

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

TFP-FOJB Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>		<input type="text" value="122077.32"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="122077.32"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="509900.00"/>	<input type="text" value="509900.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="631977.32"/>	<input type="text" value="631977.32"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="430186.32"/>	<input type="text" value="430186.32"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="201791.00"/>	<input type="text" value="201791.00"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

TFP-FOJB Committee

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2012 To: M M / D D / Y Y Y Y 03 / 31 / 2012

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	96770.00	96770.00
(ii) Unitemized	1630.00	1630.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	98400.00	98400.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	411500.00	411500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	509900.00	509900.00
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))..... ▶	509900.00	509900.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	509900.00	509900.00

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	123466.42	123466.42
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	123466.42	123466.42
22. Transfers to Affiliated/Other Party Committees.....	306484.90	306484.90
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
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	235.00	235.00
(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)).....	235.00	235.00
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)) ..	430186.32	430186.32
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	430186.32	430186.32

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)	509900.00	509900.00
34. Total Contribution Refunds (from Line 28(d))	235.00	235.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	509665.00	509665.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	123466.42	123466.42
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	123466.42	123466.42

**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 57
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
TFP-FOJB Committee

A. MR. SAMUEL D. ADCOCK
 Full Name (Last, First, Middle Initial)
 Mailing Address 113 KINGSLEY ROAD SE
 City VIENNA State VA Zip Code 22180-6502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer EADS NORTH AMERICA Occupation SENIOR VP, GOVERNMENT RELATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 12 / 2012
Transaction ID : SA11.355041
 Amount of Each Receipt this Period 5000.00
 CONTRIBUTION

B. MRS. SUSAN ARTHUR ANDRES
 Full Name (Last, First, Middle Initial)
 Mailing Address 600 13TH STREET NW STE. 340 WEST
 City WASHINGTON State DC Zip Code 20005-3005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UNION PACIFIC CORPORATION Occupation EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 01 / 23 / 2012
Transaction ID : SA11.325294
 Amount of Each Receipt this Period 7500.00
 CONTRIBUTION

C. MR. SAMUEL J. BAPTISTA
 Full Name (Last, First, Middle Initial)
 Mailing Address 2015 LORRAINE AVE.
 City MCLEAN State VA Zip Code 22101-5331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer THE BAPTISTA GROUP Occupation LOBBYIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 30 / 2012
Transaction ID : SA11.356061
 Amount of Each Receipt this Period 1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	13500.00
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: (check only one)	PAGE 7 OF 57
	<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)
TFP-FOJB Committee

A. MR. THOMAS F. BEDDOW
Full Name (Last, First, Middle Initial)

Mailing Address 19 EDINBURG LANE

City PINEHURST State NC Zip Code 28374-6714

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 30 / 2012

Transaction ID : SA11.334172

Amount of Each Receipt this Period
 7500.00

CONTRIBUTION

B. MRS. CYNTHIA E. BERRY
Full Name (Last, First, Middle Initial)

Mailing Address 9915 DEERFIELD POND DR.

City GREAT FALLS State VA Zip Code 22066-2832

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

Name of Employer POLSINELLI SHUGHART Occupation SHAREHOLDER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2012

Transaction ID : SA11.356067

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. MR. DAVID CONNOLLY
Full Name (Last, First, Middle Initial)

Mailing Address 6814 ROSEWOOD STREET

City ANNANDALE State VA Zip Code 22003-1965

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

Name of Employer CAPITAL ASSOCIATES INC. Occupation ASSOCIATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 15 / 2012

Transaction ID : SA11.355034

Amount of Each Receipt this Period
 235.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 8735.00

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: (check only one)	PAGE 8 OF 57
	<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)
TFP-FOJB Committee

A. MR. JAMAL H. DANIEL
Full Name (Last, First, Middle Initial)

Mailing Address 600 TRAVIS
6800 JP MORGAN CHASE TOWER

City HOUSTON State TX Zip Code 77002-3009

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

Name of Employer CREST INVESTMENT CO. Occupation INVESTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7500.00

Date of Receipt
03 / 12 / 2012
Transaction ID : SA11.355040

Amount of Each Receipt this Period
7500.00

CONTRIBUTION

B. MR. ROBERT J. DOTCHIN
Full Name (Last, First, Middle Initial)

Mailing Address 412 N. SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314-2318

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

Name of Employer ADVOCACY GROUP Occupation PARTNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
03 / 30 / 2012
Transaction ID : SA11.356062

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. MR. JOHN M. DOWD
Full Name (Last, First, Middle Initial)

Mailing Address 1529 CROWELL RD.

City VIENNA State VA Zip Code 22182-1514

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

Name of Employer AKIN GUMP STRAUSS HAVER & FELD LLP Occupation PARTNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
03 / 17 / 2012
Transaction ID : SA11.355048

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	9500.00
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: (check only one)	PAGE 9 OF 57
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TFP-FOJB Committee

A. MR. JAMES L. ERVIN
Full Name (Last, First, Middle Initial)

Mailing Address 116 QUEEN STREET

City ALEXANDRIA State VA Zip Code 22314-2611

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

Name of Employer ERVIN TECHNICAL ASSOCIATES Occupation PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 06 / 2012
Transaction ID : SA11.334180

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

B. MR. JOHN FISH
Full Name (Last, First, Middle Initial)

Mailing Address 306 A STREET SE

City WASHINGTON State DC Zip Code 20003-3832

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

Name of Employer RJ REYNOLDS Occupation VICE PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 06 / 2012
Transaction ID : SA11.334183

Amount of Each Receipt this Period 5000.00

CONTRIBUTION

C. MR. DAVID W. HAARTZ
Full Name (Last, First, Middle Initial)

Mailing Address 2121 JAMIESON AVENUE UNIT 2109

City ALEXANDRIA State VA Zip Code 22314-5717

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 16 / 2012
Transaction ID : SA11.338169

Amount of Each Receipt this Period 500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	6500.00
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: (check only one)	PAGE 10 OF 57
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial) A. PAMELA HASHEM		Date of Receipt MM / DD / YYYY 01 / 19 / 2012 Transaction ID : SA11.355405
Mailing Address 3044 HERRICK ROAD		Amount of Each Receipt this Period 1000.00
City UPPER ARLINGTON	State OH	Zip Code 43221-2620
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer PRH CONSULTING GROUP, LLC	Occupation CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. MR. DAVID W. HOBBS		Date of Receipt MM / DD / YYYY 02 / 06 / 2012 Transaction ID : SA11.334174
Mailing Address 300 NEW JERSEY AVE., NW SUITE 601		Amount of Each Receipt this Period 6600.00
City WASHINGTON	State DC	Zip Code 20001-2080
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer THE HOBBS GROUP	Occupation PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 6600.00	

