

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

## For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC

ADDRESS (number and street)

3900 ESSEX LANE SUITE 250

Check if different than previously reported. (ACC)

HOUSTON

TX

77027

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00502849

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2)
  - Jun 20 (M6)
  - May 20 (M5)
  - Sep 20 (M9)
  - Aug 20 (M8)
  - Oct 20 (M10)
  - Nov 20 (M11) (Non-Election Year Only)
  - Dec 20 (M12) (Non-Election Year Only)
  - Apr 20 (M4)
  - Jul 20 (M7)
  - Jan 31 (YE)

- (c) 12-Day **PRE**-Election Report for the:
- Primary (12P)
  - General (12G)
  - Runoff (12R)
  - Convention (12C)
  - Special (12S)

Election on [MM] / [DD] / [YYYY] in the State of [ ]

- (d) 30-Day **POST**-Election Report for the:
- General (30G)
  - Runoff (30R)
  - Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of [ ]

5. Covering Period [05] / [01] / [2012] through [05] / [31] / [2012]

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

Type or Print Name of Treasurer Jonathan Martin

Signature of Treasurer Jonathan Martin [Electronically Filed] Date 12 / 12 / 2012

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

Office Use Only									
-----------------	--	--	--	--	--	--	--	--	--

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>		1673194.29
(b) Cash on Hand at Beginning of Reporting Period.....	621117.18	
(c) Total Receipts (from Line 19) .....	439221.65	1524603.73
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1060338.83	3197798.02
7. Total Disbursements (from Line 31).....	642181.80	2779640.99
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	418157.03	418157.03
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	390000.00	

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)

Write or Type Committee Name

**CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC**

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

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).....	126650.00	1070000.00
(ii) Unitemized .....	1650.00	13682.08
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	128300.00	1083682.08
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	128300.00	1083682.08
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	260000.00	390000.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	50921.65	50921.65
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))..... ▶	439221.65	1524603.73
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	439221.65	1524603.73

**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 .....	96909.01	970340.30
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	96909.01	970340.30
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	545272.79	1809300.69
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	642181.80	2779640.99
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	642181.80	2779640.99

**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) .....	128300.00	1083682.08
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	128300.00	1083682.08
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	96909.01	970340.30
37. Offsets to Operating Expenditures (from Line 15, page 3).....	50921.65	50921.65
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	45987.36	919418.65

**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 51
<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)  
**CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC**

**A. Abro Facilities II LLC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3580 Blackthorn Ct  
City South Bend State IN Zip Code 46628  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 03 / 2012  
**Transaction ID : SA11AI.5130**  
Amount of Each Receipt this Period 5000.00  
Individual contribution

**B. Frank J. Bantle Sr.**  
Full Name (Last, First, Middle Initial)  
Mailing Address 11718 Gallant Ridge Ln.  
City Houston State TX Zip Code 77082  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
York Casket Company Sales  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 05 / 19 / 2012  
**Transaction ID : SA11AI.5176**  
Amount of Each Receipt this Period 1500.00  
Individual contribution

**C. Rick Beeler**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 1189  
City Stafford State TX Zip Code 77497  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Straus Systems President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 15 / 2012  
**Transaction ID : SA11AI.5237**  
Amount of Each Receipt this Period 5000.00  
Individual contributions

**SUBTOTAL** of Receipts This Page (optional).....▶ 11500.00  
**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 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. Big E Drilling Company**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4710 Bellaire Blvd.  
 Suite 350  
 City Bellaire State TX Zip Code 77401  
 FEC ID number of contributing federal political committee. **C**  
 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  
 05 / 04 / 2012  
**Transaction ID : SA11AI.5138**  
 Amount of Each Receipt this Period  
 5000.00  
 Individual contribution

**B. Samuel P. Black**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 121 East 2nd Street  
 City Erie State PA Zip Code 16507  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Samuel P. Black Insurance Agen Founder  
 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  
 05 / 02 / 2012  
**Transaction ID : SA11AI.5156**  
 Amount of Each Receipt this Period  
 1000.00  
 Individual contribution

**C. James P. Bryan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1331 Lamar #1450  
 City Houston State TX Zip Code 77010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Torch Energy CEO  
 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  
 05 / 06 / 2012  
**Transaction ID : SA11AI.5189**  
 Amount of Each Receipt this Period  
 10000.00  
 Individual contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	▶	16000.00
<b>TOTAL</b> This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 51
<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)  
**CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC**

**A. Campr II Partners**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 677

City El Paso	State TX	Zip Code 79944
-----------------	-------------	-------------------

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

Name of Employer  
Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
18750.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	02	/	2012

**Transaction ID : SA11AI.5140**

Amount of Each Receipt this Period  
18750.00

Individual contributions

**B. J.A. Cardwell**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 26808

City El Paso	State TX	Zip Code 79926-6808
-----------------	-------------	------------------------

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

Name of Employer  
C&R Distributing, LLC  
Occupation  
CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
6250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	07	/	2012

**Transaction ID : SA11AI.5143**

Amount of Each Receipt this Period  
6250.00

Individual contribution

**C. Jack E. Caveney**  
Full Name (Last, First, Middle Initial)  
Mailing Address 11090 Turtle Beach Road #A203

City North Palm Beach	State FL	Zip Code 33408
--------------------------	-------------	-------------------

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

Name of Employer  
N/A  
Occupation  
Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	09	/	2012

**Transaction ID : SA11AI.5164**

Amount of Each Receipt this Period  
10000.00

Individual contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	35000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. James McConnell Clark**  
Full Name (Last, First, Middle Initial)

Mailing Address 350 Seaspray Ave.

City State Zip Code  
Palm Beach FL 33480

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

Name of Employer Occupation  
N/A Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
05 / 12 / 2012  
**Transaction ID : SA11AI.5160**

Amount of Each Receipt this Period  
5000.00

Individual contribution

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

Mailing Address 2220 Prairie Glen Pl.

