Image# 10931447212 107/1/4F210/108 19:49

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

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

(a) Name of Individual, Organization or Corporation	
SUSAN B ANTHONY LIST INC	
SOSAN B ANTHON LIST INC	
(b) Address (number and street)	
Ste 750 (c) City, State and ZIP Code	
	3. FEC Identification Number
Washington DC 20036	C C90011313
2. Corporate filers only Is the filer a qualified nonprofit corporation? Yes No	0 030011313
Individual filers only Name of Employer	Occupation
4. TYPE OF REPORT (check appropriate boxes):	
(a) April 15 Quarterly Report 24-Hour Notice 48-Hour I	Notice
☐ July 15 Quarterly Report	
☑ October Quarterly Report	
☐ January 31 Year-End Report	
(b) Is this Report an amendment? Yes \(\subseteq \text{No } \textbf{X} \)	
5. COVERING PERIOD: FROM MOTO OT VYYYY Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
THROUGH	
M M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
6. TOTAL CONTRIBUTIONS	154529.00
	154529.00
7. TOTAL INDEPENDENT EXPENDITURES	134329.00
· · · · · · · · · · · · · · · · · · ·	
Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or i 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 t reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulation	the independent expenditures
TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE	DATE
Jennifer Gross	10/14/2010
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report t	to the penalties of 2 U.S.C. 437g
1.2.2. 2. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3.	

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-A ITEMIZED RECEIPTS

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Date of Receipt M M / D D / Y Y Y Y Y Y O O O O O O O O O O O O O
M M / D D / Y Y Y
M M / D D / Y Y Y
M M / D D / Y Y Y
M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Transaction ID: F56.4206
Amount of Each Receipt this Period
154529.00
ccupation
5

SUBTOTAL of Receipts This Page (optional)	154529.00
TOTAL This Period (last page carry total to Line 6)	154529.00

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SCHEDULE 3-E	PAGE 37 10
TEMIZED INDEPENDENT EXPENDITURES	FOR LINE 7 FOR FORM 5
NAME OF FILER (In Full)	
SUSAN B ANTHONY LIST INC	
Full Name (Last, First, Middle Initial) of Payee	Low
At Your Service Taxi	Date
A Tour Solvios Taxi	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address	
424 Clay St	Amount
City State Zip Code	100.00
Erlanger KY 41018	
Purpose of Expenditure	Office Sought: House out IN
Travel Category/ Trype	State: IIV
71.	Senate X Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President President
BRAD ELLSWORTH	Check One: Support X Oppose
	Disbursement For: Primary X General
Calendar Year-To-Date Per Election	2010
for Office Sought	Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Nicholas Bell	M M / D D / Y Y Y
Mailing Address	0 8 / D D / Y Y Y Y Y
8602 Ordinary Way	Amount
	173.82
City State Zip Code	
Annandale VA 22003	
Purpose of Expenditure Category/	Office Sought: House State: IN
Travel Type Type	Senate X Senate
Name of Federal Candidate Supported or Opposed by Expenditure:	President District:
BRAD ELLSWORTH	Check One: Support X Oppose
Calendar Year-To-Date Per Election	2010T Tilliary dentital
for Office Sought 173.82	Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Data
Bright Media, Inc.	Date
	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
Mailing Address 2109 Huidekoper PI NW	Amount
2109 Huldekoper FTNW	
City State Zip Code	2750.00
Washington DC 20007	
Purpose of Expenditure Category/	Office Sought: House State: NH
Ad Production Type	Senate X Senate
Name of Federal Candidate Supported or Opposed by Expenditure:	President District:
KELLY A AYOTTE	
	Check One: X Support Oppose
Calendar Year-To-Date Per Election	Disbursement For: X Primary General
for Office Sought 4750.00	2010 Other (specify)
ŭ l	
	3023.82
(a) SUBTOTAL of Itemized Independent Expenditures	

(b) SUBTOTALof Unitemized Independent Expenditures.....