Full Name (Last, First, Middle Initial) C. MR. ALBERTO KAMHAZI		Date of Receipt MM / DD / YYYY 02 / 25 / 2012 Transaction ID : SA11.340421
Mailing Address 15801 BISCAYNE BLVD.		Amount of Each Receipt this Period 10000.00
City NORTH MIAMI BEACH	State FL	Zip Code 33160-4601
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer 61 HARBOR WAY, LLC	Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

SUBTOTAL of Receipts This Page (optional).....▶	17600.00
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 11 OF 57
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial)
A. SHAHIRA KNIGHT
 Mailing Address 325 7TH ST. NW, #650
 City State Zip Code
 WASHINGTON DC 20004-2824
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 FIDELITY INVESTMENTS GOVERNMENT AFFAIRS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 13 / 2012
Transaction ID : SA11.355378
 Amount of Each Receipt this Period
 3700.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. NEIL J. NARAIN
 Mailing Address 1145 3RD ST. NE
 City State Zip Code
 WASHINGTON DC 20002-3405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 PUBLIC SERVICE ENTERPRISE GROUP MANAGER, FEDERAL GOVERNMENT AFFAI
 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
 03 / 31 / 2012
Transaction ID : SA11.356189
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. MICHAEL G. OXLEY
 Mailing Address 7629 HUNTMASER LANE
 City State Zip Code
 MCLEAN VA 22102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BAKER HOSTETLER ATTORNEY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 7500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2012
Transaction ID : SA11.363263
 Amount of Each Receipt this Period
 7500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 12200.00
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: (check only one)	PAGE 12 OF 57
	<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)
TFP-FOJB Committee

A. MR. GEORGE A. RAMONAS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1655 N. FT. MEYER DR.
 #700
 City ARLINGTON State VA Zip Code 22209-3199
 FEC ID number of contributing federal political committee. **C**
 Name of Employer THE ADVOCACY GROUP Occupation GOVERNMENT AFFAIRS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 01 / 25 / 2012
Transaction ID : SA11.334171
 Amount of Each Receipt this Period 7500.00
 CONTRIBUTION

B. MR. SHANE TEWS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1666 K STREET NW
 SUITE 410
 City WASHINGTON State DC Zip Code 20006-1227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer VERISIGN Occupation VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 06 / 2012
Transaction ID : SA11.334182
 Amount of Each Receipt this Period 1000.00
 CONTRIBUTION

C. MS. LETITIA WHITE
 Full Name (Last, First, Middle Initial)
 Mailing Address 13901 PISCATAWAY DRIVE
 City FORT WASHINGTON State MD Zip Code 20744-6639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer COPELAND LOWERY JACQUEZ DENTON & S Occupation PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 06 / 2012
Transaction ID : SA11.334177
 Amount of Each Receipt this Period 5000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	13500.00
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 13 OF 57
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial)
A. CHOCTAW NATION OF OKLAHOMA

Mailing Address P.O. BOX 1210

City State Zip Code
DURANT OK 74702-1210

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 25 / 2012
Transaction ID : SA11.334170

Amount of Each Receipt this Period
7500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. THE CONNOLLY GROUP

Mailing Address 6814 ROSEWOOD ST.

City State Zip Code
ANNANDALE VA 22003-1965

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 16 / 2012
Transaction ID : SA11.338174

Amount of Each Receipt this Period
235.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. WILEY REIN LLP

Mailing Address 1776 K STREET NW

City State Zip Code
WASHINGTON DC 20006-2304

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2012
Transaction ID : SA11.356188

Amount of Each Receipt this Period
7500.00

CONTRIBUTION

SEE PARTNERS ALLOCATION; SEE ATTRIBUTION BELOW FOR PARTNERS MEETING THE THRESHOLD

SUBTOTAL of Receipts This Page (optional)..... ▶ 15235.00

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: (check only one)	PAGE 14 OF 57
	<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)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial) A. CAROL LAHAM		Date of Receipt MM / DD / YYYY 03 / 31 / 2012 Transaction ID : SA11.356190
Mailing Address 1776 K ST. NW		Amount of Each Receipt this Period 1500.00
City WASHINGTON	State DC	Zip Code 20006-2304
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer WILEY REIN LLP	Occupation PARTNER	[MEMO ITEM] SEE PARTNERS ALLOCATION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) B. CAROL LAHAM		Date of Receipt MM / DD / YYYY 03 / 31 / 2012 Transaction ID : SA11.356317
Mailing Address 1776 K ST. NW		Amount of Each Receipt this Period 1500.00
City WASHINGTON	State DC	Zip Code 20006-2304
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer WILEY REIN LLP	Occupation PARTNER	[MEMO ITEM] SEE PARTNERS ALLOCATION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) C. KEVIN MAYNARD		Date of Receipt MM / DD / YYYY 03 / 31 / 2012 Transaction ID : SA11.356198
Mailing Address 1776 K ST. NW		Amount of Each Receipt this Period 200.00
City WASHINGTON	State DC	Zip Code 20006-2304
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer WILEY REIN LLP	Occupation PARTNER	[MEMO ITEM] SEE PARTNERS ALLOCATION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	0.00
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: (check only one)	PAGE 15 OF 57
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TFP-FOJB Committee

A. KEVIN MAYNARD
Full Name (Last, First, Middle Initial)

Mailing Address 1776 K ST. NW

City WASHINGTON	State DC	Zip Code 20006-2304
--------------------	-------------	------------------------

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

Name of Employer WILEY REIN LLP	Occupation PARTNER
------------------------------------	-----------------------

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
03	/	31	/	2012

Transaction ID : SA11.356321

Amount of Each Receipt this Period

100.00

CONTRIBUTION

[MEMO ITEM]
SEE PARTNERS ALLOCATION

B. ANDREW MCBRIDE
Full Name (Last, First, Middle Initial)

Mailing Address 1776 K ST. NW

City WASHINGTON	State DC	Zip Code 20006-2304
--------------------	-------------	------------------------

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

Name of Employer WILEY REIN LLP	Occupation PARTNER
------------------------------------	-----------------------

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
03	/	31	/	2012

Transaction ID : SA11.356301

Amount of Each Receipt this Period

200.00

CONTRIBUTION

[MEMO ITEM]
SEE PARTNERS ALLOCATION

C. ANDREW MCBRIDE
Full Name (Last, First, Middle Initial)

Mailing Address 1776 K ST. NW

City WASHINGTON	State DC	Zip Code 20006-2304
--------------------	-------------	------------------------

