

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 CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC

ADDRESS (number and street) 3900 ESSEX LANE SUITE 250 HOUSTON TX 77027 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00502849 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report. (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3) [X], Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE). (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S). (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S).

5. Covering Period 02 / 01 / 2012 through 02 / 29 / 2012

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

Type or Print Name of Treasurer Jonathan Martin

Signature of Treasurer Jonathan Martin [Electronically Filed] Date 07 / 23 / 2012

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>		1673194.29
(b) Cash on Hand at Beginning of Reporting Period.....	1367806.32	
(c) Total Receipts (from Line 19) .....	46332.08	59967.08
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1414138.40	1733161.37
7. Total Disbursements (from Line 31).....	808993.36	1128016.33
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	605145.04	605145.04
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC

Report Covering the Period: From: 02 / 01 / 2012 To: 02 / 29 / 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).....	38850.00	52350.00
(ii) Unitemized .....	7482.08	7617.08
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	46332.08	59967.08
(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) .....	46332.08	59967.08
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	46332.08	59967.08
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	46332.08	59967.08

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	520150.71	775335.18
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	520150.71	775335.18
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) .....	288842.65	352681.15
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	808993.36	1128016.33
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	808993.36	1128016.33

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	46332.08	59967.08
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	46332.08	59967.08
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	520150.71	775335.18
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	520150.71	775335.18

**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 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC**

**A. Nathan B. Bachman**  
Full Name (Last, First, Middle Initial)

Mailing Address 7824 Laurel Ave.

City Cincinnati State OH Zip Code 45243

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

Name of Employer Self Occupation Investments

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
02 / 28 / 2012  
**Transaction ID : SA11AI.4623**

Amount of Each Receipt this Period  
10000.00

Individual Contribution

**B. John E. Downing**  
Full Name (Last, First, Middle Initial)

Mailing Address 985 Matlock Road

City Bowling Green State KY Zip Code 42104

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
02 / 17 / 2012  
**Transaction ID : SA11AI.4600**

Amount of Each Receipt this Period  
250.00

Online Contribution

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

Mailing Address 15873 East Alta Vista Way

City San Jose State CA Zip Code 95127

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

Name of Employer N/A Occupation Software Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
02 / 10 / 2012  
**Transaction ID : SA11AI.4584**

Amount of Each Receipt this Period  
250.00

Online Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC**

**A. Mrs. M.D. Fletcher**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1727 Evergreen  
 665-3183  
 City Pampa State TX Zip Code 79065  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N/A Occupation Retired  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300.00**

Date of Receipt **02 / 02 / 2012**  
**Transaction ID : SA11AI.4615**  
 Amount of Each Receipt this Period **300.00**  
 Individual Contribution

**B. Anthony Bartholomew Mcguire**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 57 E. Delaware Place  
 City Chicago State IL Zip Code 60611  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Mcguire Engineers, Inc. Occupation Engineer  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt **02 / 16 / 2012**  
**Transaction ID : SA11AI.4596**  
 Amount of Each Receipt this Period **250.00**  
 Online Contribution

**C. Eric Pulaski**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address San Felipe St.  
 City Houston State TX Zip Code 77066  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SmartVault Occupation CEO  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt **02 / 06 / 2012**  
**Transaction ID : SA11AI.4617**  
 Amount of Each Receipt this Period **1000.00**  
 Individual Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1550.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 8 OF 25  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC**

Full Name (Last, First, Middle Initial)  
**A. Edwin C. Sandham Rev. Trust**

Mailing Address 1964 St. Andrews Drive

City State Zip Code  
Palm City FL 34990

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

Name of Employer Occupation  
N/A N/A

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 02 / 2012  
**Transaction ID : SA11AI.4613**

Amount of Each Receipt this Period  
300.00

Full Name (Last, First, Middle Initial)  
**B. George Spix**

Mailing Address 1 Microsoft Way

City State Zip Code  
Redmond WA 98052

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

Name of Employer Occupation  
Microsoft Engineer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 10 / 2012  
**Transaction ID : SA11AI.4582**

Amount of Each Receipt this Period  
1000.00

Online Contribution

Full Name (Last, First, Middle Initial)  
**C. E.R. Stojack**

Mailing Address 4165 Dorset Dr.