(c) TOTAL Independent Expenditures

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full) SUSAN B ANTHONY LIST INC Full Name (Last, First, Middle Initial) of Payee Date Community Cab M M 2010 Mailing Address Amount 629 York Street 28.00 City State Zip Code KY 41071-1815 Newport Purpose of Expenditure Office Sought: House State: IN Category/ Travel Type Χ Senate Senate District: _ President Name of Federal Candidate Supported or Opposed by Expenditure: **BRAD ELLSWORTH** Check One: Support X Oppose Disbursement For: X General Primary Calendar Year-To-Date Per Election 2010 28.00 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date **Conquest Communications** М М 2010 Mailing Address Amount 2812 Emerywood Pkwy Ste 103 14880.00 Zip Code City State Richmond VA 23294 Purpose of Expenditure Office Sought: House State: NH Category/ Voter Calls Type Χ Senate Senate District: President Name of Federal Candidate Supported or Opposed by Expenditure: **KELLY A AYOTTE** Support Check One: Oppose Disbursement For: X Primary General Calendar Year-To-Date Per Election 2010 19338.91 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date **Conquest Communications** M 9 2010 Mailing Address 2812 Emerywood Pkwy Ste 103 Amount 2375.60 Zip Code City State VA23294 Richmond Purpose of Expenditure Office Sought: State: NH Category/ House Voter Data Type Χ Senate Senate District: President Name of Federal Candidate Supported or Opposed by Expenditure: **KELLY A AYOTTE** Check One: Support Oppose Disbursement For: X Primary General Calendar Year-To-Date Per Election 2010 21714.51 for Office Sought Other (specify) 17283.60 (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

CHEVNE	ANTHONY	LICT INC

Full Name (Last, First, Middle Initial) of Payee	Date
Crossroads Media	M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 66 Canal Center Plaza Ste 555	Amount
City State Zip	Code 35686.00
Purpose of Expenditure Categor	Office Sought: House State: CA
Ad Placement Typ	
Name of Federal Candidate Supported or Opposed by Expenditure: KELLY A AYOTTE	Check One: X Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: X Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee Delta Air	Date M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1030 Delta Blvd	Amount
	Code 464.70 320
Purpose of Expenditure Categor	Office Sought: House State: IN
Travel	oe Senate X Senate
Name of Federal Candidate Supported or Opposed by Expenditure:	District:
BRAD ELLSWORTH	Check One: Support X Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary X General 2010 Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Design 4, Inc.	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 106 North Collins Street	Amount 4376.00
·	Code 4376.00 563
Purpose of Expenditure Categor	Office Sought: House State: CA
Ad Design Typ	De Sonato X Sonato
Name of Federal Candidate Supported or Opposed by Expenditure: CARLY FIORINA	Check One: X Support Oppose
	Disbursement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought	5816.00 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	40526.70
(b) SUBTOTALof Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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FOR LI	NE 7 FOR FORM 5

NAME OF FILER (In Full)

SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee		Date
Design 4, Inc.		M M / D D / Y Y Y Y
Mailing Address		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
106 North Collins Street		Amount
City Stat	te Zip Code	1711.00
Plant City FL	33563	
Purpose of Expenditure	Category/	Office Sought: House State: NH
Ad Production	Type	Senate X Senate
Name of Federal Candidate Supported or Opposed by Exper	nditure:	President District:
KELLY A AYOTTE		Check One: X Support Oppose
		Disbursement For: X Primary General
Calendar Year-To-Date Per Election for Office Sought	7527.00	2010 Other (specify)
<u> </u>		Other (specify)
Full Name (Last, First, Middle Initial) of Payee Design 4, Inc.		Date
Design 4, inc.		0 9 1 4 2 0 1 0
Mailing Address 106 North Collins Street		Amount
106 NORTH COIIIIS Street		2045.00
City Sta	'	2043.00
Plant City FL	33563	
Purpose of Expenditure Ad Production	Category/	Office Sought: House State: NH
	Туре	Senate X Senate District:
Name of Federal Candidate Supported or Opposed by Exper	nditure:	President —
RELETATIONE		Check One: X Support Oppose
Calendar Year-To-Date Per Election		Disbursement For: X Primary General
for Office Sought	9572.00	Other (specify)
Full Name (Last, First, Middle Initial) of Payee	I	Date
emotive, Ilc		
Mailing Address		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
2800 Shirlington Rd		Amount
City Sta	te Zip Code	337.50
Arlington VA	22206	
Purpose of Expenditure	Category/	Office Sought: House State: NH
Website	Type	Senate X Senate
Name of Federal Candidate Supported or Opposed by Exper	nditure:	President District:
KELLY A AYOTTE		Check One: X Support Oppose
		Disbursement For: X Primary General
Calendar Year-To-Date Per Election for Office Sought	955.50	
Tor Office Sought		Other (specify)
		4093.50
(a) SUBTOTAL of Itemized Independent Expenditures		
(b) SUBTOTALof Unitemized Independent Expenditures		
(a) CODICIAL CINCONIZOS INCOPORTUCIN EXPONENTICIONES		
(c) TOTAL Independent Expenditures		
(carry total from last page forward to Line 7)		

