

# 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

Ending Spending Action Fund

ADDRESS (number and street)

610 S. Boulevard

☐ Check if different than previously reported. (ACC)

Tampa

FL

33606

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00489856

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)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y 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 M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

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

Type or Print Name of Treasurer Nancy H. Watkins

Signature of Treasurer

Nancy H. Watkins

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

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

Office  
Use  
Only

### FEC FORM 3X

Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Ending Spending Action Fund

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y 09 / 01 / 2012 To: M M / D D / Y Y Y Y Y Y 09 / 30 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> 2012		<span style="border: 1px solid black; padding: 2px;">1981.97</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">11374.81</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">11453615.70</span>	<span style="border: 1px solid black; padding: 2px;">12390889.39</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">11464990.51</span>	<span style="border: 1px solid black; padding: 2px;">12392871.36</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">5571287.07</span>	<span style="border: 1px solid black; padding: 2px;">6499167.92</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">5893703.44</span>	<span style="border: 1px solid black; padding: 2px;">5893703.44</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	



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)

Page 3

Write or Type Committee Name

### Ending Spending Action Fund

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 09 / 01 / 2012

To:

 M M / D D / Y Y Y Y Y  
 09 / 30 / 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).....

11453034.70

12380182.73

(ii) Unitemized .....

581.00

812.47

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

11453615.70

12380995.20

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

11453615.70

12380995.20

## 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

7414.19

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

2480.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))..... ▶

11453615.70

12390889.39

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

11453615.70

12390889.39

# **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 .....	3466203.07	3727064.36
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	3466203.07	3727064.36
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	2105084.00	2522103.56
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	250000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	5571287.07	6499167.92
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5571287.07	6499167.92

**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) .....	11453615.70	12380995.20
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	11453615.70	12380995.20
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	3466203.07	3727064.36
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	7414.19
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	3466203.07	3719650.17

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 39

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Ending Spending Action Fund**

Full Name (Last, First, Middle Initial)

## **A. Ending Spending, Inc.**

Mailing Address 1101 Pennsylvania Ave., N.W., #700

City State Zip Code  
 Washington DC 20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

42413.03

Date of Receipt

09 / 17 / 2012

Transaction ID : SA11AI.4452

Amount of Each Receipt this Period

1265.00

In-kind - legal fees

Full Name (Last, First, Middle Initial)

## **B. Ending Spending, Inc.**

Mailing Address 1101 Pennsylvania Ave., N.W., #700

City State Zip Code  
 Washington DC 20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110078.63

Date of Receipt

09 / 30 / 2012

Transaction ID : SA11AI.4455

Amount of Each Receipt this Period

67665.60

In-kind - database usage

Full Name (Last, First, Middle Initial)

## **C. Ending Spending, Inc.**

Mailing Address 1101 Pennsylvania Ave., N.W., #700

City State Zip Code  
 Washington DC 20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

128682.73

Date of Receipt

09 / 30 / 2012

Transaction ID : SA11AI.4458

Amount of Each Receipt this Period

18604.10

In-kind - payroll & benefits, office space

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

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

87534.70

# **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 39

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Ending Spending Action Fund**

Full Name (Last, First, Middle Initial)

## **A. Tony Hawkins**

Mailing Address 134 Hollow Cove Road

City

Lexington

State

SC

Zip Code

29072

FEC ID number of contributing  
federal political committee.

C

Name of Employer

self-employed

Occupation

real estate

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 26 / 2012

Transaction ID : SA11AI.4348

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **B. J. Joe Ricketts**

Mailing Address 607 Upper Hoback Road

City

Little Jackson Hole

State

WY

Zip Code

82922

FEC ID number of contributing  
federal political committee.

C

Name of Employer

self-employed

Occupation

entrepreneur

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1885000.00

Date of Receipt

09 / 10 / 2012

Transaction ID : SA11AI.4248

Amount of Each Receipt this Period

1000000.00

Full Name (Last, First, Middle Initial)

## **C. J. Joe Ricketts**

Mailing Address 607 Upper Hoback Road

City

Little Jackson Hole

State

WY

Zip Code

82922

FEC ID number of contributing  
federal political committee.