City State Zip Code  
Manhattan KS 66502

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

Name of Employer Occupation  
Retired Agriculture

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
05 / 10 / 2012  
**Transaction ID : SA11AI.5228**

Amount of Each Receipt this Period  
250.00

Individual contribution

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

Mailing Address PO Box 1287

City State Zip Code  
Northbrook IL 60065

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

Name of Employer Occupation  
CEO Management Services, Inc. Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
05 / 15 / 2012  
**Transaction ID : SA11AI.5174**

Amount of Each Receipt this Period  
10000.00

Individual contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 15250.00

**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 51
<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)  
**CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC**

**A. Roberto Contreras**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1600 Post Oak Blvd.  
 #2200  
 City Houston State TX Zip Code 77056  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer St. Christopher Holdings Occupation Business owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 05 / 02 / 2012  
**Transaction ID : SA11AI.5188**  
 Amount of Each Receipt this Period 5000.00  
 Individual contributions

**B. Julian Jr. D'Esposito**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 224 Regent Wood  
 City Northfield State IL Zip Code 60093  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Mayer Brown LLP Occupation Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 02 / 2012  
**Transaction ID : SA11AI.5134**  
 Amount of Each Receipt this Period 500.00  
 Individual contribution

**C. Gordon Daugherty**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8807 Wildridge Dr.  
 City Austin State TX Zip Code 78759  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 09 / 2012  
**Transaction ID : SA11AI.5211**  
 Amount of Each Receipt this Period 50.00  
 Individual contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5550.00  
**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 11 OF 51
	<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)  
**CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC**

**A. Gordon Daugherty**  
Full Name (Last, First, Middle Initial)

Mailing Address 8807 Wildridge Dr.

City Austin State TX Zip Code 78759

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

Name of Employer Self Occupation Physician

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  
**05 / 19 / 2012**

**Transaction ID : SA11AI.5239**

Amount of Each Receipt this Period  
**50.00**

Individual contribution

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

Mailing Address PO Box 122269

City Fort Worth State TX Zip Code 76121

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

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  
**05 / 03 / 2012**

**Transaction ID : SA11AI.5162**

Amount of Each Receipt this Period  
**5000.00**

Individual contribution

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

Mailing Address PO Box 2379

City Midland State TX Zip Code 77227-2529

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

Name of Employer Self Employed Occupation Engineer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 30 / 2012**

**Transaction ID : SA11AI.5184**

Amount of Each Receipt this Period  
**2000.00**

Individual contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>7050.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 51
	<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)  
**CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC**

Full Name (Last, First, Middle Initial) <b>A. J. Evetts Haley</b>		Date of Receipt MM / DD / YYYY 05 / 23 / 2012 <b>Transaction ID : SA11AI.5178</b>
Mailing Address PO Box 2515		Amount of Each Receipt this Period 1000.00 Individual contribution
City Midland	State TX	Zip Code 79702
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Cattle rancher	
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>B. Paul R. Hamilton</b>		Date of Receipt MM / DD / YYYY 05 / 16 / 2012 <b>Transaction ID : SA11AI.5168</b>
Mailing Address 413 W. Creek St.		Amount of Each Receipt this Period 500.00 Individual contribution
City Fredericksburg	State TX	Zip Code 78624
FEC ID number of contributing federal political committee. C		
Name of Employer Kuenemann House Inn	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Philip D. Harvey</b>		Date of Receipt MM / DD / YYYY 05 / 01 / 2012 <b>Transaction ID : SA11AI.5146</b>
Mailing Address 1701 K St., NW Ste. 900		Amount of Each Receipt this Period 10000.00 Individual contribution
City Washington	State DC	Zip Code 20006
FEC ID number of contributing federal political committee. C		
Name of Employer Self-employed	Occupation Investor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. James C. Henry**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3525 Andrews Highway  
 Suite 200  
 City Midland State TX Zip Code 79703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Henry Resources Occupation CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 22 / 2012  
**Transaction ID : SA11AI.5182**  
 Amount of Each Receipt this Period 5000.00  
 Individual contributions

**B. William L. Holmes**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 3728  
 City Midland State TX Zip Code 79702  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-employed Occupation Oil & Gas  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 24 / 2012  
**Transaction ID : SA11AI.5180**  
 Amount of Each Receipt this Period 2500.00  
 Individual contributions

**C. John A. Janicik**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 42 Waverly Ave.  
 City Clarendon Hills State IL Zip Code 60514  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N/A Occupation Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 05 / 02 / 2012  
**Transaction ID : SA11AI.5118**  
 Amount of Each Receipt this Period 2000.00  
 Individual 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 14 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. David H. Jennings**  
Full Name (Last, First, Middle Initial)

Mailing Address 14891 NW 42 Ct.

City Reddick	State FL	Zip Code 32686
-----------------	-------------	-------------------

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

Name of Employer Self-employed	Occupation CPA
-----------------------------------	-------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 10 / 2012

**Transaction ID : SA11AI.5224**

Amount of Each Receipt this Period  
250.00

Individual contribution

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

Mailing Address 2237 N Wayne Ave.

City Chicago	State IL	Zip Code 60614
-----------------	-------------	-------------------

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

Name of Employer Mayer Brown, LLP	Occupation Attorney
--------------------------------------	------------------------

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  
 05 / 03 / 2012

**Transaction ID : SA11AI.5110**

Amount of Each Receipt this Period  
1000.00

Individual contribution

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

Mailing Address 570 N Sheridan Rd.

City Lake Forest	State IL	Zip Code 60045
---------------------	-------------	-------------------

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

Name of Employer Mayer Brown LLP	Occupation Partner/Chairman
-------------------------------------	--------------------------------

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  
 05 / 02 / 2012

**Transaction ID : SA11AI.5122**

Amount of Each Receipt this Period  
1000.00

Individual contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 51
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

Full Name (Last, First, Middle Initial) <b>A. Lois H. Lazaro</b>		Date of Receipt MM / DD / YYYY 05 / 02 / 2012 <b>Transaction ID : SA11AI.5132</b>
Mailing Address 6040 River Chase Cir. NW		Amount of Each Receipt this Period 1000.00 Individual contribution
City Sandy Springs	State GA	Zip Code 30328
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 1000.00	
Name of Employer N/A	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Robert Morrison Jr.</b>		Date of Receipt MM / DD / YYYY 05 / 15 / 2012 <b>Transaction ID : SA11AI.5154</b>
Mailing Address 402 N. Palisades Dr.		Amount of Each Receipt this Period 500.00 Individual contribution
City Signal Mountain	State TN	Zip Code 37377
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 500.00	
Name of Employer Self-employed	Occupation Business owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. John W Noell Jr.</b>		Date of Receipt MM / DD / YYYY 05 / 03 / 2012 <b>Transaction ID : SA11AI.5120</b>
Mailing Address 135 E. Seventh St.		Amount of Each Receipt this Period 300.00 Individual contribution
City Hinsdale	State IL	Zip Code 60521
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 300.00	
Name of Employer Elf-employed	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1800.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 51
<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)  
**CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC**