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee		Date
Frontier Airlines		M M / D D / Y Y Y Y
Mailing Address		0.8 15 2010
6000 North Terminal Pkwy		Amount
City State	Zip Code	309.70
Atlanta GA	30320	
Purpose of Expenditure	Category/	Office Sought: House State: IN
Travel	Type	Senate X Senate State: IN
Name of Federal Candidate Supported or Opposed by Expenditure:		President District:
BRAD ELLSWORTH		Check One: Support X Oppose
Calendar Year-To-Date Per Election	200.70	Disbursement For: Primary X General 2010
for Office Sought	309.70	Other (specify)
Full Name (Last, First, Middle Initial) of Payee		Date
Google, Inc.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address		
1600 Amphitheatre Parkway		Amount
City State	Zip Code	5018.88
Mountain View CA	94043	
Purpose of Expenditure	Category/	Office Sought: House State: CA
Online Ads	Type	Senate X Senate
Name of Federal Candidate Supported or Opposed by Expenditure:		President District: 00
CARLY FIORINA		Check One: X Support Oppose
		Disbursement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought	85018.88	2010
		Other (specify)
Full Name (Last, First, Middle Initial) of Payee		Date
Google, Inc.		M M / D D / Y Y Y
Mailing Address		0.8 23 2010
1600 Amphitheatre Parkway		Amount
City State	Zip Code	20000.00
Mountain View CA	94043	
Purpose of Expenditure	Category/	Office Sought: House State: CA
Advertisements	Type	Sanata X Sanata
Name of Federal Candidate Supported or Opposed by Expenditure:		President District: 00
BARBARA BOXER		Check One: Support X Oppose
		Disbursement For: Primary X General
Calendar Year-To-Date Per Election	105018.88	2010
for Office Sought	.000.000	Other (specify)
		25328.58
(a) SUBTOTAL of Itemized Independent Expenditures		25326.56
(b) CURTOTAL of Uniterpired Index and death Common distance		
(b) SUBTOTALof Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
(carry total from last page forward to Line 7)		

Image# 10931447219 SCHEDULE 5-E

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MIZED INDEPENDENT EXPENDITUR	res	FOR LINE 7 FOR FORM 5
ME OF FILER (In Full)		
USAN B ANTHONY LIST INC		
Full Name (Last, First, Middle Initial) of Payee		Date
Google, Inc.		0 9 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address		09 08 2010 Amount
1600 Amphitheatre Parkway		
City	State Zip Code	31970.17
Mountain View	CA 94043	
Purpose of Expenditure	Category/	Office Sought: House State: NH
Ad Placement	Type	Senate X Senate District:
Name of Federal Candidate Supported or Oppos	sed by Expenditure:	President District:
KELLY A AYOTTE		Check One: X Support Oppose
O. L. L. West To Date Day Floration		Disbursement For: X Primary General
Calendar Year-To-Date Per Election for Office Sought	136989.05	2010 Other (specify)
Full Name (Last, First, Middle Initial) of Payee Hampton Inn & Suites		Date
		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address		Amount
5821 Richmond Hwy		412.02
City	State Zip Code	412.02
Alexandria	VA 22303	
Purpose of Expenditure	Category/	Office Sought: House State: IN
Travel	Type	Senate X Senate District:
Name of Federal Candidate Supported or Oppos	sed by Expenditure:	President
BRAD ELLSWORTH		Check One: Support X Oppose
Calendar Year-To-Date Per Election		Disbursement For: Primary X General
for Office Sought	412.02	2010 — July 2010 —
Full Name (Last, First, Middle Initial) of Payee		
Hyatt		Date
Mailing Address 300 Meijer Drive		Amount
, , , , , , , , , , , , , , , , , , ,	Olete Zin Codo	150.47
City Florence	State Zip Code KY 41042	
Purpose of Expenditure		Office Sought: House Out IN
Travel	Category/	State: 114
	Type	Senate X Senate District:
Name of Federal Candidate Supported or Oppos BRAD ELLSWORTH	sed by Expenditure:	President
		Check One: Support X Oppose
Calendar Year-To-Date Per Election	450.47	Disbursement For: Primary X General
for Office Sought	150.47	Other (specify)
a) SUBTOTAL of Itemized Independent Expend	ditures	32532.66
(b) SUBTOTALof Unitemized Independent Expe	enditures	
a) TOTAL Indopendent Expanditures		