C

Name of Employer

self-employed

Occupation

entrepreneur

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7371382.00

Date of Receipt

09 / 13 / 2012

Transaction ID : SA11AI.4264

Amount of Each Receipt this Period

5486382.00

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

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

6486882.00

# **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 8 OF 39

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Ending Spending Action Fund**

Full Name (Last, First, Middle Initial)

**A. J. Joe Ricketts**

Mailing Address 607 Upper Hoback Road

City

Little Jackson Hole

State

WY

Zip Code

82922

FEC ID number of contributing  
federal political committee.

C

Name of Employer

self-employed

Occupation

entrepreneur

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10994107.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 28 / 2012

Transaction ID : SA11AI.4354

Amount of Each Receipt this Period

3622725.00

Full Name (Last, First, Middle Initial)

**B. J. Joe Ricketts**

Mailing Address 607 Upper Hoback Road

City

Little Jackson Hole

State

WY

Zip Code

82922

FEC ID number of contributing  
federal political committee.

C

Name of Employer

self-employed

Occupation

entrepreneur

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12250000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 28 / 2012

Transaction ID : SA11AI.4360

Amount of Each Receipt this Period

1255893.00

Full Name (Last, First, Middle Initial)

**C.**

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

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

4878618.00

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

11453034.70



<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

## Ending Spending Action Fund

3459800.00

Category/  
Type

17910.00

Category/  
Type

78000.00

Category/  
Type

3555710.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 39

<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)

**Ending Spending Action Fund**

Full Name (Last, First, Middle Initial)

**A. American Media & Advocacy Group**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2012

Mailing Address 815 Slaters Lane

City	State	Zip Code
Alexandria	VA	22314

**Transaction ID : SB21B.4340**Purpose of Disbursement  
media placement-see Line 24

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

-705756.75
------------

Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

**B. American Media & Advocacy Group**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2012

Mailing Address 815 Slaters Lane

City	State	Zip Code
Alexandria	VA	22314

**Transaction ID : SB21B.4341**Purpose of Disbursement  
media placement-see Line 24

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

-235252.25
------------

Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

**C. Bank of Tampa**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2012

Mailing Address P. O. Box 1

City	State	Zip Code
Tampa	FL	33601

**Transaction ID : SB21B.4251**Purpose of Disbursement  
service charge

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

20.00
-------

Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

-940989.00
------------

--

<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

## Ending Spending Action Fund

### A. Bank of Tampa

Mailing Address P. O. Box 1

City	State	Zip Code
Tampa	FL	33601

Purpose of Disbursement	Amount	Account
service charge		

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.4256

Amount of Each Disbursement this Period



Full Name (Last, First, Middle Initial)

### B. Bank of Tampa

Mailing Address P. O. Box 1

City	State	Zip Code
Tampa	FL	33601

Purpose of Disbursement	Account	Amount	Account	Amount
service charge				

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Three digital displays are shown, each with a different number of segments missing (indicated by grey squares). The first display shows '09' with 2 missing segments. The second display shows '13' with 2 missing segments. The third display shows '2012' with 8 missing segments.

Transaction ID : SB21B.4258

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

### C. Bank of Tampa

Mailing Address P. O. Box 1

City	State	Zip Code
Tampa	FL	33601

Purpose of Disbursement	Amount	Account	Account Number
service charge			

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Date of Disbursement

Transaction ID : SB21B.4261

Amount of Each Disbursement this Period

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

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

60.00





<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

## Ending Spending Action Fund

### A. Bank of Tampa

Mailing Address P. O. Box 1

City	State	Zip Code
Tampa	FL	33601

Purpose of Disbursement	Amount	Account	Account Number
service charge			

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.4361

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	14.5
25-34	13.5
35-44	12.5
45-54	11.5
55-64	10.5
65-74	9.5
75-84	8.5
85+	1.5

Full Name (Last, First, Middle Initial)

**B. CD, Inc.**

Mailing Address P. O. Box 1877

City	State	Zip Code
Alexandria	VA	22313

Purpose of Disbursement	advertising-voter registration
-------------------------	--------------------------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.4284

Amount of Each Disbursement this Period

30000.00

Full Name (Last, First, Middle Initial)

