

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation League of Conservation Voters, Inc.			3. FEC Identification Number C C90005786
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1920 L St NW Suite 800			
(c) City, State and ZIP Code Washington DC 20036-			
2. Occupation and Name of Employer (for Individual Filers Only)			

4. TYPE OF REPORT (check appropriate boxes):

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

b) Is this Report an amendment? No Yes, it amends the report filed on / /

5. COVERING PERIOD:
 FROM / /
 THROUGH / /

6. TOTAL CONTRIBUTIONS..... 0.00

7. TOTAL INDEPENDENT EXPENDITURES 816414.74

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM	SIGNATURE	DATE
Patrick Collins	<i>Patrick Collins</i>	10/22/2014
	<i>[Electronically Filed]</i>	

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

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
League of Conservation Voters, Inc.

Full Name (Last, First, Middle Initial) of Payee Public Policy Polling		Date of Public Distribution/Dissemination 10 / 06 / 2014	
Mailing Address 2912 Highwoods Blvd		Amount 1500.00	
City Raleigh	State NC	Zip Code 27604-1064	Transaction ID : AFF7028A9EC4B43618A4
Purpose of Expenditure Polling	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MI District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Gary Peters		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 477248.39		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Benenson Strategy Group		Date of Public Distribution/Dissemination 10 / 21 / 2014	
Mailing Address 720 South Colorado Blvd Suite 500N		Amount 28000.00	
City Denver	State CO	Zip Code 80246-1975	Transaction ID : A28B287AB7ED64CD9B8C
Purpose of Expenditure Polling	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MI District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Gary Peters		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1292163.13		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee The Strategy Group, Inc		Date of Public Distribution/Dissemination 10 / 21 / 2014	
Mailing Address 1603 Orrington Ave Ste 1730		Amount 786914.74	
City Evanston	State IL	Zip Code 60201-5017	Transaction ID : A713B3F63351E4A129DC
Purpose of Expenditure Series of Mailers	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MI District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Gary Peters		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1292163.13		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	816414.74
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	816414.74