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CUEDOFE 2-E			FAGE 97 10
EMIZED INDEPENDENT EXPENDITU	RES		FOR LINE 7 FOR FORM 5
AME OF FILER (In Full)			
SUSAN B ANTHONY LIST INC			
Full Name (Last, First, Middle Initial) of Payee			Date
LifeNews			
			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
Mailing Address P.O. Box 270841			Amount
1.0. 60% 270041			
City	State	Zip Code	200.00
Fort Collins	CO	80527	
Purpose of Expenditure		Category/	Office Sought: House State: NH
Advertisements		Type	Senate X Senate
Name of Federal Candidate Supported or Oppo	and by Evapaditure:		President District:
KELLY A AYOTTE	sed by Experialitire.		
			Check One: X Support Oppose
Calendar Year-To-Date Per Election			Disbursement For: X Primary General
for Office Sought		200.00	Other (specify)
Full Name (Last, First, Middle Initial) of Payee			Date
Meijer			0 8
Mailing Address			
4990 Houston Rd			Amount
City	State	Zip Code	9.25
Florence	KY	41042	
Purpose of Expenditure			Office Sought: House Out IN
Travel		Category/ Type	State: IIV
			Senate X Senate District:
Name of Federal Candidate Supported or Oppo BRAD ELLSWORTH	sed by Expenditure:		President President
DIAD ELLOWORTH			Check One: Support X Oppose
Colondor Voor To Data Day Flacking			Disbursement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought		9.25	2010 — — — — — — — — — — — — — — — — — —
<u> </u>			
Full Name (Last, First, Middle Initial) of Payee			Date
Nashua Telegraph			M M / D D / Y Y Y Y
Mailing Address			0 9 / D D / Y Y Y Y Y
17 Executive Dr.			Amount
City	State	Zip Code	4281.20
City Hudson	State NH	03051	
	. 1111		Office Country
Purpose of Expenditure		Category/	Office Sought: House State: NH
Newspaper Ad		Type	Senate X Senate District:
Name of Federal Candidate Supported or Oppo	sed by Expenditure:		President District:
KELLY A AYOTTE			Check One: X Support Oppose
			Disbursement For: X Primary General
Calendar Year-To-Date Per Election		4281.20	2010 —
for Office Sought		7201.20	Other (specify)
-			

(b) SUBTOTALof Unitemized Independent Expenditures.....

Image# 10931447221 SCHEDULE 5-E

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EMIZED INDEPENDENT EXPENDITUR	ES		FOR LINE 7 FOR FORM 5
ME OF FILER (In Full)			
SUSAN B ANTHONY LIST INC			
Full Name (Last, First, Middle Initial) of Payee			Date
Newsmax Media, Inc.			M M / D D / Y Y Y Y
Mailing Address			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
560 Village Blvd			Amount
Suite 120 City	State	Zip Code	931.00
West Palm Beach	FL	33409	
Purpose of Expenditure		Catagony	Office Sought: House State: NH
Email Rental		Category/ Type	Senate Office Sought: House State: NH Senate
Name of Federal Candidate Supported or Oppos	ad by Evpanditura	1	President District:
KELLY A AYOTTE	ed by Expenditure		
			Δ 11
Calendar Year-To-Date Per Election		10 0 01.55	Disbursement For: X Primary General
for Office Sought		12501.00	Other (specify)
Full Name (Last, First, Middle Initial) of Payee			Date
Papa Johns			
Mailing Address			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
3827 Pennsylvania Ave SE			Amount
· ·	State	Zip Code	44.80
City Washington	DC	20020	
Purpose of Expenditure			Office Sought: House Out IN
Meals		Category/ Type	State: IIV
			Senate X Senate District: President
Name of Federal Candidate Supported or Oppos BRAD ELLSWORTH	ed by Expenditure	:	
			Check One: Support X Oppose
Calendar Year-To-Date Per Election			Disbursement For: Primary X General 2010
for Office Sought		44.80	Other (specify)
Full Name (Last, First, Middle Initial) of Payee			Date
Holly Roepke			
Mailing Address			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
5550 Columbia Pike			Amount
#742	State	7in Codo	600.00
City Arlington	VA	Zip Code 22204	
Purpose of Expenditure			Office Sought: House Charles IN
Independent Contractor		Category/ Type	State: IIV
<u> </u>	ad bar Earl Pr		Senate X Senate District:
Name of Federal Candidate Supported or Oppos BRAD ELLSWORTH	ea by Expenditure	:	
			Check One: Support X Oppose
Calendar Year-To-Date Per Election			Disbursement For: Primary X General
for Office Sought		600.00	Other (specify)
(a) SUBTOTAL of Itemized Independent Expend	itures		1575.80
(b) SUBTOTALof Unitemized Independent Expe	nditures		
(c) TOTAL Independent Expenditures			

