

# 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 NARAL Pro-Choice America		3. FEC Identification Number <b>C</b> C90004185
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1156 15th Street, NW Suite 700		
(c) City, State and ZIP Code Washington DC 20005		
2. <b>Corporate filers only</b>	Is the filer a qualified nonprofit corporation? <input checked="" type="checkbox"/> Yes <input 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	4

 / 

D	D
2	8

 / 

Y	Y	Y	Y
2	0	1	0

THROUGH

M	M
0	4

 / 

D	D
2	8

 / 

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="11686.26"/>

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**

Kimberly Robinson

04/20/2010

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)

NARAL Pro-Choice America

Full Name (Last, First, Middle Initial) of Payee  
Adams, Hussey & Associates

Date

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Mailing Address  
1600 Wilson Blvd.  
Suite 300

Amount

439.84

City State Zip Code  
Arlington VA 22209

Purpose of Expenditure  
Email copy & production

Category/  
Type

Office Sought:  House State: MI  
 Senate District: 01  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Connie Saltonstall

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 50464.31

Disbursement For:  Primary  General  
2010  
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
Adams, Hussey & Associates

Date

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Mailing Address  
1600 Wilson Blvd.  
Suite 300

Amount

439.84

City State Zip Code  
Arlington VA 22209

Purpose of Expenditure  
Email copy & production

Category/  
Type

Office Sought:  House State: NJ  
 Senate District: 03  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
John Adler

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1947.71

Disbursement For:  Primary  General  
2010  
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
Adams, Hussey & Associates

Date

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Mailing Address  
1600 Wilson Blvd.  
Suite 300

Amount

439.84

City State Zip Code  
Arlington VA 22209

Purpose of Expenditure  
Email copy & production

Category/  
Type

Office Sought:  House State: MI  
 Senate District: 07  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Mark Schauer

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 12081.73

Disbursement For:  Primary  General  
2010  
 Other (specify)

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

1319.52

(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)

NARAL Pro-Choice America

Full Name (Last, First, Middle Initial) of Payee  
Adams, Hussey & Associates

Date

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Mailing Address  
1600 Wilson Blvd.  
Suite 300

Amount

439.84

City State Zip Code  
Arlington VA 22209

Purpose of Expenditure  
Email copy & production

Category/  
Type

Office Sought:  House State: CO  
 Senate  
 President District: 04

Name of Federal Candidate Supported or Opposed by Expenditure:  
Elizabeth Markey

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1947.71

Disbursement For:  Primary  General  
2010  
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
Adams, Hussey & Associates

Date

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Mailing Address  
1600 Wilson Blvd.  
Suite 300

Amount

439.84

City State Zip Code  
Arlington VA 22209

Purpose of Expenditure  
Email copy & production

Category/  
Type

Office Sought:  House State: CA  
 Senate District: 44  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Mary Bono Mack

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1947.71

Disbursement For:  Primary  General  
2010  
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
Adams, Hussey & Associates

Date

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Mailing Address  
1600 Wilson Blvd.  
Suite 300

Amount

439.84

City State Zip Code  
Arlington VA 22209

Purpose of Expenditure  
Email copy & production

Category/  
Type

Office Sought:  House State: CA  
 Senate District: 45  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Steve Pougnet

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1947.71

Disbursement For:  Primary  General  
2010  
 Other (specify)

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

1319.52

(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)

NARAL Pro-Choice America

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

Date

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Mailing Address  
1840 41st Street Ave 102-333

Amount

12.50

City State Zip Code  
Capitola CA 91560

Purpose of Expenditure  
Proofreading

Category/  
Type

Office Sought:  House State: MI  
 Senate District: 01  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Connie Saltonstall

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 50464.31

Disbursement For:  Primary  General  
2010  
 Other (specify)

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

Date

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Mailing Address  
1840 41st Street Ave 102-333

Amount

12.50

City State Zip Code  
Capitola CA 91560

Purpose of Expenditure  
Proofreading

Category/  
Type

Office Sought:  House State: NJ  
 Senate District: 03  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
John Adler

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1947.71

Disbursement For:  Primary  General  
2010  
 Other (specify)

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

Date

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Mailing Address  
1840 41st Street Ave 102-333

Amount

12.50

City State Zip Code  
Capitola CA 91560

Purpose of Expenditure  
Proofreading

Category/  
Type

Office Sought:  House State: MI  
 Senate District: 07  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Mark Schauer