**A. Joseph Organ Jr.**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1213 Park Ave.  
City River Forest State IL Zip Code 60305  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Mayer Brown LLP Occupation Counsel  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **250.00**

Date of Receipt **05 / 03 / 2012**  
**Transaction ID : SA11AI.5128**  
Amount of Each Receipt this Period **250.00**  
Individual contribution

**B. Thomas Panoff**  
Full Name (Last, First, Middle Initial)  
Mailing Address 212 W. Washington St. #2004  
City Chicago State IL Zip Code 60606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Mayer Brown LLP Occupation Attorney  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **1000.00**

Date of Receipt **05 / 03 / 2012**  
**Transaction ID : SA11AI.5114**  
Amount of Each Receipt this Period **1000.00**  
Individual contribution

**C. Richard Pavelski**  
Full Name (Last, First, Middle Initial)  
Mailing Address 145 Cheshire Way  
City Naples State FL Zip Code 34110  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Heartland Farms, Inc. Occupation Farming  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **500.00**

Date of Receipt **05 / 09 / 2012**  
**Transaction ID : SA11AI.5197**  
Amount of Each Receipt this Period **500.00**  
Individual contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1750.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. J. Kirk Robison**  
Full Name (Last, First, Middle Initial)

Mailing Address 4445 N. Mesa Ste. 100  
City El Paso State TX Zip Code 79902-1154

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

Name of Employer Pizza Properties, Inc. Occupation Restaurant Franchisee

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 05 / 12 / 2012  
**Transaction ID : SA11AI.5166**

Amount of Each Receipt this Period 4000.00

Individual contribution

**B. Dr. Barry A. Schlech**  
Full Name (Last, First, Middle Initial)

Mailing Address 3550 Country Vista Drive  
City Burleson State TX Zip Code 76028

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 09 / 2012  
**Transaction ID : SA11AI.5152**

Amount of Each Receipt this Period 1000.00

Individual contribution

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

Mailing Address 611 NE Alsbury Blvd. Apt. 504  
City Burleson State TX Zip Code 76028

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 09 / 2012  
**Transaction ID : SA11AI.5150**

Amount of Each Receipt this Period 1000.00

Individual contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6000.00

**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 18 OF 51
<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)  
**CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC**

Full Name (Last, First, Middle Initial) <b>A. William A. Schmalzl</b>		Date of Receipt MM / DD / YYYY 05 / 03 / 2012 <b>Transaction ID : SA11AI.5112</b>
Mailing Address 535 Edgewood Pl.		Amount of Each Receipt this Period 500.00
City River Forest	State IL	Zip Code 60305
FEC ID number of contributing federal political committee. C	Individual contribution	
Name of Employer Mayber Brown LLP	Occupation Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. David A. Schuette</b>		Date of Receipt MM / DD / YYYY 05 / 03 / 2012 <b>Transaction ID : SA11AI.5124</b>
Mailing Address 4837 Lawn Ave.		Amount of Each Receipt this Period 500.00
City Western Springs	State IL	Zip Code 60558
FEC ID number of contributing federal political committee. C	Individual contribution	
Name of Employer Mayer Brown LLP	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Lisa Waltzman</b>		Date of Receipt MM / DD / YYYY 05 / 03 / 2012 <b>Transaction ID : SA11AI.5126</b>
Mailing Address 5403 Trent St.		Amount of Each Receipt this Period 500.00
City Chevy Chase	State MD	Zip Code 20815
FEC ID number of contributing federal political committee. C	Individual contribution	
Name of Employer Mayer Brown LLP	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 51
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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

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

**A. Stanley F. Whitman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9700 Collins Ave.  
 3rd Floor  
 City Bal Harbour State FL Zip Code 33154  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-employed Occupation Attorney  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt **05 / 07 / 2012**  
**Transaction ID : SA11AI.5141**  
 Amount of Each Receipt this Period **1000.00**  
 Individual contribution

**B. Joel Williamson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1040 North Lake Shore Dr.  
 City Chicago State IL Zip Code 60611  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Mayber Brown LLP Occupation Partner  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt **05 / 01 / 2012**  
**Transaction ID : SA11AI.5116**  
 Amount of Each Receipt this Period **1000.00**  
 Individual contribution

**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  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>126650.00</b>

**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 20 OF 51
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input checked="" 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)  
**CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC**

**A. Leo Linbeck III**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 22500

City Houston State TX Zip Code 77227

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

Name of Employer Aquinas Companies, LLC Occupation President & CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **640000.00**

Date of Receipt **05 / 15 / 2012**

**Transaction ID : SA13.5264**

Amount of Each Receipt this Period **160000.00**

Loan

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

Mailing Address PO Box 22500

City Houston State TX Zip Code 77227

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

Name of Employer Aquinas Companies, LLC Occupation President & CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **740000.00**

Date of Receipt **05 / 22 / 2012**

**Transaction ID : SA13.5265**

Amount of Each Receipt this Period **100000.00**

Loan

**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

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>260000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>260000.00</b>

**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 51
<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 checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Full Name (Last, First, Middle Initial) <b>A. Lewis Advertising</b>		Date of Receipt
Mailing Address PO Box 544		<input type="text" value="05"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>
City	State	Zip Code
Wetumpka	FL	36092
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA15.5274</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="27500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	Refund from advertising not spent
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="27500.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Lewis Advertising</b>		Date of Receipt
Mailing Address PO Box 544		<input type="text" value="05"/> / <input type="text" value="04"/> / <input type="text" value="2012"/>
City	State	Zip Code
Wetumpka	FL	36092
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA15.5275</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="1826.65"/>
Receipt For:	Aggregate Year-to-Date ▼	Refund from advertising not spent
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="29326.65"/>	