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

Name of Employer WILEY REIN LLP	Occupation PARTNER
------------------------------------	-----------------------

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
03	/	31	/	2012

Transaction ID : SA11.356322

Amount of Each Receipt this Period

100.00

CONTRIBUTION

[MEMO ITEM]
SEE PARTNERS ALLOCATION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
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 16 OF 57
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial)
A. SCOTT MCCALED

Mailing Address 1776 K ST. NW

City WASHINGTON State DC Zip Code 20006-2304

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

Name of Employer WILEY REIN LLP Occupation PARTNER

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
03 / 31 / 2012

Transaction ID : SA11.356302

Amount of Each Receipt this Period
200.00

CONTRIBUTION

[MEMO ITEM]
SEE PARTNERS ALLOCATION

Full Name (Last, First, Middle Initial)
B. SCOTT MCCALED

Mailing Address 1776 K ST. NW

City WASHINGTON State DC Zip Code 20006-2304

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

Name of Employer WILEY REIN LLP Occupation PARTNER

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
03 / 31 / 2012

Transaction ID : SA11.356323

Amount of Each Receipt this Period
100.00

CONTRIBUTION

[MEMO ITEM]
SEE PARTNERS ALLOCATION

Full Name (Last, First, Middle Initial)
C. KIMBERLY MELVIN

Mailing Address 1776 K ST. NW

City WASHINGTON State DC Zip Code 20006-2304

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

Name of Employer WILEY REIN LLP Occupation PARTNER

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
03 / 31 / 2012

Transaction ID : SA11.356303

Amount of Each Receipt this Period
200.00

CONTRIBUTION

[MEMO ITEM]
SEE PARTNERS ALLOCATION

SUBTOTAL of Receipts This Page (optional)..... ▶ **0.00**

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: (check only one)	PAGE 17 OF 57
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TFP-FOJB Committee

A. KIMBERLY MELVIN
Full Name (Last, First, Middle Initial)

Mailing Address 1776 K ST. NW

City WASHINGTON State DC Zip Code 20006-2304

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

Name of Employer WILEY REIN LLP Occupation PARTNER

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
 03 / 31 / 2012

Transaction ID : SA11.356324

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

[MEMO ITEM]
SEE PARTNERS ALLOCATION

B. THOMAS NAVIN
Full Name (Last, First, Middle Initial)

Mailing Address 1776 K ST. NW

City WASHINGTON State DC Zip Code 20006-2304

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

Name of Employer WILEY REIN LLP Occupation PARTNER

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
 03 / 31 / 2012

Transaction ID : SA11.356304

Amount of Each Receipt this Period
 200.00

CONTRIBUTION

[MEMO ITEM]
SEE PARTNERS ALLOCATION

C. THOMAS NAVIN
Full Name (Last, First, Middle Initial)

Mailing Address 1776 K ST. NW

City WASHINGTON State DC Zip Code 20006-2304

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

Name of Employer WILEY REIN LLP Occupation PARTNER

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
 03 / 31 / 2012

Transaction ID : SA11.356325

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

[MEMO ITEM]
SEE PARTNERS ALLOCATION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	96770.00

**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 18 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TFP-FOJB Committee

A. ACTION COMMITTEE FOR RURAL ELECTRIFICATION (ACRE) - NATL. RU
 Full Name (Last, First, Middle Initial)
 Mailing Address 4301 WILSON BOULEVARD
 City WASHINGTON State VA Zip Code 20036
 FEC ID number of contributing federal political committee. **C** C00002972
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 03 / 19 / 2012
Transaction ID : SA11.355055
 Amount of Each Receipt this Period 10000.00
 CONTRIBUTION

B. AETNA INC PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 F ST. NW STE. 350
 City WASHINGTON State DC Zip Code 20001-6706
 FEC ID number of contributing federal political committee. **C** C00181826
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 03 / 30 / 2012
Transaction ID : SA11.356060
 Amount of Each Receipt this Period 10000.00
 CONTRIBUTION

C. AFLAC INCORPORATED PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1932 WYNNNTON RD.
 City COLUMBUS State GA Zip Code 31999-0001
 FEC ID number of contributing federal political committee. **C** C00034157
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 02 / 16 / 2012
Transaction ID : SA11.338171
 Amount of Each Receipt this Period 5000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	25000.00
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: (check only one)	PAGE 19 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TFP-FOJB Committee

A. AFLAC INCORPORATED PAC
Full Name (Last, First, Middle Initial)
Mailing Address 1932 WYNNTON RD.
City COLUMBUS State GA Zip Code 31999-0001
FEC ID number of contributing federal political committee. **C** C00034157
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 02 / 25 / 2012
Transaction ID : SA11.340418
Amount of Each Receipt this Period 5000.00
CONTRIBUTION

B. AGL RESOURCES INC. PAC
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 4569
City ATLANTA State GA Zip Code 30302-4569
FEC ID number of contributing federal political committee. **C** C00145037
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 03 / 19 / 2012
Transaction ID : SA11.355051
Amount of Each Receipt this Period 10000.00
CONTRIBUTION

C. ALLSTATE INSURANCE COMPANY PAC
Full Name (Last, First, Middle Initial)
Mailing Address 2775 SANDERS ROAD SUITE A5
City NORTHBROOK State IL Zip Code 60062-6110
FEC ID number of contributing federal political committee. **C** C00040253
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 19 / 2012
Transaction ID : SA11.355056
Amount of Each Receipt this Period 2500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 17500.00
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 20 OF 57
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial)
A. ALTRIA GROUP, INC PAC

Mailing Address 101 CONSTITUTION AVE, NW

City WASHINGTON State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C** C00089136

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
02 / 06 / 2012

Transaction ID : SA11.334175

Amount of Each Receipt this Period
10000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. AMERICAN BENEFITS COUNCIL PAC

Mailing Address 1501 M STREET NW
STE. 600

City WASHINGTON State DC Zip Code 20005-1775

FEC ID number of contributing federal political committee. **C** C00153171

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
MM / DD / YYYY
03 / 15 / 2012

Transaction ID : SA11.355035

Amount of Each Receipt this Period
3000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. AMERICAN DENTAL ASSOC., PAC

Mailing Address 1111 14TH ST. NW STE. 1100

City WASHINGTON State DC Zip Code 20005-5627

FEC ID number of contributing federal political committee. **C** C00000729

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 15 / 2012

Transaction ID : SA11.355036

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 18000.00

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: (check only one)	PAGE 21 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial)
A. AMERICAN FAMILY MUTUAL INSURANCE CO. PAC

Mailing Address 6000 AMERICAN PARKWAY

City MADISON State WI Zip Code 53783-0001

FEC ID number of contributing federal political committee. **C** C00354290

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 30 / 2012
Transaction ID : SA11.356064

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. AMERISOURCE BERGEN PAC

Mailing Address 1300 MORRIS DRIVE
SUITE 100

City CHESTERBROOK State PA Zip Code 19087-5559

FEC ID number of contributing federal political committee. **C** C00400929

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 16 / 2012
Transaction ID : SA11.338170

Amount of Each Receipt this Period
 10000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. BANK OF AMERICA PAC

Mailing Address 1100 N. KING ST.