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 12081.73

Disbursement For:  Primary  General  
2010  
 Other (specify)

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

37.50

(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)

NARAL Pro-Choice America

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

Date

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Mailing Address  
1840 41st Street Ave 102-333

Amount

12.50

City State Zip Code  
Capitola CA 91560

Purpose of Expenditure  
Proofreading

Category/  
Type

Office Sought:  House State: CO  
 Senate  
 President District: 04

Name of Federal Candidate Supported or Opposed by Expenditure:  
Elizabeth Markey

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1947.71

Disbursement For:  Primary  General  
 Other (specify)

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

Date

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Mailing Address  
1840 41st Street Ave 102-333

Amount

12.50

City State Zip Code  
Capitola CA 91560

Purpose of Expenditure  
Proofreading

Category/  
Type

Office Sought:  House State: CA  
 Senate District: 45  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Steve Pougnet

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1947.71

Disbursement For:  Primary  General  
 Other (specify)

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

Date

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Mailing Address  
1840 41st Street Ave 102-333

Amount

12.50

City State Zip Code  
Capitola CA 91560

Purpose of Expenditure  
Proofreading

Category/  
Type

Office Sought:  House State: CA  
 Senate District: 44  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Mary Bono Mack

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1947.71

Disbursement For:  Primary  General  
 Other (specify)

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

37.50

(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)

NARAL Pro-Choice America

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

Date

/  /

Mailing Address  
8000 Villa Park Drive

Amount

City State Zip Code  
Richmond VA 23228

Purpose of Expenditure  
Printing

Category/  
Type

Office Sought:  House State: MI  
 Senate District: 01  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Connie Saltonstall

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought

Disbursement For:  Primary  General  
 Other (specify) \_\_\_\_\_

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

Date

/  /

Mailing Address  
8000 Villa Park Drive

Amount

City State Zip Code  
Richmond VA 23228

Purpose of Expenditure  
Printing

Category/  
Type

Office Sought:  House State: NJ  
 Senate District: 03  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
John Adler

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought

Disbursement For:  Primary  General  
 Other (specify) \_\_\_\_\_

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

Date

/  /

Mailing Address  
8000 Villa Park Drive

Amount

City State Zip Code  
Richmond VA 23228

Purpose of Expenditure  
Printing

Category/  
Type

Office Sought:  House State: MI  
 Senate District: 07  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Mark Schauer

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought

Disbursement For:  Primary  General  
 Other (specify) \_\_\_\_\_

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

(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)

NARAL Pro-Choice America

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

Date

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Mailing Address  
8000 Villa Park Drive

Amount

161.70

City State Zip Code  
Richmond VA 23228

Purpose of Expenditure  
Printing

Category/  
Type

Office Sought:  House State: CO  
 Senate  
 President District: 04

Name of Federal Candidate Supported or Opposed by Expenditure:  
Elizabeth Markey

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1947.71

Disbursement For:  Primary  General  
 Other (specify)

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

Date

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Mailing Address  
8000 Villa Park Drive

Amount

161.70

City State Zip Code  
Richmond VA 23228

Purpose of Expenditure  
Printing

Category/  
Type

Office Sought:  House State: CA  
 Senate District: 45  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Steve Pougnet

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1947.71

Disbursement For:  Primary  General  
 Other (specify)

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

Date

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Mailing Address  
8000 Villa Park Drive

Amount

161.70

City State Zip Code  
Richmond VA 23228

Purpose of Expenditure  
Printing

Category/  
Type

Office Sought:  House State: CA  
 Senate District: 44  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Mary Bono Mack

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1947.71

Disbursement For:  Primary  General  
 Other (specify)

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

485.10

(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)

NARAL Pro-Choice America

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

Date

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Mailing Address  
2533 Yellow Springs Rd

Amount

39.42

City State Zip Code  
Malvern PA 19355

Purpose of Expenditure  
Printing

Category/  
Type

Office Sought:  House State: MI  
 Senate District: 01  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Connie Saltonstall

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 50464.31

Disbursement For: 2010  Primary  General  
 Other (specify)

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

Date

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Mailing Address  
2533 Yellow Springs Rd

Amount

39.42

City State Zip Code  
Malvern PA 19355

Purpose of Expenditure  
Printing

Category/  
Type

Office Sought:  House State: NJ  
 Senate District: 03  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
John Adler

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1947.71

Disbursement For: 2010  Primary  General  
 Other (specify)