City State Zip Code  
Cypress CA 90530

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

Name of Employer Occupation  
LVM N/A

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 06 / 2012  
**Transaction ID : SA11AI.4621**

Amount of Each Receipt this Period  
500.00

Individual Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1800.00

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



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

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

FOR LINE NUMBER: PAGE 9 OF 25  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC**

**A.** Full Name (Last, First, Middle Initial)  
**Dean V. White**

Mailing Address 1000 E 80th Place, Ste. 700N

City State Zip Code  
Merrille IN 46410

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

Name of Employer Occupation  
Whiteco Industries Executive

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 28 / 2012  
**Transaction ID : SA11AI.4625**

Amount of Each Receipt this Period  
25000.00

Individual Contribution

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	25000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	38850.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC**

Full Name (Last, First, Middle Initial)

**A. ASAP, LLC**

Mailing Address PO Box 19366

City Kalamazoo State MI Zip Code 49019

Purpose of Disbursement  
Research and polling data

005

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 10 / 2012

**Transaction ID : SB21B.4668**

Amount of Each Disbursement this Period

52000.00

Full Name (Last, First, Middle Initial)

**B. ASAP, LLC**

Mailing Address PO Box 19366

City Kalamazoo State MI Zip Code 49019

Purpose of Disbursement  
Research & polling data

004

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 10 / 2012

**Transaction ID : SB21B.4669**

Amount of Each Disbursement this Period

37000.00

Full Name (Last, First, Middle Initial)

**C. ASAP, LLC**

Mailing Address PO Box 19366

City Kalamazoo State MI Zip Code 49019

Purpose of Disbursement  
Research & polling data

005

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 15 / 2012

**Transaction ID : SB21B.4670**

Amount of Each Disbursement this Period

52000.00

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

141000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC**

Full Name (Last, First, Middle Initial)

**A. ASAP, LLC**

Mailing Address PO Box 19366

City Kalamazoo State MI Zip Code 49019

Purpose of Disbursement  
Research & polling data

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 15 / 2012

**Transaction ID : SB21B.4671**

Amount of Each Disbursement this Period

37000.00

005

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Bank of America**

Mailing Address PO Box 25118

City Tampa State FL Zip Code 33622-5118

Purpose of Disbursement  
Bank fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2012

**Transaction ID : SB21B.4632**

Amount of Each Disbursement this Period

310.00

001

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Brierfield Campaigns, Inc**

Mailing Address 1000 E William St.  
Suite 204

City Carson City State NV Zip Code 89701

Purpose of Disbursement  
Field work

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 02 / 2012

**Transaction ID : SB21B.4661**

Amount of Each Disbursement this Period

10869.51

001

Category/  
Type

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

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

48179.51

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC**

Full Name (Last, First, Middle Initial)

**A. Brierfield Campaigns, Inc**

Mailing Address 1000 E William St.  
Suite 204

City Carson City State NV Zip Code 89701

Purpose of Disbursement  
Field work

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 13 / 2012

**Transaction ID : SB21B.4673**

Amount of Each Disbursement this Period

25000.00

Full Name (Last, First, Middle Initial)

**B. Brierfield Campaigns, Inc**

Mailing Address 1000 E William St.  
Suite 204

City Carson City State NV Zip Code 89701

Purpose of Disbursement  
Field work

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 15 / 2012

**Transaction ID : SB21B.4677**

Amount of Each Disbursement this Period

43000.00

Full Name (Last, First, Middle Initial)

**C. Ceterus, Inc.**

Mailing Address PO Box 19366

City Kalamazoo State MI Zip Code 49019

Purpose of Disbursement  
Accounting fees

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 01 / 2012

**Transaction ID : SB21B.4631**

Amount of Each Disbursement this Period

2000.00

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

70000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC**

Full Name (Last, First, Middle Initial)

**A. Hannah Christian**

Mailing Address 3900 Essex Lane  
Ste. 250

City Houston State TX Zip Code 77027

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.4680**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. CMF Communications**

Mailing Address 25000 Portofino Cir.  
#129

City Palm Beach Gardens State FL Zip Code 33148-1293

Purpose of Disbursement  
Pre-payment for March independent expenditures

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.4675**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. CMF Communications**

Mailing Address 25000 Portofino Cir.  
#129

City Palm Beach Gardens State FL Zip Code 33148-1293

Purpose of Disbursement  
Administrative costs to vendor over and above independent expenditures

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.5442**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC**

Full Name (Last, First, Middle Initial)

**A. Harris Media**

Mailing Address 815 Brazos  
Ste. 710

City Austin State TX Zip Code 78701

Purpose of Disbursement  
Website design & development

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 08 / 2012

**Transaction ID : SB21B.4640**

Amount of Each Disbursement this Period

18707.31

Full Name (Last, First, Middle Initial)

**B. Landslide Consulting, LLC**

Mailing Address 2116 Daniels Ave.