City WILMINGTON State DE Zip Code 19884-0011

FEC ID number of contributing federal political committee. **C** C00043489

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 15 / 2012
Transaction ID : SA11.355039

Amount of Each Receipt this Period
 10000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	▶	22500.00
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: (check only one)	PAGE 22 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial) A. BLUE CROSS & BLUE SHIELD PAC		Date of Receipt
Mailing Address 1310 G STREET NW		<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City State Zip Code WASHINGTON DC 20005-3000		Transaction ID : SA11.355346
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00194746"/>		Amount of Each Receipt this Period <input type="text" value="7500.00"/>
Name of Employer	Occupation	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="7500.00"/>	

Full Name (Last, First, Middle Initial) B. CHICAGO MERCANTILE EXCHANGE GROUP INC PAC		Date of Receipt
Mailing Address 20 SOUTH WACKER DRIVE		<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2012"/>
City State Zip Code CHICAGO IL 60606-7431		Transaction ID : SA11.355052
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00076299"/>		Amount of Each Receipt this Period <input type="text" value="10000.00"/>
Name of Employer	Occupation	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="10000.00"/>	

Full Name (Last, First, Middle Initial) C. CISCO SYSTEMS INC FEDERAL PAC AKA CISCO SYSTEMS E-PAC		Date of Receipt
Mailing Address 20 PARK ROAD SUITE E		<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City State Zip Code BURLINGAME CA 94010-4443		Transaction ID : SA11.356066
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00362707"/>		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Name of Employer	Occupation	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="22500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 23 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial) A. COMCAST CORP. POLITICAL ACTION COMMITTEE		Date of Receipt
Mailing Address 1701 JOHN F KENNEDY BLVD. FL 49		<input type="text" value="02"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>
City	State	Zip Code
PHILADELPHIA	PA	19103-2855
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00248716"/>	Transaction ID : SA11.338173
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	CONTRIBUTION
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="5000.00"/>	

Full Name (Last, First, Middle Initial) B. CONSUMER BANKERS ASSOCIATION (CBAPAC)		Date of Receipt
Mailing Address 1000 WILSON BLVD. STE 2500		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
ARLINGTON	VA	22209-3909
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00035535"/>	Transaction ID : SA11.356187
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="10000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	CONTRIBUTION
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="10000.00"/>	

Full Name (Last, First, Middle Initial) C. CORRECTIONS CORPORATION OF AMERICA		Date of Receipt
Mailing Address 10 BURTON HILLS BLVD.		<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2012"/>
City	State	Zip Code
NASHVILLE	TN	37215-6105
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00366468"/>	Transaction ID : SA11.355042
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="10000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	CONTRIBUTION
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="10000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="25000.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 24 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial) A. COX ENTERPRISES PAC (COXPAC) INC		Date of Receipt MM / DD / YYYY 02 / 25 / 2012 Transaction ID : SA11.340420
Mailing Address 975 F STREET NW SUITE 300		Amount of Each Receipt this Period 2500.00
City WASHINGTON	State DC	Zip Code 20004-1459
FEC ID number of contributing federal political committee. C C00477653	CONTRIBUTION	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. CSX CORPORATION GOOD GOVERNMENT FUND PAC		Date of Receipt MM / DD / YYYY 02 / 16 / 2012 Transaction ID : SA11.338172
Mailing Address 1331 PENNSYLVANIA AVE. NW SUITE 560		Amount of Each Receipt this Period 10000.00
City WASHINGTON	State DC	Zip Code 20004-1745
FEC ID number of contributing federal political committee. C C00163832	CONTRIBUTION	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

Full Name (Last, First, Middle Initial) C. DAVITA INC POLITICAL ACTION COMMITTEE (DAVITA)		Date of Receipt MM / DD / YYYY 02 / 13 / 2012 Transaction ID : SA11.335432
Mailing Address 601 HAWAII STREET		Amount of Each Receipt this Period 10000.00
City EL SEGUNDO	State CA	Zip Code 90245-4814
FEC ID number of contributing federal political committee. C C00340943	CONTRIBUTION	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

SUBTOTAL of Receipts This Page (optional).....▶	22500.00
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: (check only one)	PAGE 25 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TFP-FOJB Committee

A. DELTA AIR LINES PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 NEW YORK AVE. NW
 STE 200
 City WASHINGTON State DC Zip Code 20005-6609
 FEC ID number of contributing federal political committee. **C** C00104802
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 12 / 2012
Transaction ID : SA11.355043
 Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

B. DOMINION PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address ONE JAMES RIVER PLAZA, 20TH FLOOR
 P.O. BOX 26666
 City RICHMOND State VA Zip Code 23261-6666
 FEC ID number of contributing federal political committee. **C** C00108209
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 30 / 2012
Transaction ID : SA11.356063
 Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

C. DOW CORNING LEGISLATIVE ACTION TEAM PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 994
 City MIDLAND State MI Zip Code 48686-0001
 FEC ID number of contributing federal political committee. **C** C00386672
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2012
Transaction ID : SA11.334190
 Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12500.00
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: (check only one)	PAGE 26 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial) A. DUKE ENERGY CORPORATION PAC-FEDERAL		Date of Receipt MM / DD / YYYY 02 / 06 / 2012 Transaction ID : SA11.334187
Mailing Address 550 S. TRYON ST. DEC37D		Amount of Each Receipt this Period 10000.00
City CHARLOTTE	State NC	Zip Code 28202-4200
FEC ID number of contributing federal political committee.	C C00083535	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

CONTRIBUTION

Full Name (Last, First, Middle Initial) B. EDWARDS WILDMAN PAC, INC.		Date of Receipt MM / DD / YYYY 02 / 06 / 2012 Transaction ID : SA11.334189
Mailing Address 2800 FINANCIAL PLAZA		Amount of Each Receipt this Period 10000.00
City PROVIDENCE	State RI	Zip Code 02903-2407
FEC ID number of contributing federal political committee.	C C00468009	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

