

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5  
**PATRIOT VOICES PAC**

ADDRESS (number and street) 315 Foxtail Lane  
 Check if different than previously reported. (ACC) Spring City PA 19475

2. **FEC IDENTIFICATION NUMBER** C C00528307 **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 M M / D D / Y Y Y Y Y Y in the State of    
(d) 30-Day **POST-Election** Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on M M / D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y Y Y 11 / 27 / 2012 through 12 / 31 / 2012

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

Type or Print Name of Treasurer Nadine Maenza

Signature of Treasurer Nadine Maenza *[Electronically Filed]* Date M M / D D / Y Y Y Y Y Y 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

**PATRIOT VOICES PAC**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="229427.43"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="169503.12"/>	<input type="text" value="904633.04"/>
(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="398930.55"/>	<input type="text" value="904633.04"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="104431.73"/>	<input type="text" value="610134.22"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="294498.82"/>	<input type="text" value="294498.82"/>
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="108207.48"/>	

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  
**PATRIOT VOICES PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y 11 / 27 / 2012 To: M M / D D / Y Y Y Y 12 / 31 / 2012

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).....	5000.00	58380.00
(ii) Unitemized .....	1055.00	77106.77
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	6055.00	135486.77
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	6055.00	140486.77
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	439.15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	163448.12	763707.12
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))..... ▶	169503.12	904633.04
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	169503.12	904633.04

**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 .....	8425.60	56604.84
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	8425.60	56604.84
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	20284.56
24. Independent Expenditures (use Schedule E) .....	14111.35	79900.68
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 .....	81894.78	453344.14
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)) ..	104431.73	610134.22
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	104431.73	610134.22

**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) .....	6055.00	140486.77
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6055.00	140486.77
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	8425.60	56604.84
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	439.15
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	8425.60	56165.69

**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 67  
(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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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)  
**PATRIOT VOICES PAC**

**A. MR. DONALD SUMMERS**  
Full Name (Last, First, Middle Initial)  
Mailing Address 801 FRONTAGE ROAD  
APARTMENT 204  
City OXFORD State MS Zip Code 38655-5124  
FEC ID number of contributing federal political committee. C  
Name of Employer UNIVERSITY OF MISSISSIPPI Occupation PROFESSOR  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 5000.00

Date of Receipt 11 / 27 / 2012  
Transaction ID : SA11.13318  
Amount of Each Receipt this Period 5000.00  
CONTRIBUTION

**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  
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  
Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5000.00
<b>TOTAL</b> This Period (last page this line number only).....	5000.00

**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 67
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PATRIOT VOICES PAC**

**A. MR. DAVID J. BATLUCK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17 MULLIGAN DR.  
 City READING State PA Zip Code 19606-9053  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PHYCISION Occupation TEACHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 24 / 2012  
**Transaction ID : SA11.19897**  
 Amount of Each Receipt this Period 200.00  
 CONTRIBUTION  
 NON CONTRIBUTION ACCOUNT

**B. MS. SHEILA BEAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15318 EAGLEBROOK ST.  
 City SAN ANTONIO State TX Zip Code 78232-4204  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SAN ANTONIO AVIATION Occupation SUPERVISOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 11 / 2012  
**Transaction ID : SA11.19723**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION  
 NON CONTRIBUTION ACCOUNT

**C. MS. GEORGIANA H. BRAINARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13236 MOLITOR CT  
 City HUDSON State FL Zip Code 34669-2401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 14 / 2012  
**Transaction ID : SA11.17901**  
 Amount of Each Receipt this Period 500.00  
 CONTRIBUTION  
 NON CONTRIBUTION ACCOUNT

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	800.00
<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 67
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PATRIOT VOICES PAC**

Full Name (Last, First, Middle Initial) <b>A. MR. JIM EVANS</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 10 / 2012
Mailing Address P.O. BOX 27409		<b>Transaction ID : SA11.19724</b>
City OMAHA	State NE	Zip Code 68127-8237
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer CLEAN COUNTRY	Occupation SALES MANAGER	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	NON CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial) <b>B. MR. CHARLES L. HAMMOND</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 18 / 2012
Mailing Address 404 STEVENSON ST		<b>Transaction ID : SA11.17789</b>
City SAYRE	State PA	Zip Code 18840-1747
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	NON CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial) <b>C. MR. FRED C. HARTEIS</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 07 / 2012
Mailing Address 7955 JONESTOWN RD		<b>Transaction ID : SA11.19935</b>
City HARRISBURG	State PA	Zip Code 17112-9728
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer CONSULTANT	Occupation HARTEIS INTERNATIONAL INC.	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	NON CONTRIBUTION ACCOUNT

<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: (check only one)	PAGE 9 OF 67
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PATRIOT VOICES PAC**

Full Name (Last, First, Middle Initial) <b>A. MR. WESLEY W. HOOLEY</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 17 / 2012
Mailing Address 26961 INDIAN COVE LANE		<b>Transaction ID : SA11.19919</b>
City HAMMETT	State ID	Zip Code 83627-2414
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	NON CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial) <b>B. MR. LEWIS C. HUDSON JR.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 05 / 2012
Mailing Address 10208 PORTLAND RD		<b>Transaction ID : SA11.17811</b>
City SILVER SPRING	State MD	Zip Code 20901-2022
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	NON CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial) <b>C. TERRY GAYLE JOBST</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 13 / 2012
Mailing Address 1039 30TH STREET		<b>Transaction ID : SA11.19934</b>
City DEXTER	State IA	Zip Code 50070
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer SELF EMPLOYED MINISTER OF THE GOSPE	Occupation CLERGY	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	NON CONTRIBUTION ACCOUNT

<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: (check only one)	PAGE 10 OF 67
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PATRIOT VOICES PAC**

**A. MS. BARBARA KOZLOWSKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 242 SEABURY RD  
 City BOLINGBROOK State IL Zip Code 60440-2412  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation LIBRARIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 21 / 2012  
**Transaction ID : SA11.18171**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION  
 NON CONTRIBUTION ACCOUNT

**B. MR. DENIS LARRIVEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 224 BEAVER RUN LN  
 City WILLIAMSTON State SC Zip Code 29697-8267  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation WRITER/PROFESSOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 12 / 21 / 2012  
**Transaction ID : SA11.19620**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION  
 NON CONTRIBUTION ACCOUNT

**C. MS. KATHLEEN M. LUND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1285 CLUB HOUSE DR  
 City PASADENA State CA Zip Code 91105-2728  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ALAN LUND COMPANY Occupation EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 12 / 26 / 2012  
**Transaction ID : SA11.17708**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION  
 NON CONTRIBUTION ACCOUNT

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<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 11 OF 67
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PATRIOT VOICES PAC**

Full Name (Last, First, Middle Initial) <b>A. MS. PATRICIA C. MORRIS</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2012
Mailing Address P.O. BOX 991		<b>Transaction ID : SA11.19932</b>
City LITTLETON	State NC	Zip Code 27850-0991
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer R. N.	Occupation SALES	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	NON CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial) <b>B. MR. GEORGE PEARSON</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 06 / 2012
Mailing Address 5261 HIGHLAND RD. #360		<b>Transaction ID : SA11.19933</b>
City BATON ROUGE	State LA	Zip Code 70808-6547
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer DIAMOND OFF SHORE	Occupation ELECTRICIAN	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	NON CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial) <b>C. MS. CAROL A. ROEBER</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 10 / 2012
Mailing Address 6103 N PARK VIEW LN		<b>Transaction ID : SA11.19888</b>
City SPOKANE	State WA	Zip Code 99205-7701
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer NURSE	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	NON CONTRIBUTION ACCOUNT

<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 12 OF 67  
(check only one)

<input 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 checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**PATRIOT VOICES PAC**

**A. MR. CHRISTIAN J. TREFZ**  
Full Name (Last, First, Middle Initial)

Mailing Address 21 BURRITTS LANDING SOUTH

City WESTPORT State CT Zip Code 06880-6443

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

Name of Employer TREFZ CORPORTATION Occupation EXECUTIVE

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  
 12 / 20 / 2012

Transaction ID : SA11.19931

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**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).....▶	3450.00

**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)  
**PATRIOT VOICES PAC**

Full Name (Last, First, Middle Initial)

**A. NADINE MAENZA**

Mailing Address 315 FOXTAIL LANE

City SPRING CITY State PA Zip Code 19475

Purpose of Disbursement  
PAC MGMT & FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District: 00

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 20 / 2012

Transaction ID : SB21B.I209

Amount of Each Disbursement this Period

2450.00

Full Name (Last, First, Middle Initial)

