

# 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<br>THE 60 PLUS ASSOCIATION, Inc.   |   | 3. FEC Identification Number<br><b>C</b> C90011685 |
| (b) Address (number and street) <input type="checkbox"/> check if different than previously reported<br>515 KING STREET SUITE 315 |   |  |
| (c) City, State and ZIP Code<br>ALEXANDRIA VA 22314   |   |  |
| 2. <b>Corporate filers only</b>   | Is the filer a qualified nonprofit corporation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  |
| <b>Individual filers only</b>   | 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 / D D / Y Y Y Y  
0 9 / 1 6 / 2 0 1 0

THROUGH

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

6. TOTAL CONTRIBUTIONS .....

.00

7. TOTAL INDEPENDENT EXPENDITURES.....

6453.33

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**

Amy Frederick

10/15/2010

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)

THE 60 PLUS ASSOCIATION, Inc.

Full Name (Last, First, Middle Initial) of Payee  
Direct Response LLC

Date

/   /

Mailing Address  
23640 E. Beardsley Rd Suite 100

Amount

6453.33

City State Zip Code  
Phoenix AZ 85024

Purpose of Expenditure  
postage, print, production and design

Category/  
Type

Office Sought:  House State: CA  
 Senate District: 11  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Jerry McNerry

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 10365.33

Disbursement For:  Primary  General  
2010  
 Other (specify)

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

6453.33

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

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

6453.33