

# FEC FORM 5

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation <b>US Chamber of Commerce</b>		3. FEC Identification Number <b>C</b> C90013145
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1615 H Street NW		
(c) City, State and ZIP Code Washington DC 20062		
2. Occupation and Name of Employer (for Individual Filers Only)		

4. TYPE OF REPORT (check appropriate boxes):

- (a)  April 15 Quarterly Report
- July 15 Quarterly Report  24-Hour Report
- October 15 Quarterly Report  48-Hour Report
- January 31 Year-End Report

b) Is this Report an amendment?  No  Yes, it amends the report filed on  /  /

5. COVERING PERIOD: FROM  /  /  THROUGH  /  /

6. TOTAL CONTRIBUTIONS.....  0.00

7. TOTAL INDEPENDENT EXPENDITURES .....  129427.85

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 any political party committee or its agent.

<b>TYPE OR PRINT NAME OF PERSON COMPLETING FORM</b>	<b>SIGNATURE</b>	<b>DATE</b>
Abby Majlak	Abby Majlak <i>[Electronically Filed]</i>	04/29/2015

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

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
US Chamber of Commerce

Full Name (Last, First, Middle Initial) of Payee Revolution Agency		Date of Public Distribution/Dissemination 04 / 28 / 2015	
Mailing Address 1020 Princess Street		Amount 125000.00	
City Alexandria	State VA	Zip Code 22314	Transaction ID : 57538737
Purpose of Expenditure TV and Digital Advertisement "U.S. Chamber supports Dan Donovan" supporting Dan Donovan 4/28 - 5/5.		Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 11 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Dan Donovan		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 129427.85		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special Election	

Full Name (Last, First, Middle Initial) of Payee Revolution Agency		Date of Public Distribution/Dissemination 04 / 28 / 2015	
Mailing Address 1020 Princess Street		Amount 4008.00	
City Alexandria	State VA	Zip Code 22314	Transaction ID : 57572803
Purpose of Expenditure Promotion of digital efforts in support of Dan Donovan 5/1 - 5/5.		Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 11 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Dan Donovan		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 129427.85		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special Election	

Full Name (Last, First, Middle Initial) of Payee Integrated Web Strategies		Date of Public Distribution/Dissemination 04 / 28 / 2015	
Mailing Address 5330 N. 12th St.		Amount 269.85	
City Phoenix	State AZ	Zip Code 85014	Transaction ID : 57572804
Purpose of Expenditure Email expenditure supporting Dan Donovan 4/28/2015.		Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 11 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Dan Donovan		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 129427.85		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special Election	

(a) SUBTOTAL of Itemized Independent Expenditures.....	129277.85
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
US Chamber of Commerce

Full Name (Last, First, Middle Initial) of Payee Integrated Web Strategies		Date of Public Distribution/Dissemination 04 / 28 / 2015	
Mailing Address 5330 N. 12th St.		Amount 150.00	
City Phoenix	State AZ	Zip Code 85014	Transaction ID : 57572805
Purpose of Expenditure Website development - www.friendsoftheuschamber.com	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NY District: 11
Name of Federal Candidate Supported or Opposed by Expenditure: Dan Donovan		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 129427.85		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special Election	

Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/>	

Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/>	

(a) SUBTOTAL of Itemized Independent Expenditures.....	150.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	129427.85