

# FEC FORM 5

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

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

1. (a) Name of Individual, Organization or Corporation <b>Foster Friess</b>		3. FEC Identification Number <b>C C90012881</b>
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported PO Box 9790		
(c) City, State and ZIP Code Jackson WY 83002		
2. <b>Corporate filers only</b>	Is the filer a qualified nonprofit corporation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>Individual filers only</b>	Name of Employer FAI Wyoming Associates, Inc	Occupation Investor

4. TYPE OF REPORT (check appropriate boxes):

(a)  April 15 Quarterly Report  
 July 15 Quarterly Report  
 October 15 Quarterly Report  
 January 31 Year-End Report

24-Hour Report  
 48-Hour Report

b) Is this Report an amendment? Yes  No

5. COVERING PERIOD: FROM

/  /   
 THROUGH  
 /  /

6. TOTAL CONTRIBUTIONS .....

7. TOTAL INDEPENDENT EXPENDITURES .....

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

<b>TYPE OR PRINT NAME OF PERSON COMPLETING FORM</b>	<b>SIGNATURE</b>	<b>DATE</b>
Foster Friess	<i>Foster Friess</i>	04/11/2012

*[Electronically Filed]*

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

For further information, contact:  
Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)

Foster Friess

Full Name (Last, First, Middle Initial) of Payee WJMC		Date MM / DD / YYYY 03 / 27 / 2012
Mailing Address PO Box 352		Amount 1176.00 <b>Transaction ID : F57.000001</b>
City Rice Lake	State WI	
Zip Code 54868	Purpose of Expenditure Radio Ad	Category/Type 004
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Santorum		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought _____ .00		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Chronotype Publishing Co		Date MM / DD / YYYY 03 / 28 / 2012
Mailing Address 28 S Main St		Amount 1039.50 <b>Transaction ID : F57.000002</b>
City Rice Lake	State WI	
Zip Code 54868	Purpose of Expenditure Newspaper Ad	Category/Type 004
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Santorum		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought _____ .00		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Concept West		Date MM / DD / YYYY 03 / 28 / 2012
Mailing Address 38913 North 57th Place		Amount 500.00 <b>Transaction ID : F57.000003</b>
City Cave Creek	State AZ	
Zip Code 85331	Purpose of Expenditure Printed Cards	Category/Type 004
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Santorum		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought _____ .00		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	2715.50
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....	
(c) <b>TOTAL</b> Independent Expenditures ..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Foster Friess

Full Name (Last, First, Middle Initial) of Payee UPS		Date MM / DD / YYYY 03 / 28 / 2012
Mailing Address 331 South Main St, Suite E		Amount 263.75 <b>Transaction ID : F57.000004</b>
City Rice Lake	State WI	
Zip Code 54868	Purpose of Expenditure Printed Cards	Category/ Type 004
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Santorum		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought _____ .00		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Lehman's Supper Club		Date MM / DD / YYYY 03 / 28 / 2012
Mailing Address 2911 South Main St		Amount 1620.00 <b>Transaction ID : F57.000005</b>
City Rice Lake	State WI	
Zip Code 54868	Purpose of Expenditure Breakfast Gathering	Category/ Type 004
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Santorum		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought _____ .00		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee The Florian Gardens		Date MM / DD / YYYY 03 / 28 / 2012
Mailing Address 2340 Lorch Ave		Amount 4075.47 <b>Transaction ID : F57.000006</b>
City Eau Claire	State WI	
Zip Code 54701	Purpose of Expenditure Lunch Gathering	Category/ Type 004
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Santorum		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought _____ .00		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	▶	5959.22
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....	▶	
(c) <b>TOTAL</b> Independent Expenditures .....	▶	
(carry total from last page forward to Line 7)		

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)

Foster Friess

Full Name (Last, First, Middle Initial) of Payee WJMC		Date MM / DD / YYYY 03 / 29 / 2012
Mailing Address PO Box 352		Amount 1543.50 <b>Transaction ID : F57.000007</b>
City Rice Lake	State WI	
Zip Code 54868	Purpose of Expenditure Radio Ad	Category/Type 004
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Santorum		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought .00		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee WAXX		Date MM / DD / YYYY 03 / 29 / 2012
Mailing Address 944 Harlem St		Amount 2000.00 <b>Transaction ID : F57.000008</b>
City Altoona	State WI	
Zip Code 54720	Purpose of Expenditure Radio Ad	Category/Type 004
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Santorum		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought .00		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee WIZM		Date MM / DD / YYYY 03 / 29 / 2012
Mailing Address PO Box 99		Amount 3506.50 <b>Transaction ID : F57.000009</b>
City Lacrosse	State WI	
Zip Code 54601	Purpose of Expenditure Radio Ad	Category/Type 004
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Santorum		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought .00		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	▶	7050.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....	▶	
(c) <b>TOTAL</b> Independent Expenditures .....	▶	
(carry total from last page forward to Line 7)		