**C. CD, Inc.**

Mailing Address P. O. Box 1877

City	State	Zip Code
Alexandria	VA	22313

Purpose of Disbursement
website development

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M / D D / Y Y Y Y  
09 17 2012

Transaction ID : SB21B.4285

Amount of Each Disbursement this Period

5000.00

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

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

35015.00

<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

## Ending Spending Action Fund

**A. CD, Inc.**

Mailing Address P. O. Box 1877

City	State	Zip Code
Alexandria	VA	22313

Purpose of Disbursement	data/email system

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : SB21B.4301

Amount of Each Disbursement this Period

3757.37

**B. CD, Inc.**

Mailing Address P. O. Box 1877

City	State	Zip Code
Alexandria	VA	22313

Purpose of Disbursement
website development

Candidate Name	
1	1
2	2
3	3
4	4
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98	98
99	99
100	100

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement



09 / 17 / 2012

Transaction ID : SB21B.4302

Amount of Each Disbursement this Period

15000.00

**C. CD, Inc.**

Mailing Address P. O. Box 1877

City	State	Zip Code
Alexandria	VA	22313

Purpose of Disbursement
website development

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : SB21B.4313

Amount of Each Disbursement this Period

25000.00

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

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

43757.37



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Ending Spending Action Fund**

Full Name (Last, First, Middle Initial)

**A. Clark Hill, PLC**

Mailing Address 601 Pennsylvania Ave., N.W., #1000

City Washington      State DC      Zip Code 20004

Purpose of Disbursement  
legal fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 28 / 2012
**Transaction ID : SB21B.4359**

Amount of Each Disbursement this Period

1575.00

Full Name (Last, First, Middle Initial)

**B. DDC Advocacy**

Mailing Address 174 Waterfront Street, Suite 500

City National Harbor      State MD      Zip Code 20745

Purpose of Disbursement  
yard signs

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 26 / 2012
**Transaction ID : SB21B.4325**

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

**C. DDC Advocacy**

Mailing Address 174 Waterfront Street, Suite 500

City National Harbor      State MD      Zip Code 20745

Purpose of Disbursement  
shirts

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 26 / 2012
**Transaction ID : SB21B.4326**

Amount of Each Disbursement this Period

15000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

31575.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Ending Spending Action Fund**

Full Name (Last, First, Middle Initial)

**A. DDC Advocacy**

Mailing Address 174 Waterfront Street, Suite 500

City National Harbor      State MD      Zip Code 20745

Purpose of Disbursement  
door hangers/literature

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09      26      2012
**Transaction ID : SB21B.4327**

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

**B. DDC Advocacy**

Mailing Address 174 Waterfront Street, Suite 500

City National Harbor      State MD      Zip Code 20745

Purpose of Disbursement  
strategic planning consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09      26      2012
**Transaction ID : SB21B.4328**

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

**C. DDC Advocacy**

Mailing Address 174 Waterfront Street, Suite 500

City National Harbor      State MD      Zip Code 20745

Purpose of Disbursement  
direct mail services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09      26      2012
**Transaction ID : SB21B.4329**

Amount of Each Disbursement this Period

424000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

454000.00

<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

## Ending Spending Action Fund

### A. DDC Advocacy

Mailing Address 174 Waterfront Street, Suite 500

City	State	Zip Code
National Harbor	MD	20745

### Purpose of Disbursement database services

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.4332

Amount of Each Disbursement this Period

60000.00

Full Name (Last, First, Middle Initial)

## B. DDC Advocacy

Mailing Address 174 Waterfront Street, Suite 500

City	State	Zip Code
National Harbor	MD	20745

Purpose of Disbursement
phone banks

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

09 / 26 / 2012

Transaction ID : SB21B.4333

Amount of Each Disbursement this Period

146342.00

Full Name (Last, First, Middle Initial)

### C. DDC Advocacy

Mailing Address 174 Waterfront Street, Suite 500

City	State	Zip Code
National Harbor	MD	20745

Purpose of Disbursement	field operations

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y  
09 26 2012

Transaction ID : SB21B.4335

Amount of Each Disbursement this Period

211000.00

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

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

417342.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Ending Spending Action Fund**

Full Name (Last, First, Middle Initial)

