

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 DEFENDERS OF WILDLIFE ACTION FUND		3. FEC Identification Number C C00000000
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1130 17TH STREET NW		
(c) City, State and ZIP Code WASHINGTON DC 20036		
2. Corporate filers only Is the filer a qualified nonprofit corporation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Individual filers only 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 12-Day Report preceding the election
- | | | | |
|--|------------------|------------------|-------|
| | Type of Election | Date of Election | State |
| | | | |
- October Quarterly Report 30-Day Report following the General Election
- | | | |
|--|------------------|-------|
| | Date of Election | State |
| | | |
- (b) Is this Report an amendment? Yes No

5. COVERING PERIOD: FROM M M / D D / Y Y Y Y

THROUGH

M M / D D / Y Y Y Y

6. TOTAL CONTRIBUTIONS	200.00
7. TOTAL INDEPENDENT EXPENDITURES.....	370.00

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in consultation 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
Anne Saer	_____	10/25/2006

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 800-424-9630, Local 202-684-1100

20039251303

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
DEFENDERS OF WILDLIFE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee Names in the News	Date M M / D D / Y Y Y Y 10 / 24 / 2006
Mailing Address 1300 Clay Street	Amount 370.00
City State Zip Code Oakland CA 94612	

Purpose of Expenditure List rental	Category/ Type 006	Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 1 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Renzi		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(This area is intentionally left blank for itemized expenditures.)

(a) SUBTOTAL of itemized Independent Expenditures	370.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	370.00
(carry total from last page forward to Line 7)	

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**SCHEDULE 5-A
ITEMIZED RECEIPTS**

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF FILER (In Full)
DEFENDERS OF WILDLIFE ACTION FUND

A. Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address 235 24th Street			M M / D D / Y Y Y Y 10 / 23 / 2006
City	State	Zip Code	Transaction ID: F56.000001
Santa Monica	CA	90402	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			200.00
Name of Employer Kaos Entertainment		Occupation Arts and Entertainment	

SUBTOTAL of Receipts This Page (optional)	200.00
TOTAL This Period (last page carry total to Line 6)	200.00

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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input checked="" type="checkbox"/> Other (Specify): <i>WEB FORM</i>	Date of Receipt or Postmarked <i>10/25/06</i>

Sei
 PREPARER
 (3/2005)

10/26/06
 DATE PREPARED

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