

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00502849 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name (Last, First, Middle Initial) of Payee Message & Media		Date MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">04 / 02 / 2012</div>
Mailing Address 3101 Lee Highway Suite 18 #136		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">600.00</div>
City Bristol	State VA	
Zip Code 24202		Transaction ID : SE.4683
Purpose of Expenditure Email communication	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 18 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tim Murphy		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">600.00</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Message & Media		Date MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">04 / 03 / 2012</div>
Mailing Address 3101 Lee Highway Suite 18 #136		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">10632.29</div>
City Bristol	State VA	
Zip Code 24202		Transaction ID : SE.4692
Purpose of Expenditure Direct mail piece	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">006</div>	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 18 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tim Murphy		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">11232.29</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">11232.29</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;"> </div>

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

Jonathan Martin

Signature _____ [Electronically Filed] Date MM / DD / YYYY
12 / 12 / 2012