**B. WANDA MINKER**

Mailing Address 371 SPRUCE STREET

City POTTSTOWN State PA Zip Code 19464

Purpose of Disbursement  
PAC CONSULTING/EXP REIMB: SEE MEMOS

Candidate Name

Office Sought:  House  Senate  President  
State: District: 00

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 05 / 2012

Transaction ID : SB21B.I239

Amount of Each Disbursement this Period

674.84

Full Name (Last, First, Middle Initial)

**C. WANDA MINKER**

Mailing Address 371 SPRUCE STREET

City POTTSTOWN State PA Zip Code 19464

Purpose of Disbursement  
PAC ADMINSTRATIVE CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District: 00

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 05 / 2012

Transaction ID : SB21B.I240

Amount of Each Disbursement this Period

403.00

[MEMO ITEM]

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

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

3124.84

**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)  
**PATRIOT VOICES PAC**

Full Name (Last, First, Middle Initial)  
**A. WANDA MINKER**

Date of Disbursement:  /  /

Mailing Address **371 SPRUCE STREET**

City **POTTSTOWN** State **PA** Zip Code **19464**

Purpose of Disbursement **PAC MILEAGE**

Candidate Name

Office Sought:  House  Senate  President  
State: District: **00**

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID : **SB21B.I241**

Amount of Each Disbursement this Period:

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)  
**B. COVENTRY MALL MERCHANTS ASSOC.**

Date of Disbursement:  /  /

Mailing Address **351 W SCHUYLKILL**

City **POTTSTOWN** State **PA** Zip Code **19465**

Purpose of Disbursement **PAC POSTAGE**

Candidate Name

Office Sought:  House  Senate  President  
State: District: **00**

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID : **SB21B.I208**

Amount of Each Disbursement this Period:

**[MEMO ITEM]**

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

Date of Disbursement:  /  /

Mailing Address **270 UPLAND SQUARE DRIVE**

City **POTTSTOWN** State **PA** Zip Code **19464**

Purpose of Disbursement **PAC OFFICE SUPPLIES**

Candidate Name

Office Sought:  House  Senate  President  
State: District: **00**

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID : **SB21B.I206**

Amount of Each Disbursement this Period:

**[MEMO ITEM]**

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

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

**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)  
**PATRIOT VOICES PAC**

Full Name (Last, First, Middle Initial)

**A. US POSTAL SERVICE**

Mailing Address

City SPRING CITY State PA Zip Code 19475

Purpose of Disbursement  
PAC POSTAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District: 00

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 05 / 2012

Transaction ID : SB21B.I243

Amount of Each Disbursement this Period

39.06

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. SHERIDAN MURPHY**

Mailing Address 5434 SCHUMACHER LANE

City HOUSTON State TX Zip Code 77056

Purpose of Disbursement  
PAC GRASSROOTS CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District: 00

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 21 / 2012

Transaction ID : SB21B.I246

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

**C. AMERICAN EXPRESS**

Mailing Address P.O. BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement  
PAC CREDIT CARD & MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District: 00

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 05 / 2012

Transaction ID : SB21B.I2188

Amount of Each Disbursement this Period

87.06

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

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

837.06

**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)  
**PATRIOT VOICES PAC**

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS**

Mailing Address P.O. BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement  
PAC CREDIT CARD & MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District: 00

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 05 / 2012

**Transaction ID : SB21B.I21889**

Amount of Each Disbursement this Period

0.87

Full Name (Last, First, Middle Initial)

**B. CHAIN BRIDGE BANK**

Mailing Address 1445 A LAUGHLIN AVENUE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement  
PAC BANK FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District: 00

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 30 / 2012

**Transaction ID : SB21B.I249**

Amount of Each Disbursement this Period

14.10

Full Name (Last, First, Middle Initial)

**C. CMDI**

Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement  
PAC EMAIL COMM/CONTRIB PROCESSING/DATA MGMT

Candidate Name

Office Sought:  House  Senate  President  
State: District: 00

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 28 / 2012

**Transaction ID : SB21B.I211**

Amount of Each Disbursement this Period

661.86

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

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

676.83



**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)  
**PATRIOT VOICES PAC**

Full Name (Last, First, Middle Initial)

**A. ELAVON**

Mailing Address ONE CONCOURSE PKWY

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement  
PAC CREDIT CARD & MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 03 / 2012

Transaction ID : SB21B.I214

Amount of Each Disbursement this Period

11.04

Full Name (Last, First, Middle Initial)

**B. ELAVON**

Mailing Address ONE CONCOURSE PKWY

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement  
PAC CREDIT CARD & MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 03 / 2012

Transaction ID : SB21B.I252

Amount of Each Disbursement this Period

718.95

Full Name (Last, First, Middle Initial)

**C. KOCH & HOOS LLC**

Mailing Address 901 N WASHINGTON STREET  
SUITE 700

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
PAC ACCOUNTING/COMPLIANCE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 28 / 2012

Transaction ID : SB21B.I248

Amount of Each Disbursement this Period

3031.88

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

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

3761.87

**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)  
**PATRIOT VOICES PAC**

Full Name (Last, First, Middle Initial)

**A. PNC**

Mailing Address 825 N. WASHINGTON STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
PAC BANK FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

**Transaction ID : SB21B.I253**

Amount of Each Disbursement this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

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

**C.**

Full Name (Last, First, Middle Initial)

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)..... ▶

25.00

8425.60

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**PATRIOT VOICES PAC**

Full Name (Last, First, Middle Initial)

**A. CUCCINELLI FOR GOVERNOR**

Mailing Address 10560 MAIN STREET

City State Zip Code  
FAIRFAX VA 22030

Purpose of Disbursement  
InKind Contribution - Email Communication

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			28			2012			

Transaction ID : SB29.I2602

Amount of Each Disbursement this Period

1089.82
---------

**[MEMO ITEM]**  
NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

**B. CUCCINELLI FOR GOVERNOR**

Mailing Address 10560 MAIN STREET

City State Zip Code  
FAIRFAX VA 22030

Purpose of Disbursement  
InKind Contribution - Email Communication

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : SB29.I2603

Amount of Each Disbursement this Period

1084.59
---------

**[MEMO ITEM]**  
NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

**C. SHELLY AHLERSMEYER**

Mailing Address 1690 S. WALNUT DRIVE

City State Zip Code  
WARSAW IN 46580

Purpose of Disbursement  
PAC GRASSROOTS CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2012			

Transaction ID : SB29.I262

Amount of Each Disbursement this Period

2500.00
---------

NON-CONTRIBUTION ACCOUNT

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

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

2500.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**PATRIOT VOICES PAC**

Full Name (Last, First, Middle Initial)

**A. NADINE MAENZA**

Mailing Address 315 FOXTAIL LANE

City SPRING CITY State PA Zip Code 19475

Purpose of Disbursement  
PAC MGMT & FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 20 / 2012

Transaction ID : **SB29.I227**

Amount of Each Disbursement this Period

2550.00

NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

**B. WANDA MINKER**

Mailing Address 371 SPRUCE STREET

City POTTSTOWN State PA Zip Code 19464

Purpose of Disbursement  
PAC CONSULTING/EXP REIMB: SEE MEMOS

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Transaction ID : **SB29.I255**

Amount of Each Disbursement this Period

413.62

NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

**C. WANDA MINKER**

Mailing Address 371 SPRUCE STREET

City POTTSTOWN State PA Zip Code 19464

Purpose of Disbursement  
PAC ADMINSTRATIVE CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Transaction ID : **SB29.I256**

Amount of Each Disbursement this Period

247.00

**[MEMO ITEM]**  
NON-CONTRIBUTION ACCOUNT

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

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

2963.62

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**PATRIOT VOICES PAC**

Full Name (Last, First, Middle Initial)

**A. WANDA MINKER**

Mailing Address 371 SPRUCE STREET

City POTTSTOWN State PA Zip Code 19464

Purpose of Disbursement  
PAC MILEAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Transaction ID : SB29.I257

Amount of Each Disbursement this Period

45.60

**[MEMO ITEM]**  
NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

**B. COVENTRY MALL MERCHANTS ASSOC.**

Mailing Address 351 W SCHUYLKILL

City POTTSTOWN State PA Zip Code 19465

Purpose of Disbursement  
PAC POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Transaction ID : SB29.I260

Amount of Each Disbursement this Period

10.26

**[MEMO ITEM]**  
NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

**C. STAPLES**

Mailing Address 270 UPLAND SQUARE DRIVE

City POTTSTOWN State PA Zip Code 19464

Purpose of Disbursement  
PAC OFFICE SUPPLIES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Transaction ID : SB29.I258

