00494021
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 <b>Capitol Promotions</b>		Date MM / DD / YYYY <b>10 / 26 / 2012</b>
Mailing Address <b>PO Box 231</b>		Amount <b>1000.00</b>
City <b>Glenside</b>	State <b>PA</b>	
Zip Code <b>19038</b>	<b>Transaction ID : SE.12758</b>	
Purpose of Expenditure <b>Lawn signs</b>	Category/Type <b>004</b>	Office Sought: <input type="checkbox"/> House    State: <b>PA</b> <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>TOM SMITH</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>1000.00</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Facebook</b>		Date MM / DD / YYYY <b>11 / 03 / 2012</b>
Mailing Address <b>156 University Ave</b>		Amount <b>433.65</b>
City <b>Palo Alto</b>	State <b>CA</b>	
Zip Code <b>94301</b>	<b>Transaction ID : SE.12778</b>	
Purpose of Expenditure <b>Online ads</b>	Category/Type <b>004</b>	Office Sought: <input type="checkbox"/> House    State: _____ <input type="checkbox"/> Senate    District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>MITT ROMNEY</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>38393.00</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<b>1433.65</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> 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.

*Joshua O Mercer*  
Signature \_\_\_\_\_ [Electronically Filed] Date **01 / 31 / 2013**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>CATHOLICVOTE.ORG CANDIDATE FUND</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00494021
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 <b>Facebook</b>		Date MM / DD / YYYY <b>11 / 05 / 2012</b>
Mailing Address <b>156 University Ave</b>		Amount <b>82.79</b>
City <b>Palo Alto</b>	State <b>CA</b>	
Zip Code <b>94301</b>	<b>Transaction ID : SE.12784</b>	
Purpose of Expenditure <b>Online ads</b>	Category/ Type <b>004</b>	Office Sought: <input type="checkbox"/> House    State: <b>WI</b> <input type="checkbox"/> Senate    District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>MITT ROMNEY</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>70237.85</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee <b>Google</b>		Date MM / DD / YYYY <b>10 / 29 / 2012</b>
Mailing Address <b>1600 Amphitheatre Pkwy</b>		Amount <b>1115.00</b>
City <b>Mountain View</b>	State <b>CA</b>	
Zip Code <b>94043</b>	<b>Transaction ID : SE.12765</b>	
Purpose of Expenditure <b>Online ads</b>	Category/ Type <b>004</b>	Office Sought: <input type="checkbox"/> House    State: <b>WI</b> <input type="checkbox"/> Senate    District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>50874.91</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>1197.79</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	
(c) <b>TOTAL</b> 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.

*Joshua O Mercer*

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





**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>CATHOLICVOTE.ORG CANDIDATE FUND</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00494021
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 <b>Mail Haus</b>		Date MM / DD / YYYY <b>10 / 29 / 2012</b>
Mailing Address <b>1745 Suburban Dr</b>		Amount <b>10000.00</b>
City <b>De Pere</b>	State <b>WI</b>	
Zip Code <b>54115</b>	<b>Transaction ID : SE.12767</b>	
Purpose of Expenditure <b>Mailer</b>	Category/ Type <b>004</b>	Office Sought: <input type="checkbox"/> House    State: <b>IN</b> <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>RICHARD E MOURDOCK</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>10000.00</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Spirit Juice Studios</b>		Date MM / DD / YYYY <b>10 / 29 / 2012</b>
Mailing Address <b>P.O. Box 557649</b>		Amount <b>9000.00</b>
City <b>Chicago</b>	State <b>IL</b>	
Zip Code <b>60655</b>	<b>Transaction ID : SE.12770</b>	
Purpose of Expenditure <b>Video production</b>	Category/ Type <b>004</b>	Office Sought: <input type="checkbox"/> House    State: <b>WI</b> <input type="checkbox"/> Senate    District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>MITT ROMNEY</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>59874.91</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<b>19000.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> 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.

*Joshua O Mercer*

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

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>CATHOLICVOTE.ORG CANDIDATE FUND</b>		FEC IDENTIFICATION NUMBER <b>C</b> C00494021
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		MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee <b>Spirit Juice Studios</b>		Date MM / DD / YYYY 10 / 30 / 2012
Mailing Address P.O. Box 557649		Amount 9000.00
City Chicago	State IL	Zip Code 60655
Purpose of Expenditure Video production	Category/ Type 004	Transaction ID : <b>SE.12775</b>
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: WI District: _____
Calendar Year-To-Date Per Election for Office Sought 68874.91		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 <b>Time Warner Cable</b>		Date MM / DD / YYYY 10 / 18 / 2012
Mailing Address 3520 E. Destination Drive		Amount 20534.00
City Appleton	State WI	Zip Code 54915
Purpose of Expenditure TV ad	Category/ Type 004	Transaction ID : <b>SE.11888</b>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: WI District: _____
Calendar Year-To-Date Per Election for Office Sought 37551.91		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) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	29534.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> 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.

*Joshua O Mercer*

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

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>CATHOLICVOTE.ORG CANDIDATE FUND</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00494021
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 <b>Time Warner Cable Media</b>		Date MM / DD / YYYY <b>10 / 23 / 2012</b>
Mailing Address 1320 N Martin Luther King Jr. Dr		Amount <b>12208.00</b>
City Milwaukee	State WI	
Zip Code 53212	<b>Transaction ID : SE.11895</b>	
Purpose of Expenditure TV ad	Category/ Type <b>004</b>	Office Sought: <input type="checkbox"/> House    State: <u>WI</u> <input type="checkbox"/> Senate    District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>49759.91</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>WOOD TV</b>		Date MM / DD / YYYY <b>10 / 18 / 2012</b>
Mailing Address 120 College Ave SE		Amount <b>23587.50</b>
City Grand Rapids	State MI	
Zip Code 49503	<b>Transaction ID : SE.11890</b>	
Purpose of Expenditure TV ads	Category/ Type <b>004</b>	Office Sought: <input type="checkbox"/> House    State: <u>MI</u> <input type="checkbox"/> Senate    District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>106477.50</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<b>35795.50</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures.....	<b>93491.09</b>

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.

*Joshua O Mercer*

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