Image# 10931447222 SCHEDULE 5-E

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EMIZED INDEPENDENT EXPENDITUR	RES		FOR LINE 7 FOR FORM 5
AME OF FILER (In Full)			-
SUSAN B ANTHONY LIST INC			
Full Name (Last, First, Middle Initial) of Payee			Date
Holly Roepke			M M / D D / Y Y Y
Mailing Address			0.8 / D.B. / Y.Y.Y.Y.Y.
5550 Columbia Pike			Amount
#742			100.00
City	State	Zip Code	100.00
Arlington	VA	22204	
Purpose of Expenditure		Category/	Office Sought: X House State: IN
Independent Contractor		Type	House Senate
	=		President District: 02
Name of Federal Candidate Supported or Oppos JOSEPH SIMON MR. DONNELLY	ed by Expenditure:		
JOSEPH SIMON WR. DONNELLY			Check One: Support X Oppose
			Disbursement For: Primary X General
Calendar Year-To-Date Per Election		700.00	2010
for Office Sought		700.00	Other (specify)
Full Name (Last, First, Middle Initial) of Payee			Date
Holly Roepke			
			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
Mailing Address			Amount
5550 Columbia Pike #742			
City	State	Zip Code	100.00
Arlington	VA	22204	
Purpose of Expenditure			Office Sought: V House Out IN
Independent Contractor		Category/	State: III
·		Type	House Senate District: 09
Name of Federal Candidate Supported or Oppos	ed by Expenditure:	:	President Station
BARON PAUL HILL			Check One: Support X Oppose
			Disbursement For: Primary X General
Calendar Year-To-Date Per Election		800.00	2010 , —
for Office Sought		000.00	Other (specify)
Full Name (Last, First, Middle Initial) of Payee			Date
Holly Roepke			
			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
Mailing Address			Amount
5550 Columbia Pike #742			
City	State	Zip Code	50.00
Arlington	VA	22204	
Purpose of Expenditure			Office Sought: Y House Coats OH
Independent Contractor		Category/	State: OTT
·		Type	House Senate District: 01
Name of Federal Candidate Supported or Oppos	ed by Expenditure:		President President
STEVEN LEO DRIEHAUS			Check One: Support X Oppose
			Disbursement For: Primary X General
Calendar Year-To-Date Per Election		950.00	2010 Primary K General
for Office Sought		850.00	Other (specify)
1			
(a) SUBTOTAL of Itemized Independent Expend	itures		250.00
(a) SOBIOTAL OF Itemized independent Expend	ııuı 🖘		
(E) OUDTOTAL of Hallowing distance dist	a alikuwa a		
(b) SUBTOTALof Unitemized Independent Expe	naitures		
(a) TOTAL lades and at Force "			
(c) TOTAL Independent Expenditures			