Amount of Each Disbursement this Period

86.82

**[MEMO ITEM]**  
NON-CONTRIBUTION ACCOUNT

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

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

0.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**PATRIOT VOICES PAC**

Full Name (Last, First, Middle Initial)

**A. US POSTAL SERVICE**

Mailing Address

City SPRING CITY State PA Zip Code 19475

Purpose of Disbursement  
PAC POSTAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District: 00

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Transaction ID : SB29.I223

Amount of Each Disbursement this Period

23.94

**[MEMO ITEM]**  
NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

**B. SHERIDAN MURPHY**

Mailing Address 5434 SCHUMACHER LANE

City HOUSTON State TX Zip Code 77056

Purpose of Disbursement  
PAC GRASSROOTS CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District: 00

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Transaction ID : SB29.I228

Amount of Each Disbursement this Period

750.00

NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

**C. AMERICAN EXPRESS**

Mailing Address P.O. BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement  
PAC CREDIT CARD & MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District: 00

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 28 / 2012

Transaction ID : SB29.I234

Amount of Each Disbursement this Period

270.97

NON-CONTRIBUTION ACCOUNT

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

1020.97

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

**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 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 checked="" 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)  
**PATRIOT VOICES PAC**

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS**

Mailing Address P.O. BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement  
PAC CREDIT CARD & MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District: 00

Date of Disbursement

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

**Transaction ID : SB29.I268**

Amount of Each Disbursement this Period

36.39

NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

**B. BANK OF AMERICA**

Mailing Address 150 N. COLLEGE STREET

City CHARLOTTE State NC Zip Code 28202

Purpose of Disbursement  
PAC CREDIT CARD & MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District: 00

Date of Disbursement

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

**Transaction ID : SB29.I237**

Amount of Each Disbursement this Period

1081.22

NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

**C. CMDI**

Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement  
PAC EMAIL COMM/CONTRIB PROCESSING/DATA MGMT

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District: 00

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 28 / 2012

**Transaction ID : SB29.I265**

Amount of Each Disbursement this Period

7672.83

NON-CONTRIBUTION ACCOUNT

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

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

8790.44

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**PATRIOT VOICES PAC**

Full Name (Last, First, Middle Initial)

**A. COLON & COMPANY**

Mailing Address 3405 EDLOE STREET  
SUITE 205A

City HOUSTON State TX Zip Code 77026

Purpose of Disbursement  
PAC GRASSROOTS CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 18 / 2012

Transaction ID : SB29.I225

Amount of Each Disbursement this Period

6000.00

NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

**B. ELAVON**

Mailing Address ONE CONCOURSE PKWY

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement  
PAC CREDIT CARD & MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Transaction ID : SB29.I267

Amount of Each Disbursement this Period

52.30

NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

**C. INFOCISION MANAGEMENT CORP**

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement  
PAC TELEMARKETING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 26 / 2012

Transaction ID : SB29.I269

Amount of Each Disbursement this Period

57341.65

NON-CONTRIBUTION ACCOUNT

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

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

63393.95



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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**PATRIOT VOICES PAC**

Full Name (Last, First, Middle Initial)

**A. KOCH & HOOS LLC**

Mailing Address 901 N WASHINGTON STREET  
SUITE 700

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
PAC ACCOUNTING/COMPLIANCE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 28 / 2012

Transaction ID : SB29.I230

Amount of Each Disbursement this Period

3155.62

NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

**B.**

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

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)..... ▶

3155.62

81824.60

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 26 OF 67
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**PATRIOT VOICES PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>INFOCISION MANAGEMENT CORP</b>	Nature of Debt (Purpose): PAC TELEMARKETING
Mailing Address 325 SPRINGSIDE DRIVE	
City State Zip Code AKRON OH 44333	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.505</b>	
Amount Incurred This Period 96697.75	Payment This Period 0.00	Outstanding Balance at Close of This Period 96697.75

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>HSP Direct</b>	Nature of Debt (Purpose): DIRECT MAIL
Mailing Address 13755 SUNRISE VALLEY DRIVE SUITE 450	
City State Zip Code HERNDON VA 20171	

Outstanding Balance Beginning This Period 1401.86	<b>Transaction ID : SD10.500</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1401.86

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CMDI</b>	Nature of Debt (Purpose): BLAST EMAIL/EMAIL COMMUNICATION
Mailing Address 7704 LEESBURG PIKE	
City State Zip Code FALLS CHURCH VA 22043	

Outstanding Balance Beginning This Period 15935.17	<b>Transaction ID : SD10.501</b>	
Amount Incurred This Period 358.22	Payment This Period 15935.17	Outstanding Balance at Close of This Period 358.22

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	98457.83
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 27 OF 67
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**PATRIOT VOICES PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>INFOCISION MANAGEMENT CORP</b>	Nature of Debt (Purpose): IE TELEPHONE COMMUNICATION
Mailing Address 325 SPRINGSIDE DRIVE	
City State Zip Code AKRON OH 44333	

Outstanding Balance Beginning This Period <input type="text" value="9749.65"/>	<b>Transaction ID : SD10.502</b>	
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="9749.65"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT, LLC</b>	Nature of Debt (Purpose): EMAIL COMMUNICATION
Mailing Address 44084 RIVERSIDE PARKWAY SUITE 350	
City State Zip Code LANSDOWN VA 20176	

Outstanding Balance Beginning This Period <input type="text" value="1000.00"/>	<b>Transaction ID : SD10.503</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1000.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>COLON &amp; COMPANY</b>	Nature of Debt (Purpose): LIST EXPENSE
Mailing Address 3405 EDLOE STREET SUITE 205A	
City State Zip Code HOUSTON TX 77026	

Outstanding Balance Beginning This Period <input type="text" value="4661.58"/>	<b>Transaction ID : SD10.504</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="4661.58"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="9749.65"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="108207.48"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="108207.48"/>

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

NAME OF COMMITTEE (In Full) <b>PATRIOT VOICES PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00528307
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>CMDI</b> NON CONTRIBUTION ACCOUNT		Date MM / DD / YYYY <b>12 / 28 / 2012</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <b>1046.54</b>
City <b>FALLS CHURCH</b>	State <b>VA</b>	
Zip Code <b>22043</b>	<b>Transaction ID : SE24.508</b>	
Purpose of Expenditure <b>10/9 Blast Emails</b>	Category/ Type <b>000</b>	Office Sought: <input type="checkbox"/> House    State: <b>MO</b> <input checked="" type="checkbox"/> Senate    District: <b>00</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Todd Akin</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>4548.97</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>CMDI</b> NON CONTRIBUTION ACCOUNT		Date MM / DD / YYYY <b>12 / 28 / 2012</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <b>113.86</b>
City <b>FALLS CHURCH</b>	State <b>VA</b>	
Zip Code <b>22043</b>	<b>Transaction ID : SE24.513</b>	
Purpose of Expenditure <b>10/31 EMAIL COMMUNICATION</b>	Category/ Type <b>000</b>	Office Sought: <input type="checkbox"/> House    State: <b>MO</b> <input checked="" type="checkbox"/> Senate    District: <b>00</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Todd Akin</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>4548.97</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>1160.40</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.