City Akron State OH Zip Code 44312

Purpose of Disbursement  
Field work

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 01 / 2012

**Transaction ID : SB21B.4659**

Amount of Each Disbursement this Period

15455.52

Full Name (Last, First, Middle Initial)

**C. Landslide Consulting, LLC**

Mailing Address 2116 Daniels Ave.

City Akron State OH Zip Code 44312

Purpose of Disbursement  
Field work

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 17 / 2012

**Transaction ID : SB21B.4666**

Amount of Each Disbursement this Period

17192.50

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

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

51355.33

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC**

Full Name (Last, First, Middle Initial)

**A. LeClairRyan**

Mailing Address PO Box 2499

City Richmond State VA Zip Code 23218

Purpose of Disbursement  
Legal fees

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 17 / 2012

Transaction ID : SB21B.4635

Amount of Each Disbursement this Period

3600.00

Full Name (Last, First, Middle Initial)

**B. Jonathan Martin**

Mailing Address 1739 Maybank Highway  
Suite T-346

City Charleston State SC Zip Code 29412

Purpose of Disbursement  
Treasurer fees

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 01 / 2012

Transaction ID : SB21B.4634

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Raconteur Media Company, Inc.**

Mailing Address 720 Brazos Street  
Ste. 400

City Austin State TX Zip Code 78701

Purpose of Disbursement  
Field work

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 08 / 2012

Transaction ID : SB21B.4672

Amount of Each Disbursement this Period

8000.00

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

12100.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC**

Full Name (Last, First, Middle Initial)

**A. Relevant Information Ltd.**

Mailing Address 439 E 9th Street

City New York State NY Zip Code 10009

Purpose of Disbursement  
Press relations

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 08 / 2012

**Transaction ID : SB21B.4663**

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

**B. Relevant Information Ltd.**

Mailing Address 439 E 9th Street

City New York State NY Zip Code 10009

Purpose of Disbursement  
Press relations

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 08 / 2012

**Transaction ID : SB21B.4665**

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

**C. Jamie Story**

Mailing Address 3900 Essex Lane  
Ste. 250

City Houston State TX Zip Code 77027

Purpose of Disbursement  
Payroll

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 01 / 2012

**Transaction ID : SB21B.4679**

Amount of Each Disbursement this Period

1000.00

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

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

7000.00



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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC**

Full Name (Last, First, Middle Initial)

**A. The Schuman Group**

Mailing Address 7660 Fay Ave.

City La Jolla State CA Zip Code 92037

Purpose of Disbursement  
Field work

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
02 / 02 / 2012

**Transaction ID : SB21B.4662**

Amount of Each Disbursement this Period

12540.00

Full Name (Last, First, Middle Initial)

**B. Thomas Graphics, Inc.**

Mailing Address P.O. Box 142226

City Austin State TX Zip Code 78714-2226

Purpose of Disbursement  
Prepayment of independent expenditures not yet disseminated

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
02 / 07 / 2012

**Transaction ID : SB21B.4667**

Amount of Each Disbursement this Period

15950.00

Full Name (Last, First, Middle Initial)

**C. Thomas Graphics, Inc.**

Mailing Address P.O. Box 142226

City Austin State TX Zip Code 78714-2226

Purpose of Disbursement  
Prepayment for independent expenditures not yet disseminated.

**004**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
02 / 07 / 2012

**Transaction ID : SB21B.5447**

Amount of Each Disbursement this Period

4546.50

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

33036.50

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC**

Full Name (Last, First, Middle Initial)

**A. Thomas Graphics, Inc.**

Mailing Address P.O. Box 142226

City Austin State TX Zip Code 78714-2226

Purpose of Disbursement  
Prepayment of independent expenditures not yet disseminated

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4654**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Thomas Graphics, Inc.**

Mailing Address P.O. Box 142226

City Austin State TX Zip Code 78714-2226

Purpose of Disbursement  
Prepayment of independent expenditures not yet disseminated

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4656**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Corie Whalen**