**A. DDC Advocacy**

Mailing Address 174 Waterfront Street, Suite 500

City National Harbor      State MD      Zip Code 20745

Purpose of Disbursement  
door-to-door hangers/literature-see Line 24

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 29 / 2012
**Transaction ID : SB21B.4382**

Amount of Each Disbursement this Period

-15000.00

Full Name (Last, First, Middle Initial)

**B. DDC Advocacy**

Mailing Address 174 Waterfront Street, Suite 500

City National Harbor      State MD      Zip Code 20745

Purpose of Disbursement  
yard signs-see Line 24

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 29 / 2012
**Transaction ID : SB21B.4383**

Amount of Each Disbursement this Period

-15000.00

Full Name (Last, First, Middle Initial)

**C. DDC Advocacy**

Mailing Address 174 Waterfront Street, Suite 500

City National Harbor      State MD      Zip Code 20745

Purpose of Disbursement  
t-shirts-see Line 24

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 29 / 2012
**Transaction ID : SB21B.4386**

Amount of Each Disbursement this Period

-15000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

-45000.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Ending Spending Action Fund**

Full Name (Last, First, Middle Initial)

**A. DDC Advocacy**

Mailing Address 174 Waterfront Street, Suite 500

City National Harbor      State MD      Zip Code 20745

Purpose of Disbursement  
direct mail services-see Line 24

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 29 / 2012
**Transaction ID : SB21B.4388**

Amount of Each Disbursement this Period

-53000.00

Full Name (Last, First, Middle Initial)

**B. DDC Advocacy**

Mailing Address 174 Waterfront Street, Suite 500

City National Harbor      State MD      Zip Code 20745

Purpose of Disbursement  
door-to-door GOTV field operations-see Line 24

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 29 / 2012
**Transaction ID : SB21B.4392**

Amount of Each Disbursement this Period

-105500.00

Full Name (Last, First, Middle Initial)

**C. DDC Advocacy**

Mailing Address 174 Waterfront Street, Suite 500

City National Harbor      State MD      Zip Code 20745

Purpose of Disbursement  
door-to-door GOTV field operations-see Line 24

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 29 / 2012
**Transaction ID : SB21B.4394**

Amount of Each Disbursement this Period

-105500.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

-264000.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Ending Spending Action Fund**

Full Name (Last, First, Middle Initial)

**A. Ending Spending, Inc.**

Mailing Address 1101 Pennsylvania Ave., N.W., #700

City Washington      State DC      Zip Code 20004

Purpose of Disbursement  
In-kind - legal fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 17 / 2012
**Transaction ID : SB21B.4453**

Amount of Each Disbursement this Period

1265.00

Full Name (Last, First, Middle Initial)

**B. Ending Spending, Inc.**

Mailing Address 1101 Pennsylvania Ave., N.W., #700

City Washington      State DC      Zip Code 20004

Purpose of Disbursement  
In-kind - database usage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2012
**Transaction ID : SB21B.4456**

Amount of Each Disbursement this Period

67665.60

Full Name (Last, First, Middle Initial)

**C. Ending Spending, Inc.**

Mailing Address 1101 Pennsylvania Ave., N.W., #700

City Washington      State DC      Zip Code 20004

Purpose of Disbursement  
In-kind - payroll & benefits, office space

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2012
**Transaction ID : SB21B.4459**

Amount of Each Disbursement this Period

18604.10

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

87534.70

<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

## Ending Spending Action Fund

**A. Fabrizio Ward & Associates, LLC**

Mailing Address 915 King Street, 2nd FL

City	State	Zip Code
Alexandria	VA	22314

### Purpose of Disbursement research

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.4358

Amount of Each Disbursement this Period

21400.00

Full Name (Last, First, Middle Initial)

**B. Gibson, Dunn & Crutcher, LLP**

Mailing Address 1050 Connecticut Ave., N.W.

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement	legal fees

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

09 / 13 / 2012

Transaction ID : SB21B.4260

Amount of Each Disbursement this Period

10748.00

Full Name (Last, First, Middle Initial)  
C. Nahigian Strategies, LLC

Mailing Address 331 Cameron Station Blvd.