CONTRIBUTION

Full Name (Last, First, Middle Initial) C. EMD SERONO INC. PAC		Date of Receipt MM / DD / YYYY 02 / 06 / 2012 Transaction ID : SA11.334186
Mailing Address 1 TECHNOLOGY PLACE		Amount of Each Receipt this Period 10000.00
City ROCKLAND	State MA	Zip Code 02370-1071
FEC ID number of contributing federal political committee.	C C00258236	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	30000.00
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: (check only one)	PAGE 27 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial) A. EMERGENT BIOSOLUTIONS EMPLOYEES PAC		Date of Receipt
Mailing Address 300 PROFESSIONAL DR.		<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City	State	Zip Code
GAITHERSBURG	MD	20879-3419
FEC ID number of contributing federal political committee.		Transaction ID : SA11.356057
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00380303"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="10000.00"/>
Occupation		CONTRIBUTION
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="10000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. FIFTH THIRD BANCORP PAC		Date of Receipt
Mailing Address 550 EAST WALNUT STREET		<input type="text" value="03"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code
COLUMBUS	OH	43215-5323
FEC ID number of contributing federal political committee.		Transaction ID : SA11.355033
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00290502"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="5000.00"/>
Occupation		CONTRIBUTION
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="5000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. GRANT THORNTON LLP PAC		Date of Receipt
Mailing Address 175 W. JACKSON BLVD. SUITE 2000		<input type="text" value="02"/> / <input type="text" value="13"/> / <input type="text" value="2012"/>
City	State	Zip Code
CHICAGO	IL	60604-2615
FEC ID number of contributing federal political committee.		Transaction ID : SA11.335434
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00408260"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="10000.00"/>
Occupation		CONTRIBUTION
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="10000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="25000.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 28 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial) A. GREAT WEST PAC		Date of Receipt
Mailing Address 8515 E ORCHARD ROAD #2T2		<input type="text" value="02"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City GREENWOOD VILLAGE	State CO	Zip Code 80111-5002
FEC ID number of contributing federal political committee. C C00263723		Transaction ID : SA11.334185
Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>		CONTRIBUTION

Full Name (Last, First, Middle Initial) B. ICE CREAM MILK & CHEESE PAC		Date of Receipt
Mailing Address 1250 H STREET NW SUITE 900		<input type="text" value="02"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City WASHINGTON	State DC	Zip Code 20005-3952
FEC ID number of contributing federal political committee. C C00128231		Transaction ID : SA11.334181
Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="10000.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="10000.00"/>		CONTRIBUTION

Full Name (Last, First, Middle Initial) C. INTEL PAC		Date of Receipt
Mailing Address 1155 F STREET, NW SUITE 1025		<input type="text" value="02"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City WASHINGTON	State DC	Zip Code 20004-1342
FEC ID number of contributing federal political committee. C C00125641		Transaction ID : SA11.334178
Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="7500.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="7500.00"/>		CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="20000.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 29 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial) A. LENDING TREE LLC PAC		Date of Receipt
Mailing Address 11115 RUSHMORE DR.		<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2012"/>
City State Zip Code CHARLOTTE NC 28277-3442		Transaction ID : SA11.355057
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00467381"/>		Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Name of Employer Occupation		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>

Full Name (Last, First, Middle Initial) B. LOCKHEED MARTIN EMPLOYEES' POLITICAL ACTION COMMITTEE		Date of Receipt
Mailing Address 1550 CRYSTAL DRIVE		<input type="text" value="02"/> / <input type="text" value="13"/> / <input type="text" value="2012"/>
City State Zip Code ARLINGTON VA 22202-4135		Transaction ID : SA11.335433
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00303024"/>		Amount of Each Receipt this Period <input type="text" value="10000.00"/>
Name of Employer Occupation		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="10000.00"/>

Full Name (Last, First, Middle Initial) C. MARATHON OIL COMPANY EMPLOYEES PAC		Date of Receipt
Mailing Address 539 S. MAIN ST. RM. 2635		<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City State Zip Code FINDLAY OH 45840-3229		Transaction ID : SA11.356065
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00040568"/>		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Name of Employer Occupation		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="17500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 30 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TFP-FOJB Committee

A. MAYNARD, COOPER & GALE, PC PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1901 6TH AVE. N.
 2400 REGIONS HARBERT PLAZA
 City BIRMINGHAM State AL Zip Code 35203-4652
 FEC ID number of contributing federal political committee. **C** C00272724
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 30 / 2012
Transaction ID : SA11.356069
 Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

B. MEDCO HEALTH PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 2350 KERNER BLVD.
 STE. 250
 City SAN RAFAEL State CA Zip Code 94901-5596
 FEC ID number of contributing federal political committee. **C** C00384362
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 12 / 2012
Transaction ID : SA11.355044
 Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

C. METLIFE, INC. EMPLOYEES' POLITICAL PARTICIPATION FUND A PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1095 AVENUE OF THE AMERICAS
 City NEW YORK State NY Zip Code 10036-6797
 FEC ID number of contributing federal political committee. **C** C00040923
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 30 / 2012
Transaction ID : SA11.356058
 Amount of Each Receipt this Period
 10000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	17500.00
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: (check only one)	PAGE 31 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial)
A. MUTUAL OF OMAHA COMPANIES PAC (IMPAC)

Mailing Address **MUTUAL OF OMAHA PLAZA**

City OMAHA	State NE	Zip Code 68175-0001
----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C C00094581**

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5500.00

Date of Receipt
03 / 19 / 2012

Transaction ID : SA11.355049

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MUTUAL OF OMAHA COMPANIES PAC (IMPAC)

Mailing Address **MUTUAL OF OMAHA PLAZA**

City OMAHA	State NE	Zip Code 68175-0001
----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C C00094581**

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5500.00

Date of Receipt
03 / 19 / 2012

Transaction ID : SA11.355050

Amount of Each Receipt this Period
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MUTUAL OF OMAHA COMPANIES GEN MGRS PAC (COMPAC)

Mailing Address **MUTUAL OF OMAHA PLAZA**

City OMAHA	State NE	Zip Code 68175-0001
----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C C00103572**

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
03 / 19 / 2012

Transaction ID : SA11.355053

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	7500.00
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: (check only one)	PAGE 32 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial)
A. NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC

Mailing Address PO BOX 20865
STE. 1100

City INDIANAPOLIS State IN Zip Code 46220-0865

FEC ID number of contributing federal political committee. **C** C00283135

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 06 / 2012

Transaction ID : SA11.334179

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. NATIONAL GRID USA PAC

Mailing Address 40 SYLVAN RD.