Mailing Address 2565 Marilee Lane #2

City Houston State TX Zip Code 77057

Purpose of Disbursement  
Payroll

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4658**

Amount of Each Disbursement this Period

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

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

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

NAME OF COMMITTEE (In Full) <b>CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC</b>		FEC IDENTIFICATION NUMBER <b>C</b> C00502849
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>CMF Communications</b>		Date MM / DD / YYYY 02 / 13 / 2012
Mailing Address 25000 Portofino Cir. #129		Amount 26823.49
City Palm Beach Gardens	State FL	Zip Code 33148-1293
Purpose of Expenditure Mailer	Category/ Type 004	Transaction ID : SE.4229
Name of Federal Candidate Supported or Opposed by Expenditure: DENNIS J KUCINICH		Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 90661.99		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee <b>CMF Communications</b>		Date MM / DD / YYYY 02 / 16 / 2012
Mailing Address 25000 Portofino Cir. #129		Amount 10579.06
City Palm Beach Gardens	State FL	Zip Code 33148-1293
Purpose of Expenditure Mailer	Category/ Type 004	Transaction ID : SE.4302
Name of Federal Candidate Supported or Opposed by Expenditure: DENNIS J KUCINICH		Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 101241.05		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	37402.55
(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.

*Jonathan Martin*

Signature

[Electronically Filed]

Date

MM / DD / YYYY  
07 / 23 / 2012

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

NAME OF COMMITTEE (In Full) <b>CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00502849
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>CMF Communications</b>		Date MM / DD / YYYY 02 / 20 / 2012
Mailing Address 25000 Portofino Cir. #129		Amount 14599.60
City Palm Beach Gardens	State FL	Zip Code 33148-1293
Purpose of Expenditure Cookie Ads	Category/ Type 004	Transaction ID : SE.4315
Name of Federal Candidate Supported or Opposed by Expenditure: DEBORAH 'DEBBIE' HALVORSON		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 02
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
14599.60		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee <b>CMF Communications</b>		Date MM / DD / YYYY 02 / 23 / 2012
Mailing Address 25000 Portofino Cir. #129		Amount 1000.00
City Palm Beach Gardens	State FL	Zip Code 33148-1293
Purpose of Expenditure Email Supporting Candidate	Category/ Type 004	Transaction ID : SE.4320
Name of Federal Candidate Supported or Opposed by Expenditure: DEBORAH 'DEBBIE' HALVORSON		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 02
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
15599.60		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	15599.60
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures.....	

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*Jonathan Martin*  
Signature

[Electronically Filed] Date MM / DD / YYYY  
07 / 23 / 2012

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

NAME OF COMMITTEE (In Full) <b>CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00502849
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>Fortune Media, Inc.</b>		Date MM / DD / YYYY <b>02 / 24 / 2012</b>
Mailing Address <b>527 Avenue B</b>		Amount <b>116111.00</b>
City <b>Redondo Beach</b>	State <b>CA</b>	
Zip Code <b>90277-4183</b>	<b>Transaction ID : SE.4324</b>	
Purpose of Expenditure <b>Cable Advertising</b>	Category/Type <b>004</b>	Office Sought: <input checked="" type="checkbox"/> House    State: <b>OH</b> <input type="checkbox"/> Senate    District: <b>09</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>MARCY C HON. KAPTUR</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>217352.05</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee <b>The Schuman Group</b>		Date MM / DD / YYYY <b>02 / 15 / 2012</b>
Mailing Address <b>7660 Fay Ave.</b>		Amount <b>14975.09</b>
City <b>La Jolla</b>	State <b>CA</b>	
Zip Code <b>92037</b>	<b>Transaction ID : SE.4480</b>	
Purpose of Expenditure <b>Direct mailer</b>	Category/Type <b>006</b>	Office Sought: <input checked="" type="checkbox"/> House    State: <b>OH</b> <input type="checkbox"/> Senate    District: <b>02</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>JEANNETTE H SCHMIDT</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>14975.09</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>131086.09</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	