Full Name (Last, First, Middle Initial) <b>C. Lewis Advertising</b>		Date of Receipt
Mailing Address PO Box 544		<input type="text" value="05"/> / <input type="text" value="09"/> / <input type="text" value="2012"/>
City	State	Zip Code
Wetumpka	FL	36092
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA15.5276</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="10000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	Refund from advertising not spent
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="39326.65"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="39326.65"/>
<b>TOTAL</b> 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:		PAGE 22 OF 51	
<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 checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17	

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

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

**A. Lewis Advertising**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 544  
 City Wetumpka State FL Zip Code 36092  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
**50921.65**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 15 / 2012**  
**Transaction ID : SA15.5277**  
 Amount of Each Receipt this Period  
**11595.00**  
 Refund of advertising not spent

**B.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>11595.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>50921.65</b>

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

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

FOR LINE NUMBER:  
(check only one)

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

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

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

Full Name (Last, First, Middle Initial)

**A. Lina Al-Salim**

Mailing Address 18206 Memorial Falls Dr.

City Tomball State TX Zip Code 77375

Purpose of Disbursement  
Payroll

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 17 / 2012

**Transaction ID : SB21B.5253**

Amount of Each Disbursement this Period

507.00

Full Name (Last, First, Middle Initial)

**B. Aquinas Companies, LLC**

Mailing Address 3900 Essex Lane  
Ste. 250

City Houston State TX Zip Code 77027

Purpose of Disbursement  
Office expenses

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 17 / 2012

**Transaction ID : SB21B.5248**

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Bank of America**

Mailing Address PO Box 25118

City Tampa State FL Zip Code 33622-5118

Purpose of Disbursement  
Banking fees

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 31 / 2012

**Transaction ID : SB21B.5242**

Amount of Each Disbursement this Period

752.00

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

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

1309.00

**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

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

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

Full Name (Last, First, Middle Initial)

**A. Brierfield Campaigns, Inc**

Mailing Address 1000 E William St.  
Suite 204

City Carson City State NV Zip Code 89701

Purpose of Disbursement  
Independent Expenditure Consulting pertaining to logistics and messaging.

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 14 / 2012

**Transaction ID : SB21B.5285**

Amount of Each Disbursement this Period

16370.00

Full Name (Last, First, Middle Initial)

**B. BRI Essex, LLC**

Mailing Address PO Box 203015

City Dallas State TX Zip Code 75320-3015

Purpose of Disbursement  
Rent

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2012

**Transaction ID : SB21B.5251**

Amount of Each Disbursement this Period

499.04

Full Name (Last, First, Middle Initial)

**C. Ceterus, Inc.**

Mailing Address PO Box 19366

City Kalamazoo State MI Zip Code 49019

Purpose of Disbursement  
Accounting fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2012

**Transaction ID : SB21B.5241**

Amount of Each Disbursement this Period

2110.23

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

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

18979.27



**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

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

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

Full Name (Last, First, Middle Initial)

**A. Ceterus, Inc.**

Mailing Address PO Box 19366

City Kalamazoo State MI Zip Code 49019

Purpose of Disbursement  
Office expenses

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 17 / 2012

Transaction ID : SB21B.5249

Amount of Each Disbursement this Period

180.09

Full Name (Last, First, Middle Initial)

**B. Ceterus, Inc.**

Mailing Address PO Box 19366

City Kalamazoo State MI Zip Code 49019

Purpose of Disbursement  
Accounting fees

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 31 / 2012

Transaction ID : SB21B.5278

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. Hannah Christian**

Mailing Address 3900 Essex Lane  
Ste. 250

City Houston State TX Zip Code 77027

Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 08 / 2012

Transaction ID : SB21B.5259

Amount of Each Disbursement this Period

1000.00

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

3180.09

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

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

Full Name (Last, First, Middle Initial)

**A. Hannah Christian**

Mailing Address 3900 Essex Lane  
Ste. 250

City Houston State TX Zip Code 77027

Purpose of Disbursement  
Office expenses

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 31 / 2012

Transaction ID : SB21B.5288

Amount of Each Disbursement this Period

1011.57

Full Name (Last, First, Middle Initial)

**B. Hannah Christian**

Mailing Address 3900 Essex Lane  
Ste. 250

City Houston State TX Zip Code 77027

Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 31 / 2012

Transaction ID : SB21B.5291

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. CMF Communications**

Mailing Address 25000 Portofino Cir.  
#129

City Palm Beach Gardens State FL Zip Code 33148-1293

Purpose of Disbursement  
Printing

006

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 08 / 2012

Transaction ID : SB21B.5289

Amount of Each Disbursement this Period

463.18

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

2474.75

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

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

Full Name (Last, First, Middle Initial)

**A. CMF Communications**

Mailing Address 25000 Portofino Cir.  
#129

City State Zip Code  
Palm Beach Gardens FL 33148-1293

Purpose of Disbursement  
Communication expense

**004**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2012

**Transaction ID : SB21B.5290**

Amount of Each Disbursement this Period

16.88

Full Name (Last, First, Middle Initial)

**B. LeClairRyan**

Mailing Address PO Box 2499

City State Zip Code  
Richmond VA 23218

Purpose of Disbursement  
Legal fees

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 09 / 2012

**Transaction ID : SB21B.5245**

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

**C. LeClairRyan**

Mailing Address PO Box 2499

City State Zip Code  
Richmond VA 23218

Purpose of Disbursement  
Legal fees

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 29 / 2012

**Transaction ID : SB21B.5281**

Amount of Each Disbursement this Period

14365.00

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

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

24381.88

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

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

FOR LINE NUMBER:  
(check only one)

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

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

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

Full Name (Last, First, Middle Initial)

**A. Lewis Advertising**

Mailing Address PO Box 544

City Wetumpka State FL Zip Code 36092

Purpose of Disbursement  
Production and development costs

004  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 31 / 2012

**Transaction ID : SB21B.5283**

Amount of Each Disbursement this Period

21150.00

Full Name (Last, First, Middle Initial)

**B. Jonathan Martin**

Mailing Address 1739 Maybank Highway  
Suite T-346

City Charleston State SC Zip Code 29412

Purpose of Disbursement  
Treasury services

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 17 / 2012

**Transaction ID : SB21B.5247**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Piryx, Inc.**

Mailing Address 144 2nd St.  
1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Merchant processing fees