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

Date

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Mailing Address  
2533 Yellow Springs Rd

Amount

39.42

City State Zip Code  
Malvern PA 19355

Purpose of Expenditure  
Printing

Category/  
Type

Office Sought:  House State: MI  
 Senate District: 07  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Mark Schauer

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 12081.73

Disbursement For: 2010  Primary  General  
 Other (specify)

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

118.26

(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)

NARAL Pro-Choice America

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

Date

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Mailing Address  
2533 Yellow Springs Rd

Amount

39.42

City State Zip Code  
Malvern PA 19355

Purpose of Expenditure  
Printing

Category/  
Type

Office Sought:  House State: CO  
 Senate  
 President District: 04

Name of Federal Candidate Supported or Opposed by Expenditure:  
Elizabeth Markey

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1947.71

Disbursement For:  Primary  General  
 Other (specify)

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

Date

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Mailing Address  
2533 Yellow Springs Rd

Amount

39.42

City State Zip Code  
Malvern PA 19355

Purpose of Expenditure  
Printing

Category/  
Type

Office Sought:  House State: CA  
 Senate District: 45  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Steve Pougnet

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1947.71

Disbursement For:  Primary  General  
 Other (specify)

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

Date

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Mailing Address  
2533 Yellow Springs Rd

Amount

39.42

City State Zip Code  
Malvern PA 19355

Purpose of Expenditure  
Printing

Category/  
Type

Office Sought:  House State: CA  
 Senate District: 44  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Mary Bono Mack

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1947.71

Disbursement For:  Primary  General  
 Other (specify)

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

118.26

(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)

NARAL Pro-Choice America

Full Name (Last, First, Middle Initial) of Payee  
Direct Impressions

Date

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Mailing Address  
1355 Miramar Street

Amount

124.68

City State Zip Code  
Cape Coral FL 33904

Purpose of Expenditure  
Printing

Category/  
Type

Office Sought:  House State: MI  
 Senate District: 01  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Connie Saltonstall

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 50464.31

Disbursement For:  Primary  General  
2010  
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
Direct Impressions

Date

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Mailing Address  
1355 Miramar Street

Amount

124.68

City State Zip Code  
Cape Coral FL 33904

Purpose of Expenditure  
Printing

Category/  
Type

Office Sought:  House State: NJ  
 Senate District: 03  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
John Adler

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1947.71

Disbursement For:  Primary  General  
2010  
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
Direct Impressions

Date

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Mailing Address  
1355 Miramar Street

Amount

124.68

City State Zip Code  
Cape Coral FL 33904

Purpose of Expenditure  
Printing

Category/  
Type

Office Sought:  House State: MI  
 Senate District: 07  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Mark Schauer

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 12081.73

Disbursement For:  Primary  General  
2010  
 Other (specify)

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

374.04

(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)

NARAL Pro-Choice America

Full Name (Last, First, Middle Initial) of Payee  
Direct Impressions

Date

/   /

Mailing Address  
1355 Miramar Street

Amount

City State Zip Code  
Cape Coral FL 33904

Purpose of Expenditure  
Printing

Category/  
Type

Office Sought:  House State: CO  
 Senate  
 President District: 04

Name of Federal Candidate Supported or Opposed by Expenditure:  
Elizabeth Markey

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought

Disbursement For:  Primary  General  
 Other (specify) \_\_\_\_\_

Full Name (Last, First, Middle Initial) of Payee  
Direct Impressions

Date

/   /

Mailing Address  
1355 Miramar Street

Amount

City State Zip Code  
Cape Coral FL 33904

Purpose of Expenditure  
Printing

Category/  
Type

Office Sought:  House State: CA  
 Senate District: 45  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Steve Pougnet

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought

Disbursement For:  Primary  General  
 Other (specify) \_\_\_\_\_

Full Name (Last, First, Middle Initial) of Payee  
Direct Impressions

Date

/   /

Mailing Address  
1355 Miramar Street

Amount

City State Zip Code  
Cape Coral FL 33904

Purpose of Expenditure  
Printing

Category/  
Type

Office Sought:  House State: CA  
 Senate District: 44  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Mary Bono Mack

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought

Disbursement For:  Primary  General  
 Other (specify) \_\_\_\_\_

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

(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)

NARAL Pro-Choice America

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

Date

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Mailing Address  
8245-C Backlick Road