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

*Jonathan Martin*  
Signature

[Electronically Filed]    Date **07 / 23 / 2012**

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

NAME OF COMMITTEE (In Full) <b>CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00502849
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>The Schuman Group</b>		Date <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>02 / 20 / 2012</b>
Mailing Address <b>7660 Fay Ave.</b>		Amount <span style="margin-left: 20px;">20798.74</span>
City <b>La Jolla</b>	State <b>CA</b>	
Zip Code <b>92037</b>	<b>Transaction ID : SE.4311</b>	
Purpose of Expenditure <b>Post Card</b>	Category/Type <b>004</b>	Office Sought: <input checked="" type="checkbox"/> House State: <b>AL</b> <input type="checkbox"/> Senate District: <b>01</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>JO BONNER</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">20798.74</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee <b>The Schuman Group</b>		Date <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>02 / 22 / 2012</b>
Mailing Address <b>7660 Fay Ave.</b>		Amount <span style="margin-left: 20px;">14975.09</span>
City <b>La Jolla</b>	State <b>CA</b>	
Zip Code <b>92037</b>	<b>Transaction ID : SE.4483</b>	
Purpose of Expenditure <b>Direct mailer</b>	Category/Type <b>006</b>	Office Sought: <input checked="" type="checkbox"/> House State: <b>OH</b> <input type="checkbox"/> Senate District: <b>02</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>JEANNETTE H SCHMIDT</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">29950.18</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="margin-left: 20px;">35773.83</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<span style="margin-left: 20px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="margin-left: 20px;"></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.

*Jonathan Martin*

Signature [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**07 / 23 / 2012**

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

NAME OF COMMITTEE (In Full) <b>CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC</b>		FEC IDENTIFICATION NUMBER <b>C</b> C00502849
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>The Schuman Group</b>		Date MM / DD / YYYY 02 / 24 / 2012
Mailing Address 7660 Fay Ave.		Amount 11347.66
City La Jolla	State CA	Zip Code 92037
Purpose of Expenditure Direct mailer	Category/ Type 006	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 02
Name of Federal Candidate Supported or Opposed by Expenditure: JEANNETTE H SCHMIDT		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 41297.84		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee <b>The Schuman Group</b>		Date MM / DD / YYYY 02 / 28 / 2012
Mailing Address 7660 Fay Ave.		Amount 11347.21
City La Jolla	State CA	Zip Code 92037
Purpose of Expenditure Direct mailer	Category/ Type 006	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 02
Name of Federal Candidate Supported or Opposed by Expenditure: JEANNETTE H SCHMIDT		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 52645.05		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	22694.87
(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.

*Jonathan Martin*  
Signature \_\_\_\_\_ Date MM / DD / YYYY  
07 / 23 / 2012  
[Electronically Filed]

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

NAME OF COMMITTEE (In Full) <b>CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00502849
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>The Schuman Group</b>		Date MM / DD / YYYY <b>02 / 28 / 2012</b>
Mailing Address <b>7660 Fay Ave.</b>		Amount <b>11357.21</b>
City <b>La Jolla</b>	State <b>CA</b>	
Zip Code <b>92037</b>	<b>Transaction ID : SE.4491</b>	
Purpose of Expenditure <b>Direct mail piece</b>	Category/ Type <b>006</b>	Office Sought: <input checked="" type="checkbox"/> House    State: <b>OH</b> <input type="checkbox"/> Senate    District: <b>02</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>JEANNETTE H SCHMIDT</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>64002.26</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee <b>The Schuman Group</b>		Date MM / DD / YYYY <b>02 / 29 / 2012</b>
Mailing Address <b>7660 Fay Ave.</b>		Amount <b>15950.00</b>
City <b>La Jolla</b>	State <b>CA</b>	
Zip Code <b>92037</b>	<b>Transaction ID : SE.4330</b>	
Purpose of Expenditure <b>Online Media Buy and Production</b>	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House    State: <b>OH</b> <input type="checkbox"/> Senate    District: <b>02</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>JEANNETTE H SCHMIDT</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>79952.26</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>27307.21</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

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

*Jonathan Martin*

Signature \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY **07 / 23 / 2012**



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

NAME OF COMMITTEE (In Full) <b>CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black; padding: 2px;">C</span> C00502849       </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>The Schuman Group</b>		Date MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">02 / 29 / 2012</div>
Mailing Address 7660 Fay Ave.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">18978.50</div>
City La Jolla	State CA	
Zip Code 92037	<b>Transaction ID : SE.4494</b>	
Purpose of Expenditure Direct mail piece	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">006</div>	Office Sought: <input checked="" type="checkbox"/> House    State: OH <input type="checkbox"/> Senate    District: 02 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JEANNETTE H SCHMIDT		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">98930.76</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee		Date MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px;"> </div>
Mailing Address		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px;"> </div>
City	State	
Zip Code	<b>Office Sought:</b> <input type="checkbox"/> House    State: _____ <input type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President	
Purpose of Expenditure		<b>Check One:</b> <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </div>		<b>Disbursement For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____
Name of Federal Candidate Supported or Opposed by Expenditure:		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>		

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	18978.50
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	288842.65

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.

*Jonathan Martin*

Signature \_\_\_\_\_ [Electronically Filed] Date 07 / 23 / 2012