City	State	Zip Code
Alexandria	VA	22304

Purpose of Disbursement	media production
-------------------------	------------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.4263

Amount of Each Disbursement this Period

13200.00

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

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

45348.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 23 OF 39

☒ 21b   ☐ 22   ☐ 23   ☐ 24   ☐ 25   ☐ 26  
☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

Ending Spending Action Fund

Full Name (Last, First, Middle Initial)

**A. Nahigian Strategies, LLC**

Mailing Address 331 Cameron Station Blvd.

City Alexandria      State VA      Zip Code 22304

Purpose of Disbursement  
media production-see Line 24

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary   ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 14 / 2012

Transaction ID : SB21B.4272

Amount of Each Disbursement this Period

-3300.00

Full Name (Last, First, Middle Initial)

**B. Nahigian Strategies, LLC**

Mailing Address 331 Cameron Station Blvd.

City Alexandria      State VA      Zip Code 22304

Purpose of Disbursement  
media production-see Line 24

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary   ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 28 / 2012

Transaction ID : SB21B.4362

Amount of Each Disbursement this Period

-4950.00

Full Name (Last, First, Middle Initial)

**C. Nahigian Strategies, LLC**

Mailing Address 331 Cameron Station Blvd.

City Alexandria      State VA      Zip Code 22304

Purpose of Disbursement  
media production-see Line 24

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary   ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 28 / 2012

Transaction ID : SB21B.4363

Amount of Each Disbursement this Period

-1650.00

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

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

-9900.00

<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

## Ending Spending Action Fund

**A. NMB Research, LLC**

Mailing Address 206 N. Fayette Street

City	State	Zip Code
Alexandria	VA	22314

### Purpose of Disbursement survey

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

09 / 13 / 2012

Transaction ID : SB21B.4255

Amount of Each Disbursement this Period

60000.00

Full Name (Last, First, Middle Initial)

### B. Smart Media Group, LLC

Mailing Address 814 King Street

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement
media placement

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.4257

Amount of Each Disbursement this Period

250550.00

Full Name (Last, First, Middle Initial)

**C. Smart Media Group, LLC**

Mailing Address 814 King Street

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement	media placement-see Line 24
-------------------------	-----------------------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

09 / 14 / 2012

Transaction ID : SB21B.4274

Amount of Each Disbursement this Period

-63185.00

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

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

247365.00



<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

## Ending Spending Action Fund



-109912.50

State:  District:

MM / DD / YYYY

-77452.50

State:  District:

154312.50

State:  District:

-33052.50

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 26 OF 39

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 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)

Ending Spending Action Fund

Full Name (Last, First, Middle Initial)

**A. Victory Film Group, LLC**

Mailing Address 2800 Olympic Blvd., 2nd Floor

City Santa Monica      State CA      Zip Code 90404

Purpose of Disbursement  
web videos-see Line 24

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 16 / 2012

Transaction ID : SB21B.4295

Amount of Each Disbursement this Period

-189500.00

Full Name (Last, First, Middle Initial)

**B. Victory Film Group, LLC**

Mailing Address 2800 Olympic Blvd., 2nd Floor

City Santa Monica      State CA      Zip Code 90404

Purpose of Disbursement  
web videos-see Line 24

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 16 / 2012

Transaction ID : SB21B.4296

Amount of Each Disbursement this Period

-81500.00

Full Name (Last, First, Middle Initial)

**C. Victory Film Group, LLC**

Mailing Address 2800 Olympic Blvd., 2nd Floor

City Santa Monica      State CA      Zip Code 90404

Purpose of Disbursement  
media production

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 25 / 2012

Transaction ID : SB21B.4324

Amount of Each Disbursement this Period

204312.50

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

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

-66687.50

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 27 OF 39

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 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)

Ending Spending Action Fund

Full Name (Last, First, Middle Initial)

**A. Victory Film Group, LLC**

Mailing Address 2800 Olympic Blvd., 2nd Floor

City Santa Monica      State CA      Zip Code 90404

Purpose of Disbursement  
media production-see Line 24

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 27 / 2012

Transaction ID : SB21B.4336

Amount of Each Disbursement this Period

-69000.00

Full Name (Last, First, Middle Initial)