Image# 10931447223 SCHEDULE 5-E

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EMIZED INDEPENDENT EXPENDITURE AME OF FILER (In Full)		FOR LINE 7 FOR FORM 5
SUSAN B ANTHONY LIST INC		
COO, AT D / ATTION I LIOT INO		
Full Name (Last, First, Middle Initial) of Payee		Date
Holly Roepke		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 5550 Columbia Pike		Amount
#742		50.00
City	State Zip Code	
Arlington	VA 22204	
Purpose of Expenditure	Category/	Office Sought: X House State: OH
Independent Contractor	Type	House Senate District: 09
Name of Federal Candidate Supported or Opposed	d by Expenditure:	President
MARCY C HON. KAPTUR		Check One: Support X Oppose
Colorador Very To Data Day Florition		Disbursement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought	900.00	2010 Other (specify)
Full Name (Last, First, Middle Initial) of Payee		Date
Holly Roepke		
Mailing Address		0.8 / 1.9 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
5550 Columbia Pike		Amount
#742 City	State Zip Code	100.00
Arlington	VA 22204	
Purpose of Expenditure		Office Sought: Y House Out PA
Independent Contractor	Category/ Type	State: 17
·		House Senate District: 03
Name of Federal Candidate Supported or Opposed KATHLEEN DAHLKEMPER	d by Expenditure:	
TO THE ELLY BY WILLIAM ETC		Check One: Support X Oppose
Calendar Year-To-Date Per Election		Disbursement For: Primary X General
for Office Sought	1000.00	Other (specify)
Full Name (Last, First, Middle Initial) of Payee		Deta
Mark Roepke		Date
·		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
Mailing Address 5550 Columbia Pike		Amount
#742		2700.00
City	State Zip Code	
Arlington	VA 22204	
Purpose of Expenditure	Category/	Office Sought: House State: IN
Independent Contractor	Type	Senate X Senate District:
Name of Federal Candidate Supported or Opposed	d by Expenditure:	President District:
BRAD ELLSWORTH		Check One: Support X Oppose
Oderde Ver Te S. i. S. St. ii		Disbursement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought	2700.00	2010 Other (specify)
(a) SUPTOTAL of Itomized Indopendent Conservation	uron	2850.00
(a) SUBTOTAL of Itemized Independent Expenditu		
(b) SUBTOTALof Unitemized Independent Expendent	ditures	
(a) COSTOTALO CINCONIZON INSPONDENT EXPON		
(c) TOTAL Independent Expenditures		

SCHEDULE 5-E

FOR LINE 7 FOR FORM 5

I EMIZED INDEPENDENT	EXPENDITURE
NAME OF FILER (In Full)	

SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee		Date
Mark Roepke		M M / D D / Y Y Y Y
Mailing Address		
5550 Columbia Pike		Amount
#742 City State	Zin Codo	450.00
City State Arlington VA	Zip Code 22204	
3	I	Office Occupies
Purpose of Expenditure	Category/	Office Sought: X House State: IN
Independent Contractor	Type	House Senate District: 02
Name of Federal Candidate Supported or Opposed by Expenditure: JOSEPH SIMON MR. DONNELLY		President Check One: Support X Oppose
		Disbursement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought	3150.00	2010 Constant
Full Name (Last, First, Middle Initial) of Payee	<u>'</u>	Date
Mark Roepke		
Mailian Address		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
Mailing Address 5550 Columbia Pike #742		Amount
City State	Zip Code	450.00
Arlington VA	22204	
Purpose of Expenditure	Category/	Office Sought: X House State: IN
Independent Contractor	Type	House Senate
Name of Federal Candidate Supported or Opposed by Expenditure:		President District: 09
BARON PAUL HILL		Check One: Support X Oppose
Calendar Year-To-Date Per Election		Disbursement For: Primary X General
for Office Sought	3600.00	Other (specify)
Full Name (Last, First, Middle Initial) of Payee	I	
Mark Roepke		Date
·		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
Mailing Address		Amount
5550 Columbia Pike #742		
City State	Zip Code	225.00
Arlington VA	22204	
Purpose of Expenditure	Category/	Office Sought: X House State: OH
Independent Contractor	Type	House
Name of Federal Candidate Supported or Opposed by Expenditure:		President District: 01
STEVEN LEO DRIEHAUS		Check One: Support X Oppose
		Disbursement For: Primary X General
Calendar Year-To-Date Per Election	3825.00	2010
for Office Sought	3023.00	Other (specify)
	'	
(a) SUBTOTAL of Itemized Independent Expenditures		1125.00
(b) SUBTOTALof Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
(carry total from last page forward to Line 7)		
(, , , , , , , ,		