City WALTHAM State MA Zip Code 02451-1120

FEC ID number of contributing federal political committee. **C** C00048702

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2012

Transaction ID : SA11.356059

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. NATIONAL VENTURE CAPITAL ASSN. VENTUREPAC

Mailing Address 1655 FORT MYER DRIVE
SUITE 850

City ARLINGTON State VA Zip Code 22209-3199

FEC ID number of contributing federal political committee. **C** C00150367

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 15 / 2012

Transaction ID : SA11.355037

Amount of Each Receipt this Period
10000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	16000.00
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: (check only one)	PAGE 33 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial) A. NYSE EURONEXT PAC		Date of Receipt
Mailing Address 607 14TH ST. NW. STE. 800		<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2012"/>
City	State	Zip Code
WASHINGTON	DC	20005-2005
FEC ID number of contributing federal political committee.		Transaction ID : SA11.355045
<input type="text" value="C"/> <input type="text" value="C00402974"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="2500.00"/>
Occupation		CONTRIBUTION
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. ORACLE AMERICA INC. PAC		Date of Receipt
Mailing Address 1015 15TH STREET NW SUITE 200		<input type="text" value="02"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City	State	Zip Code
WASHINGTON	DC	20005-2635
FEC ID number of contributing federal political committee.		Transaction ID : SA11.334184
<input type="text" value="C"/> <input type="text" value="C00492355"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="5000.00"/>
Occupation		CONTRIBUTION
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="5000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. POWER PAC EDISON ELECTRIC INSTITUTE		Date of Receipt
Mailing Address 701 PENNSYLVANIA AVE. NW		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
WASHINGTON	DC	20004-2608
FEC ID number of contributing federal political committee.		Transaction ID : SA11.356186
<input type="text" value="C"/> <input type="text" value="C00095869"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="10000.00"/>
Occupation		CONTRIBUTION
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="10000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="17500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 34 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial) A. PRINTING INDUSTRIES OF AMERICA PAC		Date of Receipt
Mailing Address 601 13TH ST NW STE 350S		<input type="text" value="03"/> / <input type="text" value="17"/> / <input type="text" value="2012"/>
City	State	Zip Code
WASHINGTON	DC	20005-3861
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00018028"/>	Transaction ID : SA11.355047
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="10000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	CONTRIBUTION
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="10000.00"/>	

Full Name (Last, First, Middle Initial) B. QUALCOMM, INC QPAC		Date of Receipt
Mailing Address 1730 PENNSYLVANIA AVENUE NW SUITE 850		<input type="text" value="03"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code
WASHINGTON	DC	20006-4724
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00339085"/>	Transaction ID : SA11.355038
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="2500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	CONTRIBUTION
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="2500.00"/>	

Full Name (Last, First, Middle Initial) C. REALGY CORPORATION PAC		Date of Receipt
Mailing Address 1 CAMPUS DRIVE		<input type="text" value="02"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City	State	Zip Code
PARSIPPANY	NJ	07054-4407
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00424218"/>	Transaction ID : SA11.340419
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	CONTRIBUTION
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="5000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="17500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 35 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial) A. SMALL BUSINESS INVESTOR ALLIANCE-PAC		Date of Receipt
Mailing Address 1100 H ST. NW STE. 610		<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City State Zip Code WASHINGTON DC 20005-5495		Transaction ID : SA11.356068
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00109991"/>		Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Name of Employer Occupation		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>

Full Name (Last, First, Middle Initial) B. SWISHER INTERNATIONAL INC PAC FUND		Date of Receipt
Mailing Address 459 E 16TH STREET		<input type="text" value="02"/> / <input type="text" value="13"/> / <input type="text" value="2012"/>
City State Zip Code JACKSONVILLE FL 32206-3025		Transaction ID : SA11.335435
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00312785"/>		Amount of Each Receipt this Period <input type="text" value="10000.00"/>
Name of Employer Occupation		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="10000.00"/>

Full Name (Last, First, Middle Initial) C. TE CONNECTIVITY INC. PAC, TELPAC		Date of Receipt
Mailing Address 607 14TH STREET NW SUITE 250		<input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2012"/>
City State Zip Code WASHINGTON DC 20005-2072		Transaction ID : SA11.325293
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00433482"/>		Amount of Each Receipt this Period <input type="text" value="10000.00"/>
Name of Employer Occupation		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="10000.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="22500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 36 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial)
A. THE FINANCIAL SERVICES ROUNDTABLE PAC

Mailing Address 1001 PENNSYLVANIA AVE. NW.
STE. 500 S.

City WASHINGTON State DC Zip Code 20004-2502

FEC ID number of contributing federal political committee. **C** C00193177

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
01 / 17 / 2012

Transaction ID : SA11.325291

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. TOGETHER FOR OUR MAJORITY PAC (TOMPAC)

Mailing Address P.O. BOX 16488

City ARLINGTON State VA Zip Code 22215-1488

FEC ID number of contributing federal political committee. **C** C00364174

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 30 / 2012

Transaction ID : SA11.356056

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. TYCO INTERNATIONAL EMPLOYEES PAC

Mailing Address 9 ROSZEL ROAD

City PRINCETON State NJ Zip Code 08540-6255

FEC ID number of contributing federal political committee. **C** C00113753

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 06 / 2012

Transaction ID : SA11.334176

Amount of Each Receipt this Period
10000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	17500.00
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: (check only one)	PAGE 37 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial)
A. UNITED FRESH FRUIT & VEGETABLE ASSOC. PAC

Mailing Address 1901 PENNSYLVANIA AVENUE NW
SUITE 1100

City WASHINGTON State DC Zip Code 20006-3412

FEC ID number of contributing federal political committee. **C C00040725**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
03 / 19 / 2012
Transaction ID : SA11.355054

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. UNITED STATES TELECOM ASSOCIATION PAC

Mailing Address 607 14TH STREET, NW
SUITE 400

City WASHINGTON State DC Zip Code 20005-2073

FEC ID number of contributing federal political committee. **C C00000984**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
02 / 06 / 2012
Transaction ID : SA11.334188

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. UNUM PAC

Mailing Address 1 FOUNTAIN SQUARE

City CHATTANOOGA State TN Zip Code 37402-1306

FEC ID number of contributing federal political committee. **C C00177436**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
01 / 17 / 2012
Transaction ID : SA11.325292

Amount of Each Receipt this Period
10000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	13500.00
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: (check only one)	PAGE 38 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial) A. UPSPAC		Date of Receipt MM / DD / YYYY 02 / 13 / 2012 Transaction ID : SA11.335436
Mailing Address 55 GLENLAKE PARKWAY NE		Amount of Each Receipt this Period 9000.00
City ATLANTA	State GA	Zip Code 30328-3474
FEC ID number of contributing federal political committee. C C00064766	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 9000.00	