*Nadine Maenza*  
Signature

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

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

NAME OF COMMITTEE (In Full) <b>PATRIOT VOICES PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black;">C</span> C00528307       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>CMDI</b> NON CONTRIBUTION ACCOUNT		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 0.8em;">M M M</span> / <span style="font-size: 0.8em;">D D D</span> / <span style="font-size: 0.8em;">Y Y Y Y Y Y</span>          12 / 28 / 2012       </div>
Mailing Address 7704 LEESBURG PIKE		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> <span style="float: right;">2.02</span> </div>
City FALLS CHURCH      State VA      Zip Code 22043	<b>Transaction ID : SE24.537</b>	
Purpose of Expenditure 11/5 EMAIL COMMUNICATION	Category/Type <span style="border: 1px solid black; padding: 2px;">000</span>	Office Sought: <input type="checkbox"/> House      State: MO <input checked="" type="checkbox"/> Senate      District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Todd Akin		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4548.97</span>		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>CMDI</b> NON CONTRIBUTION ACCOUNT		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 0.8em;">M M M</span> / <span style="font-size: 0.8em;">D D D</span> / <span style="font-size: 0.8em;">Y Y Y Y Y Y</span>          12 / 28 / 2012       </div>
Mailing Address 7704 LEESBURG PIKE		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> <span style="float: right;">113.86</span> </div>
City FALLS CHURCH      State VA      Zip Code 22043		<b>Transaction ID : SE24.519</b>
Purpose of Expenditure 10/31 EMAIL COMMUNICATION	Category/Type <span style="border: 1px solid black; padding: 2px;">000</span>	Office Sought: <input type="checkbox"/> House      State: VA <input checked="" type="checkbox"/> Senate      District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: George Allen		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">471.76</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> <span style="float: right;">115.88</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> <span style="float: right;"> </span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> <span style="float: right;"> </span> </div>

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

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

Signature

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

NAME OF COMMITTEE (In Full) <b>PATRIOT VOICES PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00528307
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>CMDI</b> NON CONTRIBUTION ACCOUNT		Date MM / DD / YYYY <b>12 / 28 / 2012</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <b>7.06</b>
City <b>FALLS CHURCH</b>	State      Zip Code <b>VA              22043</b>	
Purpose of Expenditure <b>11/5 EMAIL COMMUNICATION</b>	Category/Type <b>000</b>	Office Sought: <input type="checkbox"/> House      State: <b>VA</b> <input checked="" type="checkbox"/> Senate      District: <b>00</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>George Allen</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>471.76</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

**Transaction ID : SE24.549**

Full Name (Last, First, Middle Initial) of Payee <b>CMDI</b> NON CONTRIBUTION ACCOUNT		Date MM / DD / YYYY <b>12 / 28 / 2012</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <b>78.56</b>
City <b>FALLS CHURCH</b>	State      Zip Code <b>VA              22043</b>	
Purpose of Expenditure <b>11/3 EMAIL COMMUNICATION</b>	Category/Type <b>000</b>	Office Sought: <input checked="" type="checkbox"/> House      State: <b>IA</b> <input type="checkbox"/> Senate      District: <b>02</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>John Archer</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>351.72</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

**Transaction ID : SE24.531**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>85.62</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.

*Nadine Maenza*  
Signature

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

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

NAME OF COMMITTEE (In Full) <b>PATRIOT VOICES PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black;">C</span> C00528307       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>CMDI</b> NON CONTRIBUTION ACCOUNT		Date <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 0.8em;">M M M</span> / <span style="font-size: 0.8em;">D D D</span> / <span style="font-size: 0.8em;">Y Y Y Y Y Y</span>          12 / 28 / 2012       </div>
Mailing Address 7704 LEESBURG PIKE		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 0.8em;">. . . . .</span> 1.31       </div>
City State Zip Code FALLS CHURCH VA 22043	<b>Transaction ID : SE24.540</b>	
Purpose of Expenditure 11/5 EMAIL COMMUNICATION	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;"> <span style="font-size: 0.8em;">. . . . .</span> 000       </div>	Office Sought: <input checked="" type="checkbox"/> House    State: IA <input type="checkbox"/> Senate    District: 02 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: John Archer		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 0.8em;">. . . . .</span> 351.72       </div>		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>CMDI</b> NON CONTRIBUTION ACCOUNT		Date <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 0.8em;">M M M</span> / <span style="font-size: 0.8em;">D D D</span> / <span style="font-size: 0.8em;">Y Y Y Y Y Y</span>          12 / 28 / 2012       </div>
Mailing Address 7704 LEESBURG PIKE		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 0.8em;">. . . . .</span> 113.86       </div>
City State Zip Code FALLS CHURCH VA 22043		<b>Transaction ID : SE24.514</b>
Purpose of Expenditure 10/31 EMAIL COMMUNICATION	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;"> <span style="font-size: 0.8em;">. . . . .</span> 000       </div>	Office Sought: <input type="checkbox"/> House    State: ND <input checked="" type="checkbox"/> Senate    District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Berg		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 0.8em;">. . . . .</span> 428.00       </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 0.8em;">. . . . .</span> 115.17       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 0.8em;">. . . . .</span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 0.8em;">. . . . .</span> </div>

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

*Nadine Maenza*  
 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) <b>PATRIOT VOICES PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00528307
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>CMDI</b> NON CONTRIBUTION ACCOUNT		Date MM / DD / YYYY <b>12 / 28 / 2012</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <b>20.91</b>
City <b>FALLS CHURCH</b>	State <b>VA</b>	
Zip Code <b>22043</b>	<b>Transaction ID : SE24.538</b>	
Purpose of Expenditure <b>11/5 EMAIL COMMUNICATION</b>	Category/Type <b>000</b>	Office Sought: <input type="checkbox"/> House    State: <b>TX</b> <input checked="" type="checkbox"/> Senate    District: <b>00</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Ted Cruz</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>299.08</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>CMDI</b> NON CONTRIBUTION ACCOUNT		Date MM / DD / YYYY <b>12 / 28 / 2012</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <b>78.56</b>
City <b>FALLS CHURCH</b>	State <b>VA</b>	
Zip Code <b>22043</b>	<b>Transaction ID : SE24.525</b>	
Purpose of Expenditure <b>11/3 EMAIL COMMUNICATION</b>	Category/Type <b>000</b>	Office Sought: <input checked="" type="checkbox"/> House    State: <b>MT</b> <input type="checkbox"/> Senate    District: <b>01</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Steve Daines</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>329.08</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>99.47</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.

*Nadine Maenza*  
 Signature [Electronically Filed] Date **01 / 31 / 2013**

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

NAME OF COMMITTEE (In Full) <b>PATRIOT VOICES PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00528307
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>CMDI</b> NON CONTRIBUTION ACCOUNT		Date MM / DD / YYYY <b>12 / 28 / 2012</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <b>0.52</b>
City <b>FALLS CHURCH</b>	State <b>VA</b>	
Zip Code <b>22043</b>	<b>Transaction ID : SE24.551</b>	
Purpose of Expenditure <b>11/5 EMAIL COMMUNICATION</b>	Category/Type <b>000</b>	Office Sought: <input checked="" type="checkbox"/> House    State: <b>MT</b> <input type="checkbox"/> Senate    District: <b>01</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Steve Daines</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>329.08</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>CMDI</b> NON CONTRIBUTION ACCOUNT		Date MM / DD / YYYY <b>12 / 28 / 2012</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <b>113.86</b>
City <b>FALLS CHURCH</b>	State <b>VA</b>	
Zip Code <b>22043</b>	<b>Transaction ID : SE24.517</b>	
Purpose of Expenditure <b>10/31 EMAIL COMMUNICATION</b>	Category/Type <b>000</b>	Office Sought: <input type="checkbox"/> House    State: <b>NE</b> <input checked="" type="checkbox"/> Senate    District: <b>00</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Deb Fischer</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>366.17</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>114.38</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.

*Nadine Maenza*  
 Signature [Electronically Filed]    Date **01 / 31 / 2013**

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

NAME OF COMMITTEE (In Full) <b>PATRIOT VOICES PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00528307
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>CMDI</b> NON CONTRIBUTION ACCOUNT		Date MM / DD / YYYY <b>12 / 28 / 2012</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <b>2.31</b>
City <b>FALLS CHURCH</b>	State <b>VA</b>	
Zip Code <b>22043</b>	<b>Transaction ID : SE24.541</b>	
Purpose of Expenditure <b>11/5 EMAIL COMMUNICATION</b>	Category/Type <b>000</b>	Office Sought: <input type="checkbox"/> House    State: <b>NE</b> <input checked="" type="checkbox"/> Senate    District: <b>00</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Deb Fischer</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>366.17</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>CMDI</b> NON CONTRIBUTION ACCOUNT		Date MM / DD / YYYY <b>12 / 28 / 2012</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <b>78.56</b>
City <b>FALLS CHURCH</b>	State <b>VA</b>	
Zip Code <b>22043</b>	<b>Transaction ID : SE24.533</b>	
Purpose of Expenditure <b>11/3 EMAIL COMMUNICATION</b>	Category/Type <b>000</b>	Office Sought: <input checked="" type="checkbox"/> House    State: <b>MO</b> <input type="checkbox"/> Senate    District: <b>04</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Vicky Hartzler</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>366.98</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>80.87</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.