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EMIZED INDEPENDENT EXPENDITURES	3		FOR LINE 7 FOR FORM 5
AME OF FILER (In Full)			
SUSAN B ANTHONY LIST INC			
Full Name (Last, First, Middle Initial) of Payee			
Mark Roepke			Date
I wark roepke			0 7
Mailing Address			
5550 Columbia Pike #742			Amount
City	State	Zip Code	225.00
Arlington	VA	22204	
Purpose of Expenditure		Category/	Office Sought: X House State: OH
Independent Contractor		Type	House Senate District: 09
Name of Federal Candidate Supported or Opposed	by Expenditure); ;	President District: 05
MARCY C HON. KAPTUR			Check One: Support X Oppose
			+ — — — —
Calendar Year-To-Date Per Election			Disbursement For: Primary X General 2010
for Office Sought		4050.00	Other (specify)
Full Name (Last, First, Middle Initial) of Payee			
Mark Roepke			Date
Магк поерке			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address			
5550 Columbia Pike			Amount
#742	State	Zip Code	450.00
City Arlington	VA	21p Code 22204	
	V /\-	77774	
Purpose of Expenditure		Category/	Office Sought: X House State: PA
Independent Contractor		Туре	House Senate
Name of Federal Candidate Supported or Opposed	by Expenditure): :	President District: 03
KATHLEEN DAHLKEMPER	-7 1		Check One: Support X Oppose
Calendar Year-To-Date Per Election			Disbursement For: Primary X General
for Office Sought		4500.00	Other (specify)
Full Name / Last First Middle Initial) of Payon			<u> </u>
Full Name (Last, First, Middle Initial) of Payee Mark Roepke			Date
Wark hoepke			0.8 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address			
5550 Columbia Pike			Amount
#742 City	State	Zip Code	2945.51
Arlington	VA	22204	
•	***	T	
Purpose of Expenditure		Category/	Office Sought: House State: IN
Travel		Туре	Senate X Senate
Name of Federal Candidate Supported or Opposed	by Expenditure); ;	President District:
BRAD ELLSWORTH			Check One: Support X Oppose
Calendar Year-To-Date Per Election			Disbursement For: Primary X General 2010
for Office Sought		7445.51	Other (specify)
() OUDTOTAL ()			3620.51
(a) SUBTOTAL of Itemized Independent Expenditure	es		
(b) SUBTOTALof Unitemized Independent Expendit	ures		

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full) SUSAN B ANTHONY LIST INC Full Name (Last, First, Middle Initial) of Payee Date Mark Roepke M M 2010 Mailing Address Amount 5550 Columbia Pike #742 490.92 State Zip Code City VA 22204 Arlington Purpose of Expenditure Office Sought: Х House State: IN Category/ Travel Type House Senate District: _02 President Name of Federal Candidate Supported or Opposed by Expenditure: JOSEPH SIMON MR. DONNELLY Check One: Support X Oppose Disbursement For: X General Primary Calendar Year-To-Date Per Election 2010 7936.43 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date Mark Roepke м м 2010 Mailing Address Amount 5550 Columbia Pike #742 490.92 Zip Code City State Arlington VA 22204 Purpose of Expenditure Office Sought: χ House State: IN Category/ Travel Type House Senate District: 09 President Name of Federal Candidate Supported or Opposed by Expenditure: **BARON PAUL HILL** Check One: Support X Oppose Disbursement For: Primary General Calendar Year-To-Date Per Election 2010 8427.35 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date Mark Roepke M 8 2010 Mailing Address Amount 5550 Columbia Pike #742 245.46 City Zip Code State VA 22204 Arlington Purpose of Expenditure Office Sought: State: OH Category/ X House Travel Type Senate House District: 01 President Name of Federal Candidate Supported or Opposed by Expenditure: STEVEN LEO DRIEHAUS Check One: Support X Oppose Disbursement For: Primary General Calendar Year-To-Date Per Election 2010 8672.81 for Office Sought Other (specify) 1227.30 (a) SUBTOTAL of Itemized Independent Expenditures ... (b) SUBTOTALof Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)