Full Name (Last, First, Middle Initial) B. VANGUARD COMMITTEE FOR RESPONSIBLE GOV. PAC		Date of Receipt MM / DD / YYYY 03 / 13 / 2012 Transaction ID : SA11.355046
Mailing Address 975 F ST. NW STE 500		Amount of Each Receipt this Period 5000.00
City WASHINGTON	State DC	Zip Code 20004-1457
FEC ID number of contributing federal political committee. C C00410266	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. VIACOM INTERNATIONAL INC. POLITICAL ACTION COMMITTEE		Date of Receipt MM / DD / YYYY 01 / 30 / 2012 Transaction ID : SA11.334173
Mailing Address 1501 M STREET NW SUITE 1100		Amount of Each Receipt this Period 5000.00
City WASHINGTON	State DC	Zip Code 20005-1729
FEC ID number of contributing federal political committee. C C00167759	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional).....▶	19000.00
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: (check only one)	PAGE 39 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TFP-FOJB Committee

A. WATSON PHARMACEUTICALS INC. EMPLOYEES PAC
Full Name (Last, First, Middle Initial)

Mailing Address 311 BONNIE CIRCLE

City CORONA State CA Zip Code 92880-2882

FEC ID number of contributing federal political committee. **C** C00391086

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2012

Transaction ID : SA11.355058

Amount of Each Receipt this Period
 5000.00

CONTRIBUTION

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 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

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	411500.00

**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)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial)

A. KEVIN BOLAND

Mailing Address 320 FIRST ST. SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21.76

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. KEVIN BOLAND

Mailing Address 320 FIRST ST. SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21.77

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. SEAN FINNERTY

Mailing Address 320 FIRST ST. SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21.78

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

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NAME OF COMMITTEE (In Full)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial)

A. CORY FRITZ

Mailing Address 320 First Street SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 01 / 2012

Transaction ID : SB21.79

Amount of Each Disbursement this Period

490.76

Full Name (Last, First, Middle Initial)

B. KEVIN W MCGRANN

Mailing Address 320 First Street SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 27 / 2012

Transaction ID : SB21.80

Amount of Each Disbursement this Period

3478.55

Full Name (Last, First, Middle Initial)

C. MICHAEL SENICH

Mailing Address 320 FIRST ST. SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 20 / 2012

Transaction ID : SB21.64

Amount of Each Disbursement this Period

787.32

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

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

4756.63

**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)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial)

A. Capitol Contender

Mailing Address 274 S. 34D ST.

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement
DATABASE MGMT

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2012

Transaction ID : SB21.13

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Capitol Contender

Mailing Address 274 S. 34D ST.

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement
DATABASE MGMT

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2012

Transaction ID : SB21.22

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement
DATABASE MGMT

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 08 / 2012

Transaction ID : SB21.28

Amount of Each Disbursement this Period

250.00

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

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

1250.00

**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)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 7704 LEESBURG PIKE

City State Zip Code
FALLS CHURCH VA 22043

Purpose of Disbursement
DATABASE MGMT

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21.34

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. COMPLIANCE CONSULTING

Mailing Address PO BOX 365

City State Zip Code
MCLEAN VA 22101

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21.35

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. COMPLIANCE CONSULTING

Mailing Address PO BOX 365

City State Zip Code
MCLEAN VA 22101

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21.36

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

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NAME OF COMMITTEE (In Full)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial)

A. COMPLIANCE CONSULTING

Mailing Address PO BOX 365

City State Zip Code
MCLEAN VA 22101

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
03 / 05 / 2012

Transaction ID : SB21.37

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. DISNEY DESTINATION

Mailing Address 1375 BUENA VISTA DR.
2ND FL. S.

City State Zip Code
LAKE BUENA VISTA FL 32830

Purpose of Disbursement
FACILITY RENTAL / CATERING

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
01 / 05 / 2012

Transaction ID : SB21.38

Amount of Each Disbursement this Period

16450.32

Full Name (Last, First, Middle Initial)

C. Durable Safety Products

Mailing Address 898 WATERWAY PL.

City State Zip Code
LONGWOOD FL 32750

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
01 / 23 / 2012

Transaction ID : SB21.39

Amount of Each Disbursement this Period

3550.00

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

21500.32

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)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial)

A. ELAVON

Mailing Address ONE CONCOURSE PKWY.
STE. 300

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 03 / 2012

Transaction ID : SB21.40

Amount of Each Disbursement this Period

79.95

Full Name (Last, First, Middle Initial)

B. ELAVON

Mailing Address ONE CONCOURSE PKWY.
STE. 300

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21.41

Amount of Each Disbursement this Period

79.95

Full Name (Last, First, Middle Initial)

C. ELAVON

Mailing Address ONE CONCOURSE PKWY.
STE. 300

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 02 / 2012

Transaction ID : SB21.42

Amount of Each Disbursement this Period

79.95

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

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

239.85

**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)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial)

A. ENGAGE LLC

Mailing Address 725 8TH ST. SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
WEB SVC

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21.43

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. ENGAGE LLC

Mailing Address 725 8TH ST. SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
WEB SVC

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21.44

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. ENGAGE LLC

Mailing Address 725 8TH ST. SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
WEB SVC

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21.45

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

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NAME OF COMMITTEE (In Full)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial)

A. ENGAGE LLC

Mailing Address 725 8TH ST. SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
WEB SVC

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

Transaction ID : SB21.46

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. ENGAGE LLC

Mailing Address 725 8TH ST. SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
WEB SVC

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

Transaction ID : SB21.47

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. EIPHANY PRODUCTIONS

Mailing Address 104 HUME AVE.

City ALEXANDRIA State VA Zip Code 22301

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

Transaction ID : SB21.48

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

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NAME OF COMMITTEE (In Full)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial)

A. EPIPHANY PRODUCTIONS

Mailing Address 104 HUME AVE.

City ALEXANDRIA State VA Zip Code 22301

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District: 00

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2012

Transaction ID : SB21.49

Amount of Each Disbursement this Period

4184.68

Full Name (Last, First, Middle Initial)

B. EPIPHANY PRODUCTIONS

Mailing Address 104 HUME AVE.

City ALEXANDRIA State VA Zip Code 22301

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District: 00

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2012

Transaction ID : SB21.50

Amount of Each Disbursement this Period

22515.21

Full Name (Last, First, Middle Initial)

C. EPIPHANY PRODUCTIONS

Mailing Address 104 HUME AVE.