*Nadine Maenza*  
Signature

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

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

NAME OF COMMITTEE (In Full) <b>PATRIOT VOICES PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00528307
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>CMDI</b> NON CONTRIBUTION ACCOUNT		Date MM / DD / YYYY <b>12 / 28 / 2012</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <b>2.02</b>
City <b>FALLS CHURCH</b>	State <b>VA</b>	
Zip Code <b>22043</b>	<b>Transaction ID : SE24.535</b>	
Purpose of Expenditure <b>11/5 EMAIL COMMUNICATION</b>	Category/ Type <b>000</b>	Office Sought: <input checked="" type="checkbox"/> House    State: <b>MO</b> <input type="checkbox"/> Senate    District: <b>04</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Vicky Hartzler</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>366.98</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>CMDI</b> NON CONTRIBUTION ACCOUNT		Date MM / DD / YYYY <b>12 / 28 / 2012</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <b>113.86</b>
City <b>FALLS CHURCH</b>	State <b>VA</b>	
Zip Code <b>22043</b>	<b>Transaction ID : SE24.518</b>	
Purpose of Expenditure <b>10/31 EMAIL COMMUNICATION</b>	Category/ Type <b>000</b>	Office Sought: <input type="checkbox"/> House    State: <b>NV</b> <input checked="" type="checkbox"/> Senate    District: <b>00</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Dean Heller</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>435.41</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>115.88</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.

*Nadine Maenza*  
Signature

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Date **01 / 31 / 2013**



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

NAME OF COMMITTEE (In Full) <b>PATRIOT VOICES PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00528307
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>CMDI</b> NON CONTRIBUTION ACCOUNT		Date MM / DD / YYYY <b>12 / 28 / 2012</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <b>78.56</b>
City <b>FALLS CHURCH</b>	State <b>VA</b>	
Zip Code <b>22043</b>	<b>Transaction ID : SE24.521</b>	
Purpose of Expenditure <b>11/3 EMAIL COMMUNICATION</b>	Category/Type <b>000</b>	Office Sought: <input checked="" type="checkbox"/> House    State: <b>NC</b> <input type="checkbox"/> Senate    District: <b>08</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Richard Hudson</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>395.82</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>CMDI</b> NON CONTRIBUTION ACCOUNT		Date MM / DD / YYYY <b>12 / 28 / 2012</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <b>3.68</b>
City <b>FALLS CHURCH</b>	State <b>VA</b>	
Zip Code <b>22043</b>	<b>Transaction ID : SE24.557</b>	
Purpose of Expenditure <b>11/5 EMAIL COMMUNICATION</b>	Category/Type <b>000</b>	Office Sought: <input checked="" type="checkbox"/> House    State: <b>NC</b> <input type="checkbox"/> Senate    District: <b>08</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Richard Hudson</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>395.82</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>82.24</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.

*Nadine Maenza*  
Signature

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

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

NAME OF COMMITTEE (In Full) <b>PATRIOT VOICES PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00528307         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="float: right; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M M / D D D / Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee <b>CMDI</b> NON CONTRIBUTION ACCOUNT	Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M M / D D D / Y Y Y Y Y Y</div> </div>
Mailing Address 7704 LEESBURG PIKE	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">78.56</div> </div>
City State Zip Code FALLS CHURCH VA 22043	<b>Transaction ID : SE24.524</b>
Purpose of Expenditure 11/3 EMAIL COMMUNICATION	Office Sought: <input checked="" type="checkbox"/> House    State: IA <input type="checkbox"/> Senate    District: 04 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Steve King	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">351.72</div> </div>	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>CMDI</b> NON CONTRIBUTION ACCOUNT	Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M M / D D D / Y Y Y Y Y Y</div> </div>
Mailing Address 7704 LEESBURG PIKE	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">1.31</div> </div>
City State Zip Code FALLS CHURCH VA 22043	<b>Transaction ID : SE24.552</b>
Purpose of Expenditure 11/5 EMAIL COMMUNICATION	Office Sought: <input checked="" type="checkbox"/> House    State: IA <input type="checkbox"/> Senate    District: 04 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Steve King	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">351.72</div> </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">79.87</div> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> </div>
<b>(c) TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> </div>

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

*Nadine Maenza*  
 Signature

[Electronically Filed]    Date 

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

NAME OF COMMITTEE (In Full) <b>PATRIOT VOICES PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; border: 1px solid black; display: inline-block; width: 20px; height: 20px; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00528307</span> </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>CMDI</b> NON CONTRIBUTION ACCOUNT		Date <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>M M / D D / Y Y Y Y</span> </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>12 / 28 / 2012</span> </div>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">78.56</div>
City <b>FALLS CHURCH</b> State <b>VA</b> Zip Code <b>22043</b>		
Purpose of Expenditure <b>11/3 EMAIL COMMUNICATION</b>	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">000</div>	Office Sought: <input checked="" type="checkbox"/> House      State: <b>WA</b> <input type="checkbox"/> Senate      District: <b>01</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>John Koster</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">434.66</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

**Transaction ID : SE24.526**

Full Name (Last, First, Middle Initial) of Payee <b>CMDI</b> NON CONTRIBUTION ACCOUNT		Date <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>M M / D D / Y Y Y Y</span> </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>12 / 28 / 2012</span> </div>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">78.56</div>
City <b>FALLS CHURCH</b> State <b>VA</b> Zip Code <b>22043</b>		
Purpose of Expenditure <b>11/3 EMAIL COMMUNICATION</b>	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">000</div>	Office Sought: <input checked="" type="checkbox"/> House      State: <b>IA</b> <input type="checkbox"/> Senate      District: <b>01</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Ben Lange</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">351.72</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

**Transaction ID : SE24.530**

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">157.12</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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

*Nadine Maenza*  
 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) <b>PATRIOT VOICES PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00528307
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>CMDI</b>		Date MM / DD / YYYY <b>12 / 28 / 2012</b>
NON CONTRIBUTION ACCOUNT		Amount <b>1.31</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		
City <b>FALLS CHURCH</b>	State <b>VA</b>	Zip Code <b>22043</b>
Purpose of Expenditure <b>11/5 EMAIL COMMUNICATION</b>	Category/Type <b>000</b>	Office Sought: <input checked="" type="checkbox"/> House    State: <b>IA</b> <input type="checkbox"/> Senate    District: <b>01</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Ben Lange</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>351.72</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

**Transaction ID : SE24.543**

Full Name (Last, First, Middle Initial) of Payee <b>CMDI</b>		Date MM / DD / YYYY <b>12 / 28 / 2012</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <b>6.38</b>
City <b>FALLS CHURCH</b>		
State <b>VA</b>		Zip Code <b>22043</b>
Purpose of Expenditure <b>11/1 EMAIL COMMUNICATION</b>	Category/Type <b>000</b>	Office Sought: <input checked="" type="checkbox"/> House    State: <b>IA</b> <input type="checkbox"/> Senate    District: <b>03</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Tom Latham</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>86.25</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

**Transaction ID : SE24.504**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>7.69</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.

*Nadine Maenza*
[Electronically Filed]
Date

Signature **01 / 31 / 2013**

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

NAME OF COMMITTEE (In Full) <b>PATRIOT VOICES PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00528307
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 <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>CMDI</b> NON CONTRIBUTION ACCOUNT		Date M M M / D D D / Y Y Y Y Y Y <b>12 / 28 / 2012</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <b>78.56</b> <b>Transaction ID : SE24.532</b>
City <b>FALLS CHURCH</b>	State <b>VA</b>	
Zip Code <b>22043</b>	Purpose of Expenditure <b>11/3 EMAIL COMMUNICATION</b>	Office Sought: <input checked="" type="checkbox"/> House State: <b>IA</b> <input type="checkbox"/> Senate District: <b>03</b> <input type="checkbox"/> President
Category/Type <b>000</b>	Name of Federal Candidate Supported or Opposed by Expenditure: <b>Tom Latham</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) ▶
Calendar Year-To-Date Per Election for Office Sought <b>86.25</b>		2012

Full Name (Last, First, Middle Initial) of Payee <b>CMDI</b> NON CONTRIBUTION ACCOUNT		Date M M M / D D D / Y Y Y Y Y Y <b>12 / 28 / 2012</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <b>1.31</b> <b>Transaction ID : SE24.534</b>
City <b>FALLS CHURCH</b>	State <b>VA</b>	
Zip Code <b>22043</b>	Purpose of Expenditure <b>11/5 EMAIL COMMUNICATION</b>	Office Sought: <input checked="" type="checkbox"/> House State: <b>IA</b> <input type="checkbox"/> Senate District: <b>03</b> <input type="checkbox"/> President
Category/Type <b>000</b>	Name of Federal Candidate Supported or Opposed by Expenditure: <b>Tom Latham</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) ▶
Calendar Year-To-Date Per Election for Office Sought <b>86.25</b>		2012

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>79.87</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.