SCHEDULE 5-E

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ITEMIZED INDEPENDENT EXPENDITURES FOR LINE 7 FOR FORM 5 NAME OF FILER (In Full) SUSAN B ANTHONY LIST INC Full Name (Last, First, Middle Initial) of Payee Date Mark Roepke M M 2010 Mailing Address Amount 5550 Columbia Pike #742 245.46 State Zip Code City VA 22204 Arlington Purpose of Expenditure Office Sought: Category/ Х House State: OH Travel Type House Senate District: _09 President Name of Federal Candidate Supported or Opposed by Expenditure: MARCY C HON. KAPTUR Check One: Support X Oppose Disbursement For: X General Primary Calendar Year-To-Date Per Election 2010 8918.27 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date Mark Roepke м м 2010 Mailing Address Amount 5550 Columbia Pike #742 490.92 Zip Code City State Arlington VA 22204 Purpose of Expenditure Office Sought: X House State: PA Category/ Travel Type House Senate District: 03 President Name of Federal Candidate Supported or Opposed by Expenditure: KATHLEEN DAHLKEMPER Check One: Support X Oppose Disbursement For: Primary General Calendar Year-To-Date Per Election 9409.19 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date Staples M 8 2010 Mailing Address Amount 500 Staples Drive 18.00 Zip Code State City MA 01702 Framingham Purpose of Expenditure Office Sought: State: IN Category/ House Supplies Type Χ Senate Senate District: President Name of Federal Candidate Supported or Opposed by Expenditure: **BRAD ELLSWORTH** Check One: Support X Oppose Disbursement For: Primary General Calendar Year-To-Date Per Election 2010 18.00 for Office Sought Other (specify) 754.38 (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTALof Unitemized Independent Expenditures.....

SCHEDULE 5-E

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ITEMIZED INDEPENDENT EXPENDITURES FOR LINE 7 FOR FORM 5 NAME OF FILER (In Full) SUSAN B ANTHONY LIST INC Full Name (Last, First, Middle Initial) of Payee Date Townhall м м 0 9 2010 Mailing Address Amount 750 Old Hickory Blvd Suite 150-1 400.00 State Zip Code TN 37027 **Brentwood** Purpose of Expenditure Office Sought: House Category/ State: NH **Email Rental** Type Χ Senate Senate District: _ President Name of Federal Candidate Supported or Opposed by Expenditure: **KELLY A AYOTTE** Check One: Support Oppose X Primary Disbursement For: General Calendar Year-To-Date Per Election 2010 400.00 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date Union Leader М М 2 0 1 0 Mailing Address Amount 100 William Lobe Dr 5522.70 Zip Code City State Manchester NH 03109 Purpose of Expenditure Office Sought: House State: NH Category/ Newspaper Ad Type Χ Senate Senate District: President Name of Federal Candidate Supported or Opposed by Expenditure: **KELLY A AYOTTE** Check One: Support Oppose Disbursement For: X Primary General Calendar Year-To-Date Per Election 2010 5522.70 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date Union Leader M 9 2010 Mailing Address Amount 100 William Lobe Dr 9531.30 Zip Code City State NH 03109 Manchester Purpose of Expenditure Office Sought: State: NH Category/ House Newspaper Ad Type Χ Senate Senate District: President Name of Federal Candidate Supported or Opposed by Expenditure: **KELLY A AYOTTE** Check One: Support Oppose Disbursement For: X Primary General Calendar Year-To-Date Per Election 2010 15054.00 for Office Sought Other (specify) 15454.00 (a) SUBTOTAL of Itemized Independent Expenditures

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FOR LIN	NE 7 FOR FORM 5

NAME OF FILER (In Full)

SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee			Date
United Airlines			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 6000 N Terminal Pkwy			Amount
City	State	Zip Code	7.00
Atlanta	GA	30337	
Purpose of Expenditure		Category/	Office Sought: House State: IN
Travel		Туре	Senate X Senate District:
Name of Federal Candidate Supported or Oppo BRAD ELLSWORTH	sed by Expenditure:		Check One: Support X Oppose
			Disbursement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought		7.00	2010 Other (specify)
Full Name (Last, First, Middle Initial) of Payee			Date
United Airlines			
Mailing Address			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
6000 N Terminal Pkwy			Amount
-	State	Zip Code	385.70
City Atlanta	GA	30337	
Purpose of Expenditure			Office Sought: House Out IN
Travel		Category/ Type	State: 114
			Senate X Senate District:
Name of Federal Candidate Supported or Oppo BRAD ELLSWORTH	sed by Expenditure:		
			Check One: Support X Oppose
Calendar Year-To-Date Per Election			Disbursement For: Primary X General
for Office Sought	L	392.70	Other (specify)
	_		392.70
(a) SUBTOTAL of Itemized Independent Expen	ditures		
(E) CURTOTAL of Unitermined Indiana de 15	anditure -		
(b) SUBTOTALof Unitemized Independent Exp	enditures		
(c) TOTAL Independent Expenditures(carry total from last page forward to			154529.00
(our y total from last page forward to	,		