003  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 30 / 2012

**Transaction ID : SB21B.5240**

Amount of Each Disbursement this Period

1057.96

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

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

23207.96

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

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

FOR LINE NUMBER:  
(check only one)

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

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

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

Full Name (Last, First, Middle Initial)

**A. Prime Rate Premium Finance Corporation, Inc.**

Mailing Address PO Box 100507

City Florence State SC Zip Code 29502

Purpose of Disbursement  
Insurance premium

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.5243**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Raconteur Media Company, Inc.**

Mailing Address 720 Brazos Street Ste. 400

City Austin State TX Zip Code 78701

Purpose of Disbursement  
Registrations

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.5250**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Relevant Information Ltd.**

Mailing Address 439 E 9th Street

City New York State NY Zip Code 10009

Purpose of Disbursement  
Media relations

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.5257**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

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

Full Name (Last, First, Middle Initial)

**A. Relevant Information Ltd.**

Mailing Address 439 E 9th Street

City New York State NY Zip Code 10009

Purpose of Disbursement  
Travel expenses

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 17 / 2012

**Transaction ID : SB21B.5262**

Amount of Each Disbursement this Period

4136.54

Full Name (Last, First, Middle Initial)

**B. Michael Smith**

Mailing Address 3616 Duchess Trail

City Dallas State TX Zip Code 75229

Purpose of Disbursement  
Blogging

004

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 08 / 2012

**Transaction ID : SB21B.5255**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**C. Jamie Story**

Mailing Address 3900 Essex Lane  
Ste. 250

City Houston State TX Zip Code 77027

Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 08 / 2012

**Transaction ID : SB21B.5258**

Amount of Each Disbursement this Period

1000.00

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

6636.54

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

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

Full Name (Last, First, Middle Initial)

**A. Jamie Story**

Mailing Address 3900 Essex Lane  
Ste. 250

City Houston State TX Zip Code 77027

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.5292**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Webster, Chamberlain & Bean, LLP**

Mailing Address 1747 Pennsylvania Ave., NW

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Legal fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.5246**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Webster, Chamberlain & Bean, LLP**

Mailing Address 1747 Pennsylvania Ave., NW

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Legal fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.5280**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

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

Full Name (Last, First, Middle Initial)

**A. Corie Whalen**

Mailing Address 2565 Marilee Lane  
#2

City Houston State TX Zip Code 77057

Purpose of Disbursement  
Payroll

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.5252**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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



**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC** Transaction ID : **SC/10.5267**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Leo Linbeck III	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 22500	
City Houston State TX ZIP Code 77227	

Original Amount of Loan 130000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 130000.00
--------------------------------------	------------------------------------	--

**TERMS**

Date Incurred: MM / DD / YYYY (04 / 30 / 2012) Date Due: MM / DD / YYYY (12/31/12) Interest Rate: 6.00 % (apr) Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....▶	[ ] 130000.00
<b>TOTALS</b> This Period (last page in this line only).....▶	[ ]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC** Transaction ID : **SC/10.5264**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Leo Linbeck III	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 22500	
City Houston State TX ZIP Code 77227	

Original Amount of Loan 160000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 160000.00
--------------------------------------	------------------------------------	--

**TERMS**

Date Incurred MM / DD / YYYY 05 / 15 / 2012	Date Due MM / DD / YYYY 12/31/12	Interest Rate 6.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	--	-------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....▶	[ ] 160000.00
<b>TOTALS</b> This Period (last page in this line only).....▶	[ ]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC** Transaction ID : **SC/10.5265**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Leo Linbeck III	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 22500	
City Houston State TX ZIP Code 77227	

Original Amount of Loan 100000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 100000.00
--------------------------------------	------------------------------------	--

**TERMS**

Date Incurred: MM / DD / YYYY (05 / 22 / 2012) Date Due: MM / DD / YYYY (12/31/12) Interest Rate: 6.00 % (apr) Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....▶	100000.00
<b>TOTALS</b> This Period (last page in this line only).....▶	390000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

NAME OF COMMITTEE (In Full) <b>CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00502849
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Alliance Strategies Group, LLC</b>		Date MM / DD / YYYY 05 / 01 / 2012
Mailing Address 7700 Congress Avenue Ste 3208		Amount 930.00
City Boca Raton	State FL	
Purpose of Expenditure Email communication	Category/ Type 004	<b>Transaction ID : SE.4918</b>
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID MARTIN MCINTOSH		Office Sought: <input checked="" type="checkbox"/> House    State: IN <input type="checkbox"/> Senate    District: 05 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 65556.99		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee <b>Alliance Strategies Group, LLC</b>		Date MM / DD / YYYY 05 / 01 / 2012
Mailing Address 7700 Congress Avenue Ste 3208		Amount 930.00
City Boca Raton	State FL	
Purpose of Expenditure Email communication	Category/ Type 004	<b>Transaction ID : SE.4925</b>
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID MARTIN MCINTOSH		Office Sought: <input checked="" type="checkbox"/> House    State: IN <input type="checkbox"/> Senate    District: 05 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 67686.99		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	1860.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	

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

*Jonathan Martin*  
Signature

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

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

NAME OF COMMITTEE (In Full) <b>CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">C</span> C00502849                 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Alliance Strategies Group, LLC</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 18px;">05</span> / <span style="font-size: 18px;">02</span> / <span style="font-size: 18px;">2012</span> </div>
Mailing Address 7700 Congress Avenue Ste 3208		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px;">930.00</span> </div>
City Boca Raton                                  State FL                                  Zip Code 33487		
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: IN <input type="checkbox"/> Senate                                  District: 05 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID MARTIN MCINTOSH		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">115966.99</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 <b>Alliance Strategies Group, LLC</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 18px;">05</span> / <span style="font-size: 18px;">04</span> / <span style="font-size: 18px;">2012</span> </div>
Mailing Address 7700 Congress Avenue Ste 3208		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px;">930.00</span> </div>
City Boca Raton                                  State FL                                  Zip Code 33487		
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: IN <input type="checkbox"/> Senate                                  District: 05 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID MARTIN MCINTOSH		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">117496.99</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 24px;">1860.00</span> </div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; height: 20px;"> </div>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; height: 20px;"> </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.

