

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 COMMON SENSE ISSUES INC		3. FEC Identification Number C C90009739
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 8190-A BEECHMONT AVENUE - 103		
(c) City, State and ZIP Code CINCINNATI OH 45255		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Individual filers only	Name of Employer Occupation	

4. TYPE OF REPORT (check appropriate boxes):

- (a) April 15 Quarterly Report 24-Hour Notice 48-Hour Notice
- July 15 Quarterly Report
- October Quarterly Report
- January 31 Year-End Report

(b) Is this Report an amendment? Yes No

5. COVERING PERIOD: FROM

M	M
0	1

 /

D	D
0	1

 /

Y	Y	Y	Y
2	0	0	9

THROUGH

M	M
0	6

 /

D	D
1	5

 /

Y	Y	Y	Y
2	0	1	0

6. TOTAL CONTRIBUTIONS	<table border="1" style="width: 100%;"><tr><td style="text-align: center;">0.00</td></tr></table>	0.00
0.00		
7. TOTAL INDEPENDENT EXPENDITURES.....	<table border="1" style="width: 100%;"><tr><td style="text-align: center;">20400.00</td></tr></table>	20400.00
20400.00		

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

TYPE OR PRINT NAME OF PERSON COMPLETING FORM	SIGNATURE	DATE
Patrick Davis	_____	06/16/2010

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-A
ITEMIZED RECEIPTS**

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 FILER (In Full)
COMMON SENSE ISSUES INC

A. Full Name (Last, First, Middle Initial)
N/A - Paid With General Treasury Funds
Mailing Address

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 1 0

City State Zip Code

Transaction ID: F56.4104

FEC ID number of contributing federal political committee.

C

Amount of Each Receipt this Period

0.00

Name of Employer Occupation

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page carry total to Line 6)

0.00

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

COMMON SENSE ISSUES INC

Full Name (Last, First, Middle Initial) of Payee
Design 4 Marketing and Communications

Date

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 1 0

Mailing Address
106 N Collins St

Amount

5400.00

City State Zip Code
Plant City FL 22563

Purpose of Expenditure
Radio Ad - Production

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
TIM BRIDGEWATER

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 5400.00

Disbursement For: 2010 Primary General
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Design 4 Marketing and Communications

Date

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 1 0

Mailing Address
106 N Collins St

Amount

15000.00

City State Zip Code
Plant City FL 22563

Purpose of Expenditure
Radio Ad - Media Placement

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
TIM BRIDGEWATER

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 20400.00

Disbursement For: 2010 Primary General
 Other (specify)

(a) **SUBTOTAL** of Itemized Independent Expenditures

20400.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

20400.00