09%25#210/120 08:10

Image# 10931347175 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]				
THE 60 PLUS ASSOCIATION Inc.					
(b) Address (number and street) Check if different than previously reported 515 KING STREET SUITE 315	-				
(c) City, State and ZIP Code	3. FEC Identification Number				
ALEXANDRIA VA 22314					
2. Corporate filers only Is the filer a qualified nonprofit corporation?	C C90011685				
Individual filers only Name of Employer	Occupation				
	Coupaion				
4. TYPE OF REPORT (check appropriate boxes):					
(a) April 15 Quarterly Report 24-Hour Notice X 48-Hour	Notice				
July 15 Quarterly Report					
October Quarterly Report					
January 31 Year-End Report					
(b) Is this Report an amendment? Yes \Box No \overline{X}					
5. COVERING PERIOD: FROM 0,9 / 23 / Y Y Y Y 2010					
THROUGH					
6. TOTAL CONTRIBUTIONS	.00				
7. TOTAL INDEPENDENT EXPENDITURES	14905.00				
Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or 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 reported herein were made by a corporation. I certify that the corporation is a qualified nonprofit corporation under the Commission's required to the commissio	f the independent expenditures				
TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE	DATE				
Amy Frederick	09/25/2010				
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

Image# 10931347176 SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

FOR LINE 7 FOR FORM 5

THE 60 PLUS ASSOCIATION Inc.						
Full Name (Last, First, Middle Initial) of Payee			Date			
Mentzer Media Service Inc.						
Mailing Address 600 Fairmont Ave.			0 9 Amount	23	2010	
City	State Zip Code				14905.00	
Towson	MD 21286					
Purpose of Expenditure	Category/	Offic	ce Sought: X	House	State: PA	
TV/Media Production	Туре	н	ouse	Senate	District: <u>11</u>	
Name of Federal Candidate Supported or Opposed by Paul Kanjorski	xpenditure:	Che	ck One:	President Support	X Oppose	
			ursement For:	Primary	X General	
Calendar Year-To-Date Per Election for Office Sought	464011.	46	2010 ther (specify)		General	
(a) SURTOTAL of Itemized Independent Expenditures					14905.00	
(a) SUBTOTAL of Itemized Independent Expenditures .					14905.00	
(b) SUBTOTAL of Unitemized Independent Expenditure	5			• • •		
(c) TOTAL Independent Expenditures					14905.00	