

# 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 Working America		3. FEC Identification Number <b>C</b> C90011156
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 815 16th St., N.W.		
(c) City, State and ZIP Code Washington DC 20006		
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
0	5

 / 

D	D
2	2

 / 

Y	Y	Y	Y
2	0	1	0

THROUGH

M	M
0	5

 / 

D	D
2	2

 / 

Y	Y	Y	Y
2	0	1	0

6. TOTAL CONTRIBUTIONS .....	<input style="width: 90%;" type="text" value="0.00"/>
7. TOTAL INDEPENDENT EXPENDITURES.....	<input style="width: 90%;" type="text" value="3925.57"/>

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
Jeff Prior		05/23/2010

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)

Working America

Full Name (Last, First, Middle Initial) of Payee  
AFSCME

Date

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

Mailing Address  
1625 L St., NW

Amount

3357.14

City State Zip Code  
Washington DC 20036

Purpose of Expenditure  
Phone center rental

Category/  
Type

Office Sought:  House State: AR  
 Senate  
 President District: \_\_\_\_\_

Name of Federal Candidate Supported or Opposed by Expenditure:  
Bill Halter

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 64769.65

Disbursement For:  Primary  General  
2010  
 Other (specify) Runoff

Full Name (Last, First, Middle Initial) of Payee  
Ryan Budman

Date

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

Mailing Address  
5701 Cochiti Dr, NW

Amount

25.00

City State Zip Code  
Albuquerque NM 87120

Purpose of Expenditure  
Per diem

Category/  
Type

Office Sought:  House State: AR  
 Senate  
 President District: \_\_\_\_\_

Name of Federal Candidate Supported or Opposed by Expenditure:  
Bill Halter

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 8167.38

Disbursement For:  Primary  General  
2010  
 Other (specify) Runoff

Full Name (Last, First, Middle Initial) of Payee  
Extended Stay Hotel

Date

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

Mailing Address  
Hardin Rd

Amount

172.92

City State Zip Code  
Little Rock AR 72203

Purpose of Expenditure  
Housing

Category/  
Type

Office Sought:  House State: AR  
 Senate  
 President District: \_\_\_\_\_

Name of Federal Candidate Supported or Opposed by Expenditure:  
Bill Halter

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 13272.89

Disbursement For:  Primary  General  
2010  
 Other (specify) Runoff

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

3555.06

(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)

Working America

Full Name (Last, First, Middle Initial) of Payee  
Joseph Fazio

Date

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

Mailing Address  
5011 South Swanson St.

Amount

25.00

City State Zip Code  
Las Vegas NV 89119

Purpose of Expenditure  
Per diem

Category/  
Type

Office Sought:  House State: AR  
 Senate  
 President District: \_\_\_\_\_

Name of Federal Candidate Supported or Opposed by Expenditure:  
Bill Halter

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 768.20

Disbursement For:  Primary  General  
2010  
 Other (specify) Runoff

Full Name (Last, First, Middle Initial) of Payee  
Steve Karbowski

Date

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

Mailing Address  
4195 West 22nd St

Amount

25.00

City State Zip Code  
Cleveland OH 44109

Purpose of Expenditure  
Per diem

Category/  
Type

Office Sought:  House State: AR  
 Senate  
 President District: \_\_\_\_\_

Name of Federal Candidate Supported or Opposed by Expenditure:  
Bill Halter

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 9341.44

Disbursement For:  Primary  General  
2010  
 Other (specify) Runoff

Full Name (Last, First, Middle Initial) of Payee  
Craig Parsley

Date

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

Mailing Address  
411 6th St.

Amount

25.00

City State Zip Code  
Newcastle DE 19720

Purpose of Expenditure  
Per diem

Category/  
Type

Office Sought:  House State: AR  
 Senate  
 President District: \_\_\_\_\_

Name of Federal Candidate Supported or Opposed by Expenditure:  
Bill Halter

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 645.00

Disbursement For:  Primary  General  
2010  
 Other (specify) Runoff

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

75.00

(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)

Working America

Full Name (Last, First, Middle Initial) of Payee  
Mary Richards

Date

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

Mailing Address  
1203 Emerson St. Apt 21

Amount

25.00

City State Zip Code  
Denver CO 90218

Purpose of Expenditure  
Per diem

Category/  
Type

Office Sought:  House State: AR  
 Senate  
 President District: \_\_\_\_\_

Name of Federal Candidate Supported or Opposed by Expenditure:  
Bill Halter

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 9341.44

Disbursement For:  Primary  General  
2010  
 Other (specify) Runoff

Full Name (Last, First, Middle Initial) of Payee  
Heather Rozzo

Date

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

Mailing Address  
819 SW 14th Ct.

Amount

25.00

City State Zip Code  
Ft. Lauderdale FL 33315

Purpose of Expenditure  
Per diem

Category/  
Type

Office Sought:  House State: AR  
 Senate  
 President District: \_\_\_\_\_

Name of Federal Candidate Supported or Opposed by Expenditure:  
Bill Halter

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1301.08

Disbursement For:  Primary  General  
2010  
 Other (specify) Runoff

Full Name (Last, First, Middle Initial) of Payee  
Thrifty

Date

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

Mailing Address  
1 Airport Dr

Amount

75.50

City State Zip Code  
Little Rock AR 72206

Purpose of Expenditure  
Rental car

Category/  
Type

Office Sought:  House State: AR  
 Senate  
 President District: \_\_\_\_\_

Name of Federal Candidate Supported or Opposed by Expenditure:  
Bill Halter

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 21683.70

Disbursement For:  Primary  General  
2010  
 Other (specify) Runoff

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

125.50

(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)

Working America

Full Name (Last, First, Middle Initial) of Payee  
Thrifty

Date

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

Mailing Address  
1 Airport Dr

Amount

75.50

City State Zip Code  
Little Rock AR 72206

Purpose of Expenditure  
Rental car

Category/  
Type

Office Sought:  House State: AR  
 Senate  
 President District: \_\_\_\_\_

Name of Federal Candidate Supported or Opposed by Expenditure:  
Bill Halter

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 21759.20

Disbursement For:  Primary  General  
 Other (specify) Runoff

Full Name (Last, First, Middle Initial) of Payee  
Thrifty

Date

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

Mailing Address  
1 Airport Dr

Amount

94.51

City State Zip Code  
Little Rock AR 72206

Purpose of Expenditure  
Rental car

Category/  
Type

Office Sought:  House State: AR  
 Senate  
 President District: \_\_\_\_\_

Name of Federal Candidate Supported or Opposed by Expenditure:  
Bill Halter

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 21853.71

Disbursement For:  Primary  General  
 Other (specify) Runoff

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

170.01

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

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

3925.57