Signature Nadine Maenza [Electronically Filed] Date **01 / 31 / 2013**

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

NAME OF COMMITTEE (In Full) <b>PATRIOT VOICES PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00528307
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>CMDI</b> NON CONTRIBUTION ACCOUNT		Date MM / DD / YYYY <b>12 / 28 / 2012</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <b>7.32</b>
City <b>FALLS CHURCH</b>	State <b>VA</b>	
Zip Code <b>22043</b>	<b>Transaction ID : SE24.539</b>	
Purpose of Expenditure <b>11/5 EMAIL COMMUNICATION</b>	Category/ Type <b>000</b>	Office Sought: <input type="checkbox"/> House    State: <b>NY</b> <input checked="" type="checkbox"/> Senate    District: <b>00</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Wendy Long</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>344.17</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>CMDI</b> NON CONTRIBUTION ACCOUNT		Date MM / DD / YYYY <b>12 / 28 / 2012</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <b>78.56</b>
City <b>FALLS CHURCH</b>	State <b>VA</b>	
Zip Code <b>22043</b>	<b>Transaction ID : SE24.528</b>	
Purpose of Expenditure <b>11/3 EMAIL COMMUNICATION</b>	Category/ Type <b>000</b>	Office Sought: <input checked="" type="checkbox"/> House    State: <b>CO</b> <input type="checkbox"/> Senate    District: <b>02</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Kevin Lundberg</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>516.66</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>85.88</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.

*Nadine Maenza*  
Signature

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



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

NAME OF COMMITTEE (In Full) <b>PATRIOT VOICES PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00528307
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 <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>CMDI</b>		Date <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>12 / 28 / 2012</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <span style="margin-left: 20px;">1039.67</span>
City <b>FALLS CHURCH</b>	State <b>VA</b>	
Zip Code <b>22043</b>	<b>Transaction ID : SE24.503</b>	
Purpose of Expenditure <b>10/16 BLAST EMAILS</b>	Category/ Type <b>000</b>	Office Sought: <input type="checkbox"/> House State: <b>OH</b> <input checked="" type="checkbox"/> Senate District: <b>00</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Josh Mandel</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">16997.26</span>		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>CMDI</b>		Date <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>12 / 28 / 2012</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <span style="margin-left: 20px;">340.69</span>
City <b>FALLS CHURCH</b>	State <b>VA</b>	
Zip Code <b>22043</b>	<b>Transaction ID : SE24.506</b>	
Purpose of Expenditure <b>11/2 EMAIL COMMUNICATION</b>	Category/ Type <b>000</b>	Office Sought: <input type="checkbox"/> House State: <b>OH</b> <input checked="" type="checkbox"/> Senate District: <b>00</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Josh Mandel</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">16997.26</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="margin-left: 20px;">1380.36</span>
(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.

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

Signature

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

NAME OF COMMITTEE (In Full) <b>PATRIOT VOICES PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00528307</span> </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>CMDI</b> NON CONTRIBUTION ACCOUNT		Date <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 0.8em;">M M M / D D D / Y Y Y Y Y Y</span>  <span style="font-size: 1.2em; font-weight: bold;">12 / 28 / 2012</span> </div>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em; font-weight: bold;">1029.35</span> </div>
City <b>FALLS CHURCH</b> State <b>VA</b> Zip Code <b>22043</b>	<b>Transaction ID : SE24.510</b>	
Purpose of Expenditure <b>10/26 EMAIL COMMUNICATION</b>	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;"> <span style="font-size: 1.2em; font-weight: bold;">000</span> </div>	Office Sought: <input type="checkbox"/> House    State: <b>OH</b> <input checked="" type="checkbox"/> Senate    District: <b>00</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Josh Mandel</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em; font-weight: bold;">16997.26</span> </div>		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>CMDI</b> NON CONTRIBUTION ACCOUNT		Date <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 0.8em;">M M M / D D D / Y Y Y Y Y Y</span>  <span style="font-size: 1.2em; font-weight: bold;">12 / 28 / 2012</span> </div>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em; font-weight: bold;">113.85</span> </div>
City <b>FALLS CHURCH</b> State <b>VA</b> Zip Code <b>22043</b>	<b>Transaction ID : SE24.520</b>	
Purpose of Expenditure <b>10/31 EMAIL COMMUNICATION</b>	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;"> <span style="font-size: 1.2em; font-weight: bold;">000</span> </div>	Office Sought: <input type="checkbox"/> House    State: <b>OH</b> <input checked="" type="checkbox"/> Senate    District: <b>00</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Josh Mandel</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em; font-weight: bold;">16997.26</span> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em; font-weight: bold;">1143.20</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em; font-weight: bold;">0.00</span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em; font-weight: bold;">1143.20</span> </div>

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

*Nadine Maenza*  
 Signature
 

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



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

NAME OF COMMITTEE (In Full) <b>PATRIOT VOICES PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00528307</span> </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>CMDI</b> NON CONTRIBUTION ACCOUNT		Date <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span>  <span style="font-size: 1.2em; font-weight: bold;">12 / 28 / 2012</span> </div>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em; font-weight: bold;">3.68</span> </div>
City <b>FALLS CHURCH</b>	State <b>VA</b> Zip Code <b>22043</b>	
Purpose of Expenditure <b>11/5 EMAIL COMMUNICATION</b>	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;"><b>000</b></div>	Office Sought: <input checked="" type="checkbox"/> House    State: <b>NC</b> <input type="checkbox"/> Senate    District: <b>11</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Mark Meadows</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em; font-weight: bold;">395.82</span> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

**Transaction ID : SE24.555**

Full Name (Last, First, Middle Initial) of Payee <b>CMDI</b> NON CONTRIBUTION ACCOUNT		Date <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span>  <span style="font-size: 1.2em; font-weight: bold;">12 / 28 / 2012</span> </div>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em; font-weight: bold;">113.85</span> </div>
City <b>FALLS CHURCH</b>	State <b>VA</b> Zip Code <b>22043</b>	
Purpose of Expenditure <b>10/31 EMAIL COMMUNICATION</b>	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;"><b>000</b></div>	Office Sought: <input type="checkbox"/> House    State: <b>IN</b> <input checked="" type="checkbox"/> Senate    District: <b>00</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Richard Murdock</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em; font-weight: bold;">432.46</span> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

**Transaction ID : SE24.515**

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em; font-weight: bold;">117.53</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em; font-weight: bold;">0.00</span> </div>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em; font-weight: bold;">117.53</span> </div>

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

*Nadine Maenza*  
 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) <b>PATRIOT VOICES PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00528307</span> </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>CMDI</b> NON CONTRIBUTION ACCOUNT		Date <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 0.8em;">M M M / D D D / Y Y Y Y Y Y</span>  <span style="font-size: 1.2em; font-weight: bold;">12 / 28 / 2012</span> </div>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em; font-weight: bold;">4.37</span> </div>
City <b>FALLS CHURCH</b> State <b>VA</b> Zip Code <b>22043</b>		
Purpose of Expenditure <b>11/5 EMAIL COMMUNICATION</b>	Category/Type <span style="border: 1px solid black; padding: 2px;"><b>000</b></span>	Office Sought: <input type="checkbox"/> House    State: <b>IN</b> <input checked="" type="checkbox"/> Senate    District: <b>00</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Richard Murdock</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em; font-weight: bold;">432.46</span> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

**Transaction ID : SE24.558**

Full Name (Last, First, Middle Initial) of Payee <b>CMDI</b> NON CONTRIBUTION ACCOUNT		Date <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 0.8em;">M M M / D D D / Y Y Y Y Y Y</span>  <span style="font-size: 1.2em; font-weight: bold;">12 / 28 / 2012</span> </div>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em; font-weight: bold;">78.56</span> </div>
City <b>FALLS CHURCH</b> State <b>VA</b> Zip Code <b>22043</b>		
Purpose of Expenditure <b>11/3 EMAIL COMMUNICATION</b>	Category/Type <span style="border: 1px solid black; padding: 2px;"><b>000</b></span>	Office Sought: <input checked="" type="checkbox"/> House    State: <b>PA</b> <input type="checkbox"/> Senate    District: <b>04</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Scott Perry</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em; font-weight: bold;">398.33</span> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

**Transaction ID : SE24.523**

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em; font-weight: bold;">82.93</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em; font-weight: bold;"> </span> </div>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em; font-weight: bold;"> </span> </div>