Signature Jonathan Martin    [Electronically Filed]    Date 

12 / 12 / 2012

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

NAME OF COMMITTEE (In Full) <b>CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00502849
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Alliance Strategies Group, LLC</b>		Date MM / DD / YYYY <b>05 / 06 / 2012</b>
Mailing Address 7700 Congress Avenue Ste 3208		Amount <b>930.00</b>
City Boca Raton	State FL	
Zip Code 33487	<b>Transaction ID : SE.4947</b>	
Purpose of Expenditure Email communication	Category/ Type <b>004</b>	Office Sought: <input checked="" type="checkbox"/> House    State: <u>IN</u> <input type="checkbox"/> Senate    District: <u>05</u> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID MARTIN MCINTOSH		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>130926.99</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee <b>Brierfield Campaigns, Inc</b>		Date MM / DD / YYYY <b>05 / 17 / 2012</b>
Mailing Address 1000 E William St. Suite 204		Amount <b>5000.00</b>
City Carson City	State NV	
Zip Code 89701	<b>Transaction ID : SE.5084</b>	
Purpose of Expenditure Email	Category/ Type <b>004</b>	Office Sought: <input checked="" type="checkbox"/> House    State: <u>NY</u> <input type="checkbox"/> Senate    District: <u>13</u> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Charles Rangel		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>5000.00</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>5930.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	

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

*Jonathan Martin*

Signature \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY **12 / 12 / 2012**

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

NAME OF COMMITTEE (In Full) <b>CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC</b>		FEC IDENTIFICATION NUMBER <b>C</b> C00502849
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee <b>Fortune Media, Inc.</b>		Date MM / DD / YYYY 05 / 14 / 2012
Mailing Address 527 Avenue B		Amount 50000.00
City Redondo Beach	State CA	Zip Code 90277-4183
Purpose of Expenditure Television advertisement	Category/ Type 004	Transaction ID : SE.4958
Name of Federal Candidate Supported or Opposed by Expenditure: SILVESTRE REYES		Office Sought: <input checked="" type="checkbox"/> House State: TX <input type="checkbox"/> Senate District: 16 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 50000.00		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee <b>Fortune Media, Inc.</b>		Date MM / DD / YYYY 05 / 18 / 2012
Mailing Address 527 Avenue B		Amount 70000.00
City Redondo Beach	State CA	Zip Code 90277-4183
Purpose of Expenditure Television advertisement	Category/ Type 004	Transaction ID : SE.5059
Name of Federal Candidate Supported or Opposed by Expenditure: SILVESTRE REYES		Office Sought: <input checked="" type="checkbox"/> House State: TX <input type="checkbox"/> Senate District: 16 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 120000.00		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	120000.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures.....	

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

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

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

NAME OF COMMITTEE (In Full) <b>CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC</b>		FEC IDENTIFICATION NUMBER <b>C</b> C00502849
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee <b>Fortune Media, Inc.</b>		Date MM / DD / YYYY 05 / 18 / 2012
Mailing Address 527 Avenue B		Amount 21000.00
City Redondo Beach	State CA	
Purpose of Expenditure Radio advertisement	Category/ Type 004	Transaction ID : SE.5061
Name of Federal Candidate Supported or Opposed by Expenditure: SILVESTRE REYES		Office Sought: <input checked="" type="checkbox"/> House State: TX <input type="checkbox"/> Senate District: 16 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 141000.00		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee <b>Fortune Media, Inc.</b>		Date MM / DD / YYYY 05 / 18 / 2012
Mailing Address 527 Avenue B		Amount 9000.00
City Redondo Beach	State CA	
Purpose of Expenditure Television and radio production	Category/ Type 004	Transaction ID : SE.5063
Name of Federal Candidate Supported or Opposed by Expenditure: SILVESTRE REYES		Office Sought: <input checked="" type="checkbox"/> House State: TX <input type="checkbox"/> Senate District: 16 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 150000.00		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	30000.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures.....	

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

*Jonathan Martin*  
Signature

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



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

NAME OF COMMITTEE (In Full) <b>CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00502849
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Fortune Media, Inc.</b>		Date MM / DD / YYYY <b>05 / 29 / 2012</b>
Mailing Address <b>527 Avenue B</b>		Amount <b>45000.00</b>
City <b>Redondo Beach</b>	State      Zip Code <b>CA      90277-4183</b>	
Purpose of Expenditure <b>Television advertisement</b>	Category/Type <b>004</b>	<b>Transaction ID : SE.5051</b>
Name of Federal Candidate Supported or Opposed by Expenditure: <b>SILVESTRE REYES</b>		Office Sought: <input checked="" type="checkbox"/> House      State: <b>TX</b> <input type="checkbox"/> Senate      District: <b>16</b> <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <b>195000.00</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee <b>Fortune Media, Inc.</b>		Date MM / DD / YYYY <b>05 / 29 / 2012</b>
Mailing Address <b>527 Avenue B</b>		Amount <b>45000.00</b>
City <b>Redondo Beach</b>	State      Zip Code <b>CA      90277-4183</b>	
Purpose of Expenditure <b>Television advertisement</b>	Category/Type <b>004</b>	<b>Transaction ID : SE.5092</b>
Name of Federal Candidate Supported or Opposed by Expenditure: <b>SILVESTRE REYES</b>		Office Sought: <input checked="" type="checkbox"/> House      State: <b>TX</b> <input type="checkbox"/> Senate      District: <b>16</b> <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <b>240000.00</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>90000.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	

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

*Jonathan Martin*  
Signature

[Electronically Filed]      Date **12 / 12 / 2012**

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

NAME OF COMMITTEE (In Full) <b>CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black;">C</span> C00502849       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name (Last, First, Middle Initial) of Payee <b>Lewis Advertising</b>		Date MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">05 / 02 / 2012</div>
Mailing Address PO Box 544		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">25000.00</div>
City Wetumpka	State FL	
Purpose of Expenditure Radio advertisement	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Office Sought: <input checked="" type="checkbox"/> House    State: IN <input type="checkbox"/> Senate    District: 05 <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID MARTIN MCINTOSH		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
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;">92686.99</div>