Amount

136.07

City State Zip Code  
Lorton VA 22079

Purpose of Expenditure  
Printing

Category/  
Type

Office Sought:  House State: MI  
 Senate District: 01  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Connie Saltonstall

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 50464.31

Disbursement For:  Primary  General  
2010  
 Other (specify)

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

Date

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Mailing Address  
8245-C Backlick Road

Amount

136.07

City State Zip Code  
Lorton VA 22079

Purpose of Expenditure  
Printing

Category/  
Type

Office Sought:  House State: NJ  
 Senate District: 03  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
John Adler

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1947.71

Disbursement For:  Primary  General  
2010  
 Other (specify)

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

Date

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Mailing Address  
8245-C Backlick Road

Amount

136.07

City State Zip Code  
Lorton VA 22079

Purpose of Expenditure  
Printing

Category/  
Type

Office Sought:  House State: MI  
 Senate District: 07  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Mark Schauer

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 12081.73

Disbursement For:  Primary  General  
2010  
 Other (specify)

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

408.21

(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)

NARAL Pro-Choice America

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

Date

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Mailing Address  
8245-C Backlick Road

Amount

136.07

City State Zip Code  
Lorton VA 22079

Purpose of Expenditure  
Printing

Category/  
Type

Office Sought:  House State: CO  
 Senate  
 President District: 04

Name of Federal Candidate Supported or Opposed by Expenditure:  
Elizabeth Markey

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1947.71

Disbursement For:  Primary  General  
 Other (specify)

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

Date

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Mailing Address  
8245-C Backlick Road

Amount

136.07

City State Zip Code  
Lorton VA 22079

Purpose of Expenditure  
Printing

Category/  
Type

Office Sought:  House State: CA  
 Senate District: 45  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Steve Pougnet

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1947.71

Disbursement For:  Primary  General  
 Other (specify)

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

Date

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Mailing Address  
8245-C Backlick Road

Amount

136.07

City State Zip Code  
Lorton VA 22079

Purpose of Expenditure  
Printing

Category/  
Type

Office Sought:  House State: CA  
 Senate District: 44  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Mary Bono Mack

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1947.71

Disbursement For:  Primary  General  
 Other (specify)

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

408.21

(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)

NARAL Pro-Choice America

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

Date

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Mailing Address  
8341 Beechcraft Avenue

Amount

1033.50

City State Zip Code  
Gaithersburg MD 20879

Purpose of Expenditure  
Mailshop services

Category/  
Type

Office Sought:  House State: MI  
 Senate District: 01  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Connie Saltonstall

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 50464.31

Disbursement For:  Primary  General  
2010  
 Other (specify)

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

Date

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Mailing Address  
8341 Beechcraft Avenue

Amount

1033.50

City State Zip Code  
Gaithersburg MD 20879

Purpose of Expenditure  
Mailshop services

Category/  
Type

Office Sought:  House State: NJ  
 Senate District: 03  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
John Adler

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1947.71

Disbursement For:  Primary  General  
2010  
 Other (specify)

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

Date

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Mailing Address  
8341 Beechcraft Avenue

Amount

1033.50

City State Zip Code  
Gaithersburg MD 20879

Purpose of Expenditure  
Mailshop services

Category/  
Type

Office Sought:  House State: MI  
 Senate District: 07  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Mark Schauer

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 12081.73

Disbursement For:  Primary  General  
2010  
 Other (specify)

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

3100.50

(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)

NARAL Pro-Choice America

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

Date

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Mailing Address  
8341 Beechcraft Avenue

Amount

1033.50

City State Zip Code  
Gaithersburg MD 20879

Purpose of Expenditure  
Mailshop services

Category/  
Type

Office Sought:  House State: CO  
 Senate District: 04  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Elizabeth Markey

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1947.71

Disbursement For:  Primary  General  
2010  
 Other (specify)

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

Date

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Mailing Address  
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Amount

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City State Zip Code  
Gaithersburg MD 20879

Purpose of Expenditure  
Mailshop services

Category/  
Type

Office Sought:  House State: CA  
 Senate District: 45  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Steve Pougnet

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1947.71

Disbursement For:  Primary  General  
2010  
 Other (specify)

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

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Amount

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City State Zip Code  
Gaithersburg MD 20879

Purpose of Expenditure  
Mailshop services

Category/  
Type

Office Sought:  House State: CA  
 Senate District: 44  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Mary Bono Mack

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1947.71

Disbursement For:  Primary  General  
2010  
 Other (specify)

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

3100.50

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

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

11686.26