**B. Victory Film Group, LLC**

Mailing Address 2800 Olympic Blvd., 2nd Floor

City Santa Monica      State CA      Zip Code 90404

Purpose of Disbursement  
media production-see Line 24

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 27 / 2012

Transaction ID : SB21B.4337

Amount of Each Disbursement this Period

-23000.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City      State      Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D 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)..... ►

-92000.00

3466188.07

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

 PAGE 28 OF 39  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Ending Spending Action Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489856       </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="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M M / D D D / Y Y Y Y Y Y         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>American Media &amp; Advocacy Group</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 5px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 815 Slaters Lane		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 5px;">           09 / 27 / 2012         </div>
City Alexandria State VA Zip Code 22314	Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;">           705756.75         </div>	
Purpose of Expenditure media placement	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____
<div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;">           1300381.75         </div>		<div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;">           Transaction ID : SE.4342         </div>

Full Name (Last, First, Middle Initial) of Payee <b>American Media &amp; Advocacy Group</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 5px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 815 Slaters Lane		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 5px;">           09 / 27 / 2012         </div>
City Alexandria State VA Zip Code 22314	Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;">           235252.25         </div>	
Purpose of Expenditure media placement	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
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		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____
<div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;">           1535634.00         </div>		<div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;">           Transaction ID : SE.4343         </div>

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;">           941009.00         </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;">           _____         </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;">           _____         </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.

Nancy H. Watkins

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y

Signature

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

 PAGE 29 OF 39  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Ending Spending Action Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489856       </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 <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>CD, Inc.</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 17 / 2012	
Mailing Address P. O. Box 1877		Amount <span style="border: 1px solid black; padding: 2px;">8812.50</span>	
City Alexandria	State VA	Zip Code 22313	<b>Transaction ID : SE.4290</b>
Purpose of Expenditure website development	Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: Mitt Romney		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">279812.50</span>			

Full Name (Last, First, Middle Initial) of Payee <b>CD, Inc.</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 17 / 2012	
Mailing Address P. O. Box 1877		Amount <span style="border: 1px solid black; padding: 2px;">8812.50</span>	
City Alexandria	State VA	Zip Code 22313	<b>Transaction ID : SE.4291</b>
Purpose of Expenditure website development	Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">288625.00</span>			

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">17625.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

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.

Nancy H. Watkins

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y  
 10 / 18 / 2012

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

 PAGE 30 OF 39  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Ending Spending Action Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00489856         </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 <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>CD, Inc.</b>			Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> </div>	
Mailing Address P. O. Box 1877			Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">100000.00</span> </div>	
City Alexandria	State VA	Zip Code 22313		
Purpose of Expenditure online advertising	Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____		
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 <span style="border: 1px solid black; padding: 2px;">388625.00</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : SE.4292

Full Name (Last, First, Middle Initial) of Payee <b>CD, Inc.</b>			Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> </div>	
Mailing Address P. O. Box 1877			Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">100000.00</span> </div>	
City Alexandria	State VA	Zip Code 22313		
Purpose of Expenditure online advertising	Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____		
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">488625.00</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : SE.4293

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">200000.00</span> </div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
(c) <b>TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></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.

Nancy H. Watkins

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

Signature

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

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Ending Spending Action Fund</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489856	
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>CD, Inc.</b>		Date MM / DD / YYYY <b>09 / 25 / 2012</b>	
Mailing Address <b>P. O. Box 1877</b>		Amount <b>7000.00</b>	
City <b>Alexandria</b>	State <b>VA</b>	Zip Code <b>22313</b>	Transaction ID : <b>SE.4315</b>
Purpose of Expenditure online advertising	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: District:
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>495625.00</b>		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>CD, Inc.</b>		Date MM / DD / YYYY <b>09 / 25 / 2012</b>	
Mailing Address <b>P. O. Box 1877</b>		Amount <b>7000.00</b>	
City <b>Alexandria</b>	State <b>VA</b>	Zip Code <b>22313</b>	Transaction ID : <b>SE.4316</b>
Purpose of Expenditure online advertising	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Barack Obama</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>502625.00</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>14000.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Nancy H. Watkins

[Electronically Filed]

Signature

Date

MM / DD / YYYY  
**10 / 18 / 2012**

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

 PAGE 32 OF 39  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Ending Spending Action Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489856       </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 <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>	