**Transaction ID : SE.4928**

Full Name (Last, First, Middle Initial) of Payee <b>Lewis Advertising</b>		Date MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">05 / 02 / 2012</div>
Mailing Address PO Box 544		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">22350.00</div>
City Wetumpka	State FL	
Purpose of Expenditure Television advertisement	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Office Sought: <input checked="" type="checkbox"/> House    State: IN <input type="checkbox"/> Senate    District: 05 <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID MARTIN MCINTOSH		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
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;">115036.99</div>

**Transaction ID : SE.4930**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">47350.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;"> </div>
(c) <b>TOTAL</b> 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

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

NAME OF COMMITTEE (In Full) <b>CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC</b>		FEC IDENTIFICATION NUMBER <b>C</b> C00502849
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee <b>Lewis Advertising</b>		Date MM / DD / YYYY 05 / 17 / 2012
Mailing Address PO Box 544		Amount 84125.00
City Wetumpka	State FL	Zip Code 36092
Purpose of Expenditure Television and radio advertisement	Category/ Type 004	Transaction ID : SE.5056
Name of Federal Candidate Supported or Opposed by Expenditure: RALPH MOODY HALL		Office Sought: <input checked="" type="checkbox"/> House State: TX <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 109865.32		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee <b>Message &amp; Media</b>		Date MM / DD / YYYY 05 / 01 / 2012
Mailing Address 3101 Lee Highway Suite 18 #136		Amount 29902.67
City Bristol	State VA	Zip Code 24202
Purpose of Expenditure Mail piece	Category/ Type 006	Transaction ID : SE.4909
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID MARTIN MCINTOSH		Office Sought: <input checked="" type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: 05 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 29902.67		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	114027.67
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures.....	

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

*Jonathan Martin*  
Signature [Electronically Filed] Date MM / DD / YYYY  
12 / 12 / 2012

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

NAME OF COMMITTEE (In Full) <b>CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC</b>		FEC IDENTIFICATION NUMBER <table border="1" style="width:100%"> <tr> <td style="font-size: 24px; text-align: center;">C</td> <td style="font-size: 18px;">C00502849</td> </tr> </table>	C	C00502849
C	C00502849			
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<table border="1" style="width: 30px; height: 20px;">M M M</table> / <table border="1" style="width: 30px; height: 20px;">D D D</table> / <table border="1" style="width: 60px; height: 20px;">Y Y Y Y Y Y</table>		

Full Name (Last, First, Middle Initial) of Payee <b>Message &amp; Media</b>		Date <table border="1" style="width: 30px; height: 20px;">05</table> / <table border="1" style="width: 30px; height: 20px;">01</table> / <table border="1" style="width: 60px; height: 20px;">2012</table>
Mailing Address 3101 Lee Highway Suite 18 #136		Amount <table border="1" style="width: 100%; text-align: right;">24724.32</table>
City Bristol	State VA	
Purpose of Expenditure Mail piece	Category/ Type <span style="border: 1px solid black; padding: 2px;">006</span>	Transaction ID : <b>SE.4915</b>
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID MARTIN MCINTOSH		Office Sought: <input checked="" type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: 05 <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <table border="1" style="width: 100%; text-align: right;">64626.99</table>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Message &amp; Media</b>		Date <table border="1" style="width: 30px; height: 20px;">05</table> / <table border="1" style="width: 30px; height: 20px;">01</table> / <table border="1" style="width: 60px; height: 20px;">2012</table>
Mailing Address 3101 Lee Highway Suite 18 #136		Amount <table border="1" style="width: 100%; text-align: right;">600.00</table>
City Bristol	State VA	
Purpose of Expenditure Email communication	Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>SE.4921</b>
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID MARTIN MCINTOSH		Office Sought: <input checked="" type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: 05 <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <table border="1" style="width: 100%; text-align: right;">66156.99</table>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<table border="1" style="width: 100%; text-align: right;">25324.32</table>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<table border="1" style="width: 100%; height: 20px;"> </table>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<table border="1" style="width: 100%; height: 20px;"> </table>

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



 / 



 /

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC
FEC IDENTIFICATION NUMBER
C C00502849
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name (Last, First, Middle Initial) of Payee
Message & Media
Mailing Address 3101 Lee Highway
Suite 18 #136
City Bristol State VA Zip Code 24202
Amount 600.00
Transaction ID : SE.4923
Purpose of Expenditure Email communication Category/Type 004
Office Sought: [X] House State: IN
Senate District: 05
President
Check One: [X] Support [ ] Oppose
Name of Federal Candidate Supported or Opposed by Expenditure:
DAVID MARTIN MCINTOSH
Calendar Year-To-Date Per Election for Office Sought 66756.99
Disbursement For: [X] Primary [ ] General
2012 [ ] Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Message & Media
Mailing Address 3101 Lee Highway
Suite 18 #136
City Bristol State VA Zip Code 24202
Amount 600.00
Transaction ID : SE.4934
Purpose of Expenditure Email communication Category/Type 004
Office Sought: [X] House State: IN
Senate District: 05
President
Check One: [X] Support [ ] Oppose
Name of Federal Candidate Supported or Opposed by Expenditure:
DAVID MARTIN MCINTOSH
Calendar Year-To-Date Per Election for Office Sought 116566.99
Disbursement For: [X] Primary [ ] General
2012 [ ] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 1200.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....
(c) TOTAL Independent Expenditures.....

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

Jonathan Martin
[Electronically Filed]
Date 12 / 12 / 2012
Signature

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

NAME OF COMMITTEE (In Full) <b>CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black;">C</span> C00502849       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name (Last, First, Middle Initial) of Payee <b>Message &amp; Media</b>		Date MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">05 / 04 / 2012</div>
Mailing Address 3101 Lee Highway Suite 18 #136		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">600.00</div>
City Bristol	State VA	
Zip Code 24202		<b>Transaction ID : SE.4940</b>
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: IN <input type="checkbox"/> Senate    District: 05 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID MARTIN MCINTOSH		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">118096.99</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 <b>Message &amp; Media</b>		Date MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">05 / 06 / 2012</div>
Mailing Address 3101 Lee Highway Suite 18 #136		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">600.00</div>
City Bristol	State VA	
Zip Code 24202		<b>Transaction ID : SE.4949</b>
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: IN <input type="checkbox"/> Senate    District: 05 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID MARTIN MCINTOSH		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">131526.99</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1200.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </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

