Image# 11990188334 017/3/3/1/20/13| 23:49

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

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

To be used by Fersons (Other than Fontical Committees) including Qualified Nonprofit	1		
1. (a) Name of Individual, Organization or Corporation			
CAMPAIGN FOR COMMUNITY CHANGE			
(b) Address (number and street)			
(c) City, State and ZIP Code			
WASHINGTON DC 20009	FEC Identification Number		
	C C90012113		
2. Corporate filers only Is the filer a qualified nonprofit corporation? X Yes No			
Individual filers only Name of Employer	Occupation		
A TYPE OF REPORT (I. I. I			
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			
χ σαπαί y 31 Teal-End Heport			
(b) Is this Report an amendment? Yes \(\subseteq \text{No } \textbf{X} \)			
5. COVERING PERIOD: FROM M,			
THROUGH			
M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
6. TOTAL CONTRIBUTIONS	0.00		
7. TOTAL INDEPENDENT EXPENDITURES	118623.90		
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 regulation	the independent expenditures		
TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE	DATE		
Delicia Reynolds Hand	01/31/2011		
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

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FOR LINE 7 FOR FORM 5

AME OF FILER (In Full) CAMPAIGN FOR COMMUNITY CHANGE		
Full Name (Last, First, Middle Initial) of Payee Rudy Lopez		Date
Mailing Address 1536 U Street NW		M M / D D / Y Y Y Y Y Y Amount
City State Washington DC	Zip Code 20009	3719.00
Purpose of Expenditure GOTV Mailers managing canvass	Category/ Type	Office Sought: X House State: AZ House Senate District: 07
Name of Federal Candidate Supported or Opposed by Expenditur RAUL M GRIJALVA	re:	Check One: X Support Oppose
Calendar Year-To-Date Per Election for Office Sought	113447.90	Disbursement For: Primary X General Other (specify)
Full Name (Last, First, Middle Initial) of Payee Mission Control Inc		Date M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 114a Mansfield Hollow Road		Amount 107925.90
City State Mansfield Center CT	Zip Code 06250	
Purpose of Expenditure Candidate Mailers	Category/ Type	Office Sought: X House State: AZ House Senate District: 07
Name of Federal Candidate Supported or Opposed by Expenditure RAUL M GRIJALVA	re:	Check One: X Support Oppose
Calendar Year-To-Date Per Election for Office Sought	107925.90	Disbursement For: Primary X General 2010 Other (specify)
Full Name (Last, First, Middle Initial) of Payee OC Media		Date Date D D
Mailing Address 1107 Fair Oaks Ave 451		Amount 5000.00
City State South Pasadena CA	Zip Code 91030	3000.00
Purpose of Expenditure Radio Ad	Category/ Type	Office Sought: House State: NV Senate X Senate District:
Name of Federal Candidate Supported or Opposed by Expenditur SHARRON E ANGLE	re:	Check One: Support X Oppose
Calendar Year-To-Date Per Election for Office Sought	5000.00	Disbursement For: Primary X General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		116644.90
(b) SUBTOTALof Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

Full Name (Last, First, Middle Initial) of Payee					Date		
Jeffrey Parcher					м м	/ D D /	YYYY
Mailing Address					1,0	26	2010
1536 U Street NW					Amount		
City	State	Zip Code)				176.00
Washington	DC	20009					
Purpose of Expenditure		Category/		Offi	ce Sought:	House	State: NV
Support for Radio Ad		Туре		S	Senate	X Senate	
Name of Federal Candidate Supported or Opposed	by Expenditure:	!		İ		President	District:
SHARRON E ANGLE				Che	eck One:	Support	X Oppose
Colondon Very To Date Boy Florian				Disk	oursement For	Primary	X General
Calendar Year-To-Date Per Election for Office Sought		517	6.00	$ \Box c$	2010 Other (specify)		_
Full Name (Last, First, Middle Initial) of Payee				`	1		
Chris Torres					Date		
					м м 1 0	/ D D D	2010
Mailing Address 1536 U Street NW					Amount		
	State	Zin Code					1803.00
City Washington	DC	Zip Code 20009	;				
Purpose of Expenditure				Offi	L ce Sought:	V Hausa	A 7
GOTV Mailers		Category/ Type			louse	X House Senate	State: AZ
Name of Federal Candidate Supported or Opposed	hy Expenditure:			'	10056	President	District: 07
RAUL M GRIJALVA	oy Exponditoro.			 Che	eck One:	χ Support	Oppose
				Disk	oursement For		X General
Calendar Year-To-Date Per Election		10972	8.90	l	2010	Filliary	CA General
for Office Sought					Other (specify)		
(a) SUBTOTAL of Itemized Independent Expenditur	es						1979.00
(b) SUBTOTALof Unitemized Independent Expendi	ures						
						1	18623.90
(c) TOTAL Independent Expenditures (carry total from last page forward to Line						1	.5025.00
(Jan , total nom last page forward to Line	,						