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

*Nadine Maenza*  
 Signature [Electronically Filed]      Date 

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01 / 31 / 2013

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

NAME OF COMMITTEE (In Full) <b>PATRIOT VOICES PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em; font-weight: bold;">C</span> C00528307         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>CMDI</b> NON CONTRIBUTION ACCOUNT		Date <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 0.8em;">M M M / D D D / Y Y Y Y Y Y</span>          12 / 28 / 2012       </div>
Mailing Address 7704 LEESBURG PIKE		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">6.38</div>
City FALLS CHURCH      State VA      Zip Code 22043		
Purpose of Expenditure 11/5 EMAIL COMMUNICATION	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">000</div>	Office Sought: <input checked="" type="checkbox"/> House      State: PA <input type="checkbox"/> Senate      District: 04 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Scott Perry		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">398.33</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

**Transaction ID : SE24.553**

Full Name (Last, First, Middle Initial) of Payee <b>CMDI</b> NON CONTRIBUTION ACCOUNT		Date <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 0.8em;">M M M / D D D / Y Y Y Y Y Y</span>          12 / 28 / 2012       </div>
Mailing Address 7704 LEESBURG PIKE		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">113.85</div>
City FALLS CHURCH      State VA      Zip Code 22043		
Purpose of Expenditure 10/31 EMAIL COMMUNICATION	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">000</div>	Office Sought: <input type="checkbox"/> House      State: MT <input checked="" type="checkbox"/> Senate      District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Denny Rehberg		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">364.37</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

**Transaction ID : SE24.516**

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">120.23</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(c) TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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

*Nadine Maenza*  
 Signature

[Electronically Filed]      Date 

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 01 / 31 / 2013

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

NAME OF COMMITTEE (In Full) <b>PATRIOT VOICES PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black;">C</span> C00528307         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>CMDI</b> NON CONTRIBUTION ACCOUNT		Date <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 0.8em;">M M M</span> / <span style="font-size: 0.8em;">D D D</span> / <span style="font-size: 0.8em;">Y Y Y Y Y Y</span>          12 / 28 / 2012       </div>
Mailing Address 7704 LEESBURG PIKE		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 0.8em;">. . . . .</span> 0.52       </div>
City FALLS CHURCH      State VA      Zip Code 22043	<b>Transaction ID : SE24.542</b>	
Purpose of Expenditure 11/5 EMAIL COMMUNICATION	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;"> <span style="font-size: 0.8em;">. . . . .</span> 000       </div>	Office Sought: <input type="checkbox"/> House    State: MT <input checked="" type="checkbox"/> Senate    District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Denny Rehberg		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 0.8em;">. . . . .</span> 364.37       </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee <b>ACTIVE ENGAGEMENT, LLC</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 0.8em;">M M M</span> / <span style="font-size: 0.8em;">D D D</span> / <span style="font-size: 0.8em;">Y Y Y Y Y Y</span>          12 / 28 / 2012       </div>
Mailing Address 44084 RIVERSIDE PARKWAY SUITE 350		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 0.8em;">. . . . .</span> 333.34       </div>
City LANSDOWN      State VA      Zip Code 20176	<b>Transaction ID : SE24.501</b>	
Purpose of Expenditure 11/2 EMAIL COMMUNICATION	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;"> <span style="font-size: 0.8em;">. . . . .</span> 000       </div>	Office Sought: <input type="checkbox"/> House    State: <input type="checkbox"/> Senate    District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Mitt Romney		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 0.8em;">. . . . .</span> 54304.10       </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 0.8em;">. . . . .</span> 333.86       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 0.8em;">. . . . .</span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 0.8em;">. . . . .</span> </div>

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

*Nadine Maenza*  
 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) <b>PATRIOT VOICES PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00528307
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>CMDI</b>		Date MM / DD / YYYY <b>12 / 28 / 2012</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <b>340.69</b>
City <b>FALLS CHURCH</b>	State <b>VA</b>	
Zip Code <b>22043</b>	<b>Transaction ID : SE24.507</b>	
Purpose of Expenditure <b>11/2 EMAIL COMMUNICATION</b>	Category/Type <b>000</b>	Office Sought: <input type="checkbox"/> House    State: _____ <input type="checkbox"/> Senate    District: <b>00</b> <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>54304.10</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>CMDI</b>		Date MM / DD / YYYY <b>12 / 28 / 2012</b>
<b>NON CONTRIBUTION ACCOUNT</b>		Amount <b>1033.51</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		
City <b>FALLS CHURCH</b>	State <b>VA</b>	<b>Transaction ID : SE24.509</b>
Zip Code <b>22043</b>	Office Sought: <input type="checkbox"/> House    State: _____ <input type="checkbox"/> Senate    District: <b>00</b> <input checked="" type="checkbox"/> President	
Purpose of Expenditure <b>10/24 EMAIL COMMUNICATION</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Mitt Romney</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought <b>54304.10</b>		

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<b>1374.20</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.

*Nadine Maenza*  
 Signature \_\_\_\_\_ [Electronically Filed]    Date **01 / 31 / 2013**

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

NAME OF COMMITTEE (In Full) <b>PATRIOT VOICES PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black;">C</span> C00528307       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>CMDI</b> NON CONTRIBUTION ACCOUNT		Date <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 0.8em;">M M M</span> / <span style="font-size: 0.8em;">D D D</span> / <span style="font-size: 0.8em;">Y Y Y Y Y Y</span>          12 / 28 / 2012       </div>
Mailing Address 7704 LEESBURG PIKE		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">7.05</div>
City State Zip Code FALLS CHURCH VA 22043	<b>Transaction ID : SE24.559</b>	
Purpose of Expenditure 11/5 EMAIL COMMUNICATION	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">000</div>	Office Sought: <input type="checkbox"/> House    State: _____ <input type="checkbox"/> Senate    District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Mitt Romney		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">54304.10</div>		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>CMDI</b> NON CONTRIBUTION ACCOUNT		Date <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 0.8em;">M M M</span> / <span style="font-size: 0.8em;">D D D</span> / <span style="font-size: 0.8em;">Y Y Y Y Y Y</span>          12 / 28 / 2012       </div>
Mailing Address 7704 LEESBURG PIKE		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5.75</div>
City State Zip Code FALLS CHURCH VA 22043		<b>Transaction ID : SE24.560</b>
Purpose of Expenditure 11/5 EMAIL COMMUNICATION	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">000</div>	Office Sought: <input type="checkbox"/> House    State: _____ <input type="checkbox"/> Senate    District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Mitt Romney		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">54304.10</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">12.80</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(c) TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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

*Nadine Maenza*  
 Signature

[Electronically Filed]    Date 01 / 31 / 2013

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

NAME OF COMMITTEE (In Full) <b>PATRIOT VOICES PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black; display: inline-block; width: 15px; height: 15px; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00528307</span> </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>CMDI</b> NON CONTRIBUTION ACCOUNT		Date <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>12 / 28 / 2012</span> </div>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">4.37</div>
City <b>FALLS CHURCH</b> State <b>VA</b> Zip Code <b>22043</b>		
Purpose of Expenditure <b>11/5 EMAIL COMMUNICATION</b>	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">000</div>	Office Sought: <input type="checkbox"/> House      State: _____ <input type="checkbox"/> Senate      District: <u>00</u> <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 <div style="border: 1px solid black; padding: 2px; text-align: right;">54304.10</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

**Transaction ID : SE24.561**

Full Name (Last, First, Middle Initial) of Payee <b>CMDI</b> NON CONTRIBUTION ACCOUNT		Date <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>12 / 28 / 2012</span> </div>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1.30</div>
City <b>FALLS CHURCH</b> State <b>VA</b> Zip Code <b>22043</b>		
Purpose of Expenditure <b>11/5 EMAIL COMMUNICATION</b>	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">000</div>	Office Sought: <input type="checkbox"/> House      State: _____ <input type="checkbox"/> Senate      District: <u>00</u> <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 <div style="border: 1px solid black; padding: 2px; text-align: right;">54304.10</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

**Transaction ID : SE24.562**

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">5.67</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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

*Nadine Maenza*  
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) <b>PATRIOT VOICES PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00528307
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>CMDI</b> NON CONTRIBUTION ACCOUNT		Date MM / DD / YYYY <b>12 / 28 / 2012</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <b>0.51</b> <b>Transaction ID : SE24.565</b>
City <b>FALLS CHURCH</b>	State      Zip Code <b>VA              22043</b>	
Purpose of Expenditure <b>11/5 EMAIL COMMUNICATION</b>	Category/Type <b>000</b>	Office Sought: <input type="checkbox"/> House      State: _____ <input type="checkbox"/> Senate      District: <u>00</u> <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>54304.10</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>CMDI</b> NON CONTRIBUTION ACCOUNT		Date MM / DD / YYYY <b>12 / 28 / 2012</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <b>2.30</b> <b>Transaction ID : SE24.566</b>
City <b>FALLS CHURCH</b>	State      Zip Code <b>VA              22043</b>	
Purpose of Expenditure <b>11/5 EMAIL COMMUNICATION</b>	Category/Type <b>000</b>	Office Sought: <input type="checkbox"/> House      State: _____ <input type="checkbox"/> Senate      District: <u>00</u> <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>54304.10</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>2.81</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.