12 / 12 / 2012

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

NAME OF COMMITTEE (In Full) <b>CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC</b>		FEC IDENTIFICATION NUMBER <b>C</b> C00502849
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>		

Full Name (Last, First, Middle Initial) of Payee <b>Message &amp; Media</b>		Date <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 3101 Lee Highway Suite 18 #136		Amount <input type="text"/>
City Bristol	State VA	Zip Code 24202
Purpose of Expenditure Website development and production		Transaction ID : <b>SE.4951</b>
Category/Type <input type="text"/> 006	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <u>IN</u> District: <u>05</u>
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID MARTIN MCINTOSH		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 132901.99		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Message &amp; Media</b>		Date <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 3101 Lee Highway Suite 18 #136		Amount <input type="text"/>
City Bristol	State VA	Zip Code 24202
Purpose of Expenditure Mail piece		Transaction ID : <b>SE.5054</b>
Category/Type <input type="text"/> 006	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <u>TX</u> District: <u>04</u>
Name of Federal Candidate Supported or Opposed by Expenditure: RALPH MOODY HALL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 25740.32		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<input type="text"/> 17115.32
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<input type="text"/>
(c) <b>TOTAL</b> Independent Expenditures.....	<input type="text"/>

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  /  /

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

NAME OF COMMITTEE (In Full) <b>CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC</b>		FEC IDENTIFICATION NUMBER <b>C</b> C00502849
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee <b>Message &amp; Media</b>		Date MM / DD / YYYY 05 / 21 / 2012
Mailing Address 3101 Lee Highway Suite 18 #136		Amount 15740.32
City Bristol	State VA	Zip Code 24202
Purpose of Expenditure Mail piece	Category/ Type 006	Office Sought: <input checked="" type="checkbox"/> House State: TX <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: RALPH MOODY HALL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 125605.64		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : SE.5072

Full Name (Last, First, Middle Initial) of Payee <b>Message &amp; Media</b>		Date MM / DD / YYYY 05 / 22 / 2012
Mailing Address 3101 Lee Highway Suite 18 #136		Amount 18860.08
City Bristol	State VA	Zip Code 24202
Purpose of Expenditure Mail piece	Category/ Type 006	Office Sought: <input checked="" type="checkbox"/> House State: TX <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: RALPH MOODY HALL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 144465.72		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : SE.5075

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	34600.40
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures.....	

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

*Jonathan Martin*

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



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

NAME OF COMMITTEE (In Full) <b>CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00502849
---	--

Check if  24-hour report  48-hour report  New report  Amends report filed on  /  /

Full Name (Last, First, Middle Initial) of Payee <b>Message &amp; Media</b>		Date <input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYYYY"/>
Mailing Address 3101 Lee Highway Suite 18 #136		Amount <input type="text" value="19905.08"/>
City Bristol	State VA	Zip Code 24202
Purpose of Expenditure Maile piece	Category/ Type <input type="text" value="006"/>	Office Sought: <input checked="" type="checkbox"/> House State: TX <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: RALPH MOODY HALL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <input type="text" value="164370.80"/>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

**Transaction ID : SE.5078**

Full Name (Last, First, Middle Initial) of Payee <b>Message &amp; Media</b>		Date <input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYYYY"/>
Mailing Address 3101 Lee Highway Suite 18 #136		Amount <input type="text" value="1500.00"/>
City Bristol	State VA	Zip Code 24202
Purpose of Expenditure Email communication	Category/ Type <input type="text" value="004"/>	Office Sought: <input checked="" type="checkbox"/> House State: TX <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: RALPH MOODY HALL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <input type="text" value="165870.80"/>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

**Transaction ID : SE.5081**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<input type="text" value="21405.08"/>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<input type="text"/>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<input type="text"/>

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.

Signature Jonathan Martin [Electronically Filed] Date  /  /

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

NAME OF COMMITTEE (In Full) <b>CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC</b>		FEC IDENTIFICATION NUMBER <b>C</b> C00502849
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee <b>Message &amp; Media</b>		Date MM / DD / YYYY 05 / 27 / 2012
Mailing Address 3101 Lee Highway Suite 18 #136		Amount 1500.00
City Bristol	State VA	Zip Code 24202
Purpose of Expenditure Email communication	Category/ Type 004	Transaction ID : SE.5089
Name of Federal Candidate Supported or Opposed by Expenditure: RALPH MOODY HALL		Office Sought: <input checked="" type="checkbox"/> House State: TX <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 167370.80		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee <b>Undertone</b>		Date MM / DD / YYYY 05 / 01 / 2012
Mailing Address 101 Park Avenue 17th Floor		Amount 10000.00
City New York	State NY	Zip Code 10178
Purpose of Expenditure Internet advertisement and video production	Category/ Type 004	Transaction ID : SE.4912
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID MARTIN MCINTOSH		Office Sought: <input checked="" type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: 05 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 39902.67		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	11500.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures.....	

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

*Jonathan Martin*  
Signature [Electronically Filed] Date MM / DD / YYYY  
12 / 12 / 2012

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

NAME OF COMMITTEE (In Full) <b>CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; border: 1px solid black; padding: 0 5px;">C</span> C00502849       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name (Last, First, Middle Initial) of Payee <b>Undertone</b>		Date MM / DD / YYYY 05 / 05 / 2012
Mailing Address 101 Park Avenue 17th Floor		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">11900.00</div>
City New York	State NY	
Zip Code 10178	<b>Transaction ID : SE.4943</b>	
Purpose of Expenditure Internet advertisement	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Office Sought: <input checked="" type="checkbox"/> House    State: IN <input type="checkbox"/> Senate    District: 05 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SUSAN BROOKS		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;">129996.99</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 <b>Undertone</b>		Date MM / DD / YYYY 05 / 11 / 2012
Mailing Address 101 Park Avenue 17th Floor		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">10000.00</div>
City New York	State NY	
Zip Code 10178	<b>Transaction ID : SE.4954</b>	
Purpose of Expenditure Internet advertisement	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Office Sought: <input checked="" type="checkbox"/> House    State: TX <input type="checkbox"/> Senate    District: 04 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: RALPH MOODY HALL		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;">10000.00</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	21900.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	545272.79

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