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Foster Friess

Full Name (Last, First, Middle Initial) of Payee WAPL		Date MM / DD / YYYY 03 / 29 / 2012
Mailing Address PO Box 1519		Amount 4002.00 <b>Transaction ID : F57.000010</b>
City Appleton	State WI	
Zip Code 54912	Purpose of Expenditure Radio Ad	Category/Type 004
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Santorum		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought .00		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee WJVL		Date MM / DD / YYYY 03 / 29 / 2012
Mailing Address PO Box 5001		Amount 1988.50 <b>Transaction ID : F57.000011</b>
City Janesville	State WI	
Zip Code 53547	Purpose of Expenditure Radio Ad	Category/Type 004
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Santorum		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought .00		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee WMGN		Date MM / DD / YYYY 03 / 29 / 2012
Mailing Address 730 Ray-O-Vac		Amount 5000.00 <b>Transaction ID : F57.000012</b>
City Madison	State WI	
Zip Code 53711	Purpose of Expenditure Radio Ad	Category/Type 004
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Santorum		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought .00		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	▶	10990.50
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....	▶	
(c) <b>TOTAL</b> Independent Expenditures .....	▶	
(carry total from last page forward to Line 7)		

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Foster Friess

Full Name (Last, First, Middle Initial) of Payee Clear Channel Media		Date MM / DD / YYYY 03 / 29 / 2012
Mailing Address 12100 W. Howard Ave		Amount 5999.30 <b>Transaction ID : F57.000013</b>
City Milwaukee	State WI	
Zip Code 53228		
Purpose of Expenditure Radio Ad	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Santorum		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Watertown Daily Times		Date MM / DD / YYYY 03 / 30 / 2012
Mailing Address 115 W. Main St		Amount 1527.60 <b>Transaction ID : F57.000014</b>
City Watertown	State WI	
Zip Code 53094		
Purpose of Expenditure Newspaper Ad	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Santorum		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Capital Newspapers		Date MM / DD / YYYY 03 / 30 / 2012
Mailing Address 1901 Fish Hatchery Rd		Amount 1143.90 <b>Transaction ID : F57.000015</b>
City Madison	State WI	
Zip Code 53713		
Purpose of Expenditure Newspaper Ad	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Santorum		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	▶	8670.80
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....	▶	
(c) <b>TOTAL</b> Independent Expenditures .....	▶	
(carry total from last page forward to Line 7)		

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Foster Friess

Full Name (Last, First, Middle Initial) of Payee The Daily Press		Date MM / DD / YYYY 03 / 30 / 2012
Mailing Address 122 West 3rd St		Amount 1389.15 <b>Transaction ID : F57.000016</b>
City Ashland	State WI	
Zip Code 54806	Purpose of Expenditure Newspaper Ad	Category/Type 004
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Santorum		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought _____ .00		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Capital Newspapers		Date MM / DD / YYYY 03 / 30 / 2012
Mailing Address 1901 Fish Hatchery Rd		Amount 6907.95 <b>Transaction ID : F57.000017</b>
City Madison	State WI	
Zip Code 53713	Purpose of Expenditure Newspaper Ad	Category/Type 004
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Santorum		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought _____ .00		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Gannett Wisconsin Media		Date MM / DD / YYYY 03 / 30 / 2012
Mailing Address 435 East Walnut		Amount 14000.00 <b>Transaction ID : F57.000018</b>
City Green Bay	State WI	
Zip Code 54305	Purpose of Expenditure Newspaper Ad	Category/Type 004
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Santorum		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought _____ .00		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	▶	22297.10
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....	▶	
(c) <b>TOTAL</b> Independent Expenditures .....	▶	
(carry total from last page forward to Line 7)		

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Foster Friess

Full Name (Last, First, Middle Initial) of Payee Milwaukee Journal Sentinel		Date MM / DD / YYYY 03 / 30 / 2012
Mailing Address 333 W State St		Amount 10000.00 <b>Transaction ID : F57.000019</b>
City Milwaukee	State WI	
Zip Code 53203	Purpose of Expenditure Newspaper Ad	Category/Type 004
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Santorum		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought _____ .00		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Greater Milwaukee Today Network		Date MM / DD / YYYY 03 / 30 / 2012
Mailing Address PO Box 7		Amount 1576.89 <b>Transaction ID : F57.000020</b>
City Waukesha	State WI	
Zip Code 53187	Purpose of Expenditure Newspaper Ad	Category/Type 004
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Santorum		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought _____ .00		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Monroe Times		Date MM / DD / YYYY 03 / 30 / 2012
Mailing Address 1065 4th Ave. West		Amount 2354.10 <b>Transaction ID : F57.000021</b>
City Monroe	State WI	
Zip Code 53566	Purpose of Expenditure Newspaper Ad	Category/Type 004
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Santorum		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought _____ .00		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	▶	13930.99
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....	▶	
(c) <b>TOTAL</b> Independent Expenditures .....	▶	71614.11
(carry total from last page forward to Line 7)		