Full Name (Last, First, Middle Initial) of Payee <b>DDC Advocacy</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           MM / DD / YYYY            09 / 29 / 2012         </div>
Mailing Address 174 Waterfront Street, Suite 500		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           15000.00         </div>
City National Harbor	State MD	
Zip Code 20745	<b>Transaction ID : SE.4384</b>	
Purpose of Expenditure yard signs	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1550634.00</span>		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>DDC Advocacy</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           MM / DD / YYYY            09 / 29 / 2012         </div>
Mailing Address 174 Waterfront Street, Suite 500		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           15000.00         </div>
City National Harbor	State MD	
Zip Code 20745	<b>Transaction ID : SE.4385</b>	
Purpose of Expenditure t-shirts	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1565634.00</span>		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; display: inline-block;">         30000.00       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         0.00       </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         30000.00       </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.

Nancy H. Watkins

[Electronically Filed]

Date

MM / DD / YYYY  
 10 / 18 / 2012

Signature



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

 PAGE 33 OF 39  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Ending Spending Action Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489856       </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 <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>DDC Advocacy</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            09 / 29 / 2012         </div>
Mailing Address 174 Waterfront Street, Suite 500		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           15000.00         </div>
City National Harbor	State MD	
Purpose of Expenditure door-to-door hangers/literature	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span> 1580634.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : SE.4387

Full Name (Last, First, Middle Initial) of Payee <b>DDC Advocacy</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            09 / 29 / 2012         </div>
Mailing Address 174 Waterfront Street, Suite 500		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           53000.00         </div>
City National Harbor	State MD	
Purpose of Expenditure direct mail services	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span> 1633634.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : SE.4389

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         68000.00       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         0.00       </div>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         68000.00       </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.

Nancy H. Watkins

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y  
 10 / 18 / 2012

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

 PAGE 34 OF 39  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Ending Spending Action Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489856       </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>DDC Advocacy</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           09 / 29 / 2012         </div>
Mailing Address 174 Waterfront Street, Suite 500		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           105500.00         </div>
City National Harbor	State MD	
Zip Code 20745		<b>Transaction ID : SE.4395</b>
Purpose of Expenditure door-to-door GOTV field operations	Category/ Type	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: Barack Obama		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

1739134.00

Full Name (Last, First, Middle Initial) of Payee <b>DDC Advocacy</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           09 / 29 / 2012         </div>
Mailing Address 174 Waterfront Street, Suite 500		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           105500.00         </div>
City National Harbor	State MD	
Zip Code 20745		<b>Transaction ID : SE.4396</b>
Purpose of Expenditure door-to-door GOTV field operations	Category/ Type	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: Mitt Romney		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

1844634.00

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         211000.00       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         0.00       </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         211000.00       </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.

Nancy H. Watkins

[Electronically Filed]

Date

10 / 18 / 2012

Signature

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

 PAGE 35 OF 39  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Ending Spending Action Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00489856       </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="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">           M M M / D D D / Y Y Y Y Y Y         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Nahigian Strategies, LLC</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 331 Cameron Station Blvd.		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">           09 / 14 / 2012         </div>
City Alexandria State VA Zip Code 22304	Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">           3300.00         </div>	
Purpose of Expenditure media production	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Josh Mandel		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) <span style="border-bottom: 1px solid black; display: inline-block; width: 100px;"></span>
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">           3300.00         </div>		

Transaction ID : SE.4273

Full Name (Last, First, Middle Initial) of Payee <b>Nahigian Strategies, LLC</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 331 Cameron Station Blvd.		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">           09 / 28 / 2012         </div>
City Alexandria State VA Zip Code 22304	Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">           4950.00         </div>	
Purpose of Expenditure media production	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Sherrod Brown		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) <span style="border-bottom: 1px solid black; display: inline-block; width: 100px;"></span>
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">           71435.00         </div>		

Transaction ID : SE.4365

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">           8250.00         </div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">                     </div>
(c) <b>TOTAL</b> Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">                     </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.