City ALEXANDRIA State VA Zip Code 22301

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District: 00

Date of Disbursement

MM / DD / YYYY
03 / 27 / 2012

Transaction ID : SB21.51

Amount of Each Disbursement this Period

2000.00

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

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

28699.89

**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)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial)

A. EPIPHANY PRODUCTIONS

Mailing Address 104 HUME AVE.

City ALEXANDRIA State VA Zip Code 22301

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21.52

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. iCONTRIBUTE LLC

Mailing Address 725 8TH ST. SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21.54

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. iCONTRIBUTE LLC

Mailing Address 725 8TH ST. SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21.55

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

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NAME OF COMMITTEE (In Full)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial)

A. iCONTRIBUTE LLC

Mailing Address 725 8TH ST. SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2012

Transaction ID : SB21.56

Amount of Each Disbursement this Period

5.63

Full Name (Last, First, Middle Initial)

B. iCONTRIBUTE LLC

Mailing Address 725 8TH ST. SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 15 / 2012

Transaction ID : SB21.57

Amount of Each Disbursement this Period

7.88

Full Name (Last, First, Middle Initial)

C. iCONTRIBUTE LLC

Mailing Address 725 8TH ST. SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 22 / 2012

Transaction ID : SB21.58

Amount of Each Disbursement this Period

166.50

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

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

180.01

**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)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial)

A. iCONTRIBUTE LLC

Mailing Address 725 8TH ST. SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 29 / 2012

Transaction ID : SB21.59

Amount of Each Disbursement this Period

2.25

Full Name (Last, First, Middle Initial)

B. iCONTRIBUTE LLC

Mailing Address 725 8TH ST. SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 07 / 2012

Transaction ID : SB21.60

Amount of Each Disbursement this Period

21.15

Full Name (Last, First, Middle Initial)

C. iCONTRIBUTE LLC

Mailing Address 725 8TH ST. SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 14 / 2012

Transaction ID : SB21.61

Amount of Each Disbursement this Period

1.58

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

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

24.98

**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)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial)

A. iCONTRIBUTE LLC

Mailing Address 725 8TH ST. SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 21 / 2012

Transaction ID : SB21.62

Amount of Each Disbursement this Period

2.25

Full Name (Last, First, Middle Initial)

B. iCONTRIBUTE LLC

Mailing Address 725 8TH ST. SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 28 / 2012

Transaction ID : SB21.63

Amount of Each Disbursement this Period

350.88

Full Name (Last, First, Middle Initial)

C. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Mailing Address 320 FIRST ST. SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
FACILITY RENTAL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 04 / 2012

Transaction ID : SB21.65

Amount of Each Disbursement this Period

487.50

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

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

840.63

**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)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial)

A. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Mailing Address 320 FIRST ST. SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2012

Transaction ID : SB21.66

Amount of Each Disbursement this Period

6707.27

Full Name (Last, First, Middle Initial)

B. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Mailing Address 320 FIRST ST. SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
FACILITY RENTAL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2012

Transaction ID : SB21.67

Amount of Each Disbursement this Period

487.50

Full Name (Last, First, Middle Initial)

C. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Mailing Address 320 FIRST ST. SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
FACILITY RENTAL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2012

Transaction ID : SB21.68

Amount of Each Disbursement this Period

487.50

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

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

6707.27

6707.27

**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)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial)

A. Newsmax Media, Inc.

Mailing Address 560 VILLAGE BLVD.
STE. 120

City WEST PALM BEACH State FL Zip Code 33409

Purpose of Disbursement
MEDIA

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2012

Transaction ID : SB21.69

Amount of Each Disbursement this Period

378.73

Category/
Type

Full Name (Last, First, Middle Initial)

B. NJI MEDIA

Mailing Address 201 King Street Suite 202

City ALEXANDRIA State VA Zip Code 22134

Purpose of Disbursement
MEDIA CONSULTING

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2012

Transaction ID : SB21.70

Amount of Each Disbursement this Period

5760.00

Category/
Type

Full Name (Last, First, Middle Initial)

C. NJI MEDIA

Mailing Address 201 King Street Suite 202

City ALEXANDRIA State VA Zip Code 22134

Purpose of Disbursement
MEDIA CONSULTING

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 08 / 2012

Transaction ID : SB21.71

Amount of Each Disbursement this Period

5760.00

Category/
Type

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

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

11898.73

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)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial)

A. NJI MEDIA

Mailing Address 201 King Street Suite 202

City ALEXANDRIA State VA Zip Code 22134

Purpose of Disbursement
MEDIA CONSULTING

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	7		2	0	1	2

Transaction ID : SB21.72

Amount of Each Disbursement this Period

5	7	6	0	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Vice and Victory Agency LLC

Mailing Address 8116 HERITAGE PL. DR.

City FORT WORTH State TX Zip Code 76137

Purpose of Disbursement
MEDIA

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	1		2	0	1	2

Transaction ID : SB22.75

Amount of Each Disbursement this Period

7	5	0	0	0	0
---	---	---	---	---	---

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	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)..... ▶

6	5	1	0	0	0
---	---	---	---	---	---

1	2	3	4	6	6	4	2
---	---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" 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)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial)
A. FRIENDS OF JOHN BOEHNER

Date of Disbursement
MM / DD / YYYY
03 / 31 / 2012

Mailing Address 7908 CINCINNATI DAYTON RD. STE. 1

City WEST CHESTER State OH Zip Code 45069

Purpose of Disbursement
TRANSFER OF NET JFC PROCEEDS

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District: 00

Transaction ID : **SB22.77**

Amount of Each Disbursement this Period
153242.45

Full Name (Last, First, Middle Initial)
B. THE FREEDOM PROJECT

Date of Disbursement
MM / DD / YYYY
03 / 31 / 2012

Mailing Address 631-B PENNSYLVANIA AVE. SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
TRANSFER OF NET JFC PROCEEDS

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District: 00

Transaction ID : **SB21.74**

Amount of Each Disbursement this Period
153242.45

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

Date of Disbursement
MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶ 306484.90

TOTAL This Period (last page this line number only)..... ▶ 306484.90

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" 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)
TFP-FOJB Committee

Full Name (Last, First, Middle Initial)

A. The Connolly Group

Mailing Address 6814 ROSEWOOD ST.

City ANNANDALE State VA Zip Code 22003

Purpose of Disbursement
CONTRIBUTION REFUND FOR CONTRIBUTION DEPOSIT ON 2/16/12

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 27 / 2012

Transaction ID : SB16.73

Amount of Each Disbursement this Period

235.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

235.00

235.00