

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

1. (a) Name of Individual, Organization or Corporation AUL Action, NFP		3. FEC Identification Number C C90011651
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 655 15th Street NW		
(c) City, State and ZIP Code Washington DC 20005		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Individual filers only	Name of Employer Occupation	

4. TYPE OF REPORT (check appropriate boxes):

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

(b) Is this Report an amendment? Yes No

5. COVERING PERIOD: FROM

M	M
1	0

 /

D	D
2	7

 /

Y	Y	Y	Y
2	0	1	0

THROUGH

M	M
1	0

 /

D	D
2	7

 /

Y	Y	Y	Y
2	0	1	0

6. TOTAL CONTRIBUTIONS	0.00
7. TOTAL INDEPENDENT EXPENDITURES.....	14436.00

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in constitution with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM	SIGNATURE	DATE
Bryan Slater		10/27/2010

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

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)

AUL Action, NFP

Full Name (Last, First, Middle Initial) of Payee
Edmonds Associates, Inc.

Date

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

Mailing Address
8221 Old Courthouse Road
Suite 204

Amount

7068.00

City State Zip Code
Vienna VA 22182

Purpose of Expenditure
Media buy for radio ad

Category/
Type

Office Sought: House State: PA
 Senate District: 10
 President

Name of Federal Candidate Supported or Opposed by Expenditure:
CHRISTOPHER P CARNEY

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 218428.45

Disbursement For: Primary General
2010
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Edmonds Associates, Inc.

Date

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

Mailing Address
8221 Old Courthouse Road
Suite 204

Amount

4168.00

City State Zip Code
Vienna VA 22182

Purpose of Expenditure
Media buy for radio ad

Category/
Type

Office Sought: House State: SC
 Senate District: 05
 President

Name of Federal Candidate Supported or Opposed by Expenditure:
JOHN MCKEE JR HON SPRATT

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 222596.45

Disbursement For: Primary General
2010
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Edmonds Associates, Inc.

Date

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

Mailing Address
8221 Old Courthouse Road
Suite 204

Amount

3200.00

City State Zip Code
Vienna VA 22182

Purpose of Expenditure
Media buy for radio ad

Category/
Type

Office Sought: House State: CO
 Senate District: 03
 President

Name of Federal Candidate Supported or Opposed by Expenditure:
JOHN TONY MR. SALAZAR

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 225796.45

Disbursement For: Primary General
2010
 Other (specify)

(a) **SUBTOTAL** of Itemized Independent Expenditures 14436.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures.....

(c) **TOTAL** Independent Expenditures 14436.00
(carry total from last page forward to Line 7)