Nancy H. Watkins

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Signature

Date

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

 PAGE 36 OF 39  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Ending Spending Action Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00489856       </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>Nahigian Strategies, LLC</b>			Date MM / DD / YYYY 09 / 28 / 2012	
Mailing Address 331 Cameron Station Blvd.			Amount 1650.00	
City Alexandria	State VA	Zip Code 22304	Transaction ID : SE.4366	
Purpose of Expenditure media production		Category/ Type	Office Sought: <input type="checkbox"/> House    State: OH <input checked="" type="checkbox"/> Senate    District: <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Josh Mandel			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought			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>Smart Media Group, LLC</b>			Date MM / DD / YYYY 09 / 14 / 2012	
Mailing Address 814 King Street			Amount 63185.00	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.4275	
Purpose of Expenditure media placement		Category/ Type	Office Sought: <input type="checkbox"/> House    State: OH <input checked="" type="checkbox"/> Senate    District: <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Josh Mandel			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	64835.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures.....	

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

Nancy H. Watkins

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Date

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10 / 18 / 2012

Signature

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

 PAGE 37 OF 39  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Ending Spending Action Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00489856         </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 <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Smart Media Group, LLC</b>			Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> </div>	
Mailing Address 814 King Street			Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">109912.50</span> </div>	
City Alexandria	State VA	Zip Code 22314		
Purpose of Expenditure media placement	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: <span style="border: 1px solid black; padding: 2px;"> </span>		
Name of Federal Candidate Supported or Opposed by Expenditure: Sherrod Brown			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">182997.50</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) <span style="border: 1px solid black; padding: 2px;"> </span>	

Transaction ID : SE.4369

Full Name (Last, First, Middle Initial) of Payee <b>Smart Media Group, LLC</b>			Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> </div>	
Mailing Address 814 King Street			Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">77452.50</span> </div>	
City Alexandria	State VA	Zip Code 22314		
Purpose of Expenditure media placement	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: <span style="border: 1px solid black; padding: 2px;"> </span>		
Name of Federal Candidate Supported or Opposed by Expenditure: Josh Mandel			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;">260450.00</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) <span style="border: 1px solid black; padding: 2px;"> </span>	

Transaction ID : SE.4370

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">187365.00</span> </div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"> </span> </div>
(c) <b>TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"> </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.

Nancy H. Watkins

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Date

Signature

M M / D D / Y Y Y Y Y Y

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

 PAGE 38 OF 39  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Ending Spending Action Fund</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489856	
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>Victory Film Group, LLC</b>			Date MM / DD / YYYY <b>09 / 16 / 2012</b>	
Mailing Address 2800 Olympic Blvd., 2nd Floor			Amount <b>189500.00</b>	
City Santa Monica	State CA	Zip Code 90404	Transaction ID : <b>SE.4297</b>	
Purpose of Expenditure web videos		Category/ Type <b>004</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>189500.00</b>			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>Victory Film Group, LLC</b>			Date MM / DD / YYYY <b>09 / 16 / 2012</b>	
Mailing Address 2800 Olympic Blvd., 2nd Floor			Amount <b>81500.00</b>	
City Santa Monica	State CA	Zip Code 90404	Transaction ID : <b>SE.4299</b>	
Purpose of Expenditure web videos		Category/ Type <b>004</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
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 <b>271000.00</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>271000.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Nancy H. Watkins

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**10 / 18 / 2012**

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

 PAGE 39 OF 39  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Ending Spending Action Fund</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489856
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee <b>Victory Film Group, LLC</b>		Date MM / DD / YYYY <b>09 / 27 / 2012</b>
Mailing Address 2800 Olympic Blvd., 2nd Floor		Amount <b>69000.00</b>
City Santa Monica	State CA	Zip Code 90404
Purpose of Expenditure media production	Category/ Type	Transaction ID : <b>SE.4338</b>
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>571625.00</b>		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>Victory Film Group, LLC</b>		Date MM / DD / YYYY <b>09 / 27 / 2012</b>
Mailing Address 2800 Olympic Blvd., 2nd Floor		Amount <b>23000.00</b>
City Santa Monica	State CA	Zip Code 90404
Purpose of Expenditure media production	Category/ Type	Transaction ID : <b>SE.4339</b>
Name of Federal Candidate Supported or Opposed by Expenditure: Mitt Romney		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>594625.00</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>92000.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	<b>2105084.00</b>

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

Nancy H. Watkins

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Signature

Date

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**10 / 18 / 2012**