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

Signature



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

NAME OF COMMITTEE (In Full) <b>PATRIOT VOICES PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00528307</span> </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>CMDI</b> NON CONTRIBUTION ACCOUNT		Date <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 0.8em; border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">M M</span> /          <span style="font-size: 0.8em; border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">D D</span> /          <span style="font-size: 0.8em; border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">Y Y Y Y</span> </div>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">1.40</span> </div>
City <b>FALLS CHURCH</b> State <b>VA</b> Zip Code <b>22043</b>	<b>Transaction ID : SE24.567</b>	
Purpose of Expenditure <b>11/5 EMAIL COMMUNICATION</b>	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;"> <span style="font-size: 1.2em;">000</span> </div>	Office Sought: <input type="checkbox"/> House    State: _____ <input type="checkbox"/> Senate    District: <u>  00  </u> <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 <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">54304.10</span> </div>		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>CMDI</b> NON CONTRIBUTION ACCOUNT		Date <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 0.8em; border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">M M</span> /          <span style="font-size: 0.8em; border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">D D</span> /          <span style="font-size: 0.8em; border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">Y Y Y Y</span> </div>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">7.32</span> </div>
City <b>FALLS CHURCH</b> State <b>VA</b> Zip Code <b>22043</b>	<b>Transaction ID : SE24.568</b>	
Purpose of Expenditure <b>11/5 EMAIL COMMUNICATION</b>	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;"> <span style="font-size: 1.2em;">000</span> </div>	Office Sought: <input type="checkbox"/> House    State: _____ <input type="checkbox"/> Senate    District: <u>  00  </u> <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 <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">54304.10</span> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">8.72</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>
<b>(c) TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>

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

*Nadine Maenza*  
 Signature

[Electronically Filed]      Date 01 / 31 / 2013

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

NAME OF COMMITTEE (In Full) <b>PATRIOT VOICES PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00528307
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>CMDI</b> NON CONTRIBUTION ACCOUNT		Date MM / DD / YYYY <b>12 / 28 / 2012</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <b>3.69</b>
City <b>FALLS CHURCH</b>	State <b>VA</b>	
Zip Code <b>22043</b>	<b>Transaction ID : SE24.569</b>	
Purpose of Expenditure <b>11/5 EMAIL COMMUNICATION</b>	Category/Type <b>000</b>	Office Sought: <input type="checkbox"/> House    State: _____ <input type="checkbox"/> Senate    District: <u>00</u> <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>54304.10</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>CMDI</b> NON CONTRIBUTION ACCOUNT		Date MM / DD / YYYY <b>12 / 28 / 2012</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <b>0.57</b>
City <b>FALLS CHURCH</b>	State <b>VA</b>	
Zip Code <b>22043</b>	<b>Transaction ID : SE24.570</b>	
Purpose of Expenditure <b>11/5 EMAIL COMMUNICATION</b>	Category/Type <b>000</b>	Office Sought: <input type="checkbox"/> House    State: _____ <input type="checkbox"/> Senate    District: <u>00</u> <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>54304.10</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>4.26</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.

*Nadine Maenza*  
 Signature \_\_\_\_\_ [Electronically Filed]    Date **01 / 31 / 2013**





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

NAME OF COMMITTEE (In Full) <b>PATRIOT VOICES PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black; display: inline-block; width: 15px; height: 15px; text-align: center; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00528307</span> </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>CMDI</b> NON CONTRIBUTION ACCOUNT		Date <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 0.8em;">M M M / D D D / Y Y Y Y Y Y</span>  <span style="font-size: 1.2em; font-weight: bold;">12 / 28 / 2012</span> </div>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em; font-weight: bold;">0.79</span> </div>
City <b>FALLS CHURCH</b> State <b>VA</b> Zip Code <b>22043</b>		
Purpose of Expenditure <b>11/5 EMAIL COMMUNICATION</b>	Category/Type <span style="border: 1px solid black; padding: 2px;"><b>000</b></span>	Office Sought: <input type="checkbox"/> House      State: _____ <input type="checkbox"/> Senate      District: <u>00</u> <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 <span style="border: 1px solid black; padding: 2px; text-align: right;"><b>54304.10</b></span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

**Transaction ID : SE24.575**

Full Name (Last, First, Middle Initial) of Payee <b>CMDI</b> NON CONTRIBUTION ACCOUNT		Date <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 0.8em;">M M M / D D D / Y Y Y Y Y Y</span>  <span style="font-size: 1.2em; font-weight: bold;">12 / 28 / 2012</span> </div>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em; font-weight: bold;">1028.62</span> </div>
City <b>FALLS CHURCH</b> State <b>VA</b> Zip Code <b>22043</b>		
Purpose of Expenditure <b>11/6 EMAIL COMMUNICATION</b>	Category/Type <span style="border: 1px solid black; padding: 2px;"><b>000</b></span>	Office Sought: <input type="checkbox"/> House      State: _____ <input type="checkbox"/> Senate      District: <u>00</u> <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 <span style="border: 1px solid black; padding: 2px; text-align: right;"><b>54304.10</b></span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

**Transaction ID : SE24.576**

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em; font-weight: bold;">1029.41</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em; font-weight: bold;">0.00</span> </div>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em; font-weight: bold;">1029.41</span> </div>

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

*Nadine Maenza*  
 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) <b>PATRIOT VOICES PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00528307
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>CMDI</b>		Date MM / DD / YYYY <b>12 / 28 / 2012</b>
NON CONTRIBUTION ACCOUNT		Amount <b>6.38</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		
City <b>FALLS CHURCH</b>	State <b>VA</b>	Zip Code <b>22043</b>
Purpose of Expenditure <b>11/5 EMAIL COMMUNICATION</b>	Category/Type <b>000</b>	Office Sought: <input checked="" type="checkbox"/> House    State: <b>PA</b> <input type="checkbox"/> Senate    District: <b>12</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Keith Rothfus</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>398.33</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

**Transaction ID : SE24.548**

Full Name (Last, First, Middle Initial) of Payee <b>ACTIVE ENGAGEMENT, LLC</b>		Date MM / DD / YYYY <b>12 / 28 / 2012</b>
Mailing Address <b>44084 RIVERSIDE PARKWAY</b> <b>SUITE 350</b>		Amount <b>333.33</b>
City <b>LANSDOWN</b>	State <b>VA</b>	
Purpose of Expenditure <b>11/2 EMAIL COMMUNICATION</b>	Category/Type <b>000</b>	Office Sought: <input type="checkbox"/> House    State: <b>PA</b> <input checked="" type="checkbox"/> Senate    District: <b>00</b> <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>6630.19</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

**Transaction ID : SE24.502**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>339.71</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.

*Nadine Maenza*

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





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

NAME OF COMMITTEE (In Full) <b>PATRIOT VOICES PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00528307
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>CMDI</b> NON CONTRIBUTION ACCOUNT		Date MM / DD / YYYY <b>12 / 28 / 2012</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <b>113.85</b>
City <b>FALLS CHURCH</b>	State <b>VA</b>	
Zip Code <b>22043</b>	<b>Transaction ID : SE24.512</b>	
Purpose of Expenditure <b>10/31 EMAIL COMMUNICATION</b>	Category/Type <b>000</b>	Office Sought: <input type="checkbox"/> House    State: <b>PA</b> <input checked="" type="checkbox"/> Senate    District: <b>00</b> <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>6630.19</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>CMDI</b> NON CONTRIBUTION ACCOUNT		Date MM / DD / YYYY <b>12 / 28 / 2012</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount <b>6.38</b>
City <b>FALLS CHURCH</b>	State <b>VA</b>	
Zip Code <b>22043</b>	<b>Transaction ID : SE24.536</b>	
Purpose of Expenditure <b>11/5 EMAIL COMMUNICATION</b>	Category/Type <b>000</b>	Office Sought: <input type="checkbox"/> House    State: <b>PA</b> <input checked="" type="checkbox"/> Senate    District: <b>00</b> <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>6630.19</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>120.23</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.

*Nadine Maenza*  
Signature

[Electronically Filed]

Date **01 / 31 / 2013**



