07/14/2014 11:05

#### FEC FORM 5

#### REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

(a) Name of Individual, Organization or Corporation     The 60 Plus Association, Inc.		
(b) Address (number and street) check if different than previous 515 King Street Suite 315	ously reported	
(c) City, State and ZIP Code		
Alexandria	VA 22314	3. FEC Identification Number
, novalidità	22014	0 00004005
2. Occupation and Name of Employer (for Individual Filers Only)		C C90011685
4. TYPE OF REPORT (check appropriate boxes):  (a) April 15 Quarterly Report  X July 15 Quarterly Report  October 15 Quarterly Report  January 31 Year-End Report  b) Is this Report an amendment? X No Y  5. COVERING PERIOD:  FROM  THROUGH  Of  THROUGH	24-Hour Report  48-Hour Report  es, it amends the report filed on  7 2014	
6. TOTAL CONTRIBUTIONS		0.00
7. TOTAL INDEPENDENT EXPENDITURES		265402.62
Under penalty of perjury I certify that the independent expenditures reported herein v of, any candidate or authorized committee or agent of either, or any political party		or concert with, or at the request or suggestion
TYPE OR PRINT NAME OF PERSON COMPLETING FORM	_	DATE ctronically Filed]
Amy Frederick	Amy Frederick	07/14/2014
NOTE: Cubminster of false arrange in the control of	av subject the manner similar to the second	
NOTE: Submission of false, erroneous or incomplete information m	ay subject trie person signing this report to	uie penailies oi z 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

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#### SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 2 OF 5 FOR LINE 7 OF FORM 5

NAME OF FILER (In Full) The 60 Plus Association, Inc. Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination Advantage Direct c/o Advantage Inc. 05 02 2014 Mailing Address 2300 Clarendon Boulevard Amount Suite 303 Zip Code City State 590.08 Arlington VA 22201 Transaction ID: F57.4428 NC Purpose of Expenditure Office Sought: ★ House Category/ State: 004 Telephone Voter Contact Type Senate 02 District: President Name of Federal Candidate Supported or Opposed by Expenditure: RENEE JACISIN ELLMERS X Support Check One: Oppose Disbursement For: Primary 2014 General Calendar Year-To-Date Per Election 590.08 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination Advantage Direct c/o Advantage Inc. 05 80 2014 Mailing Address 2300 Clarendon Boulevard Suite 303 Amount City State Zip Code 1434.41 Arlington VA22201 Transaction ID: F57.4407 NE Purpose of Expenditure Office Sought: House Category/ State: 004 Telephone Voter Contact Type Senate 00 District: President Name of Federal Candidate Supported or Opposed by Expenditure: BENJAMIN E SASSE Check One: X Support Oppose Disbursement For: Primary General Calendar Year-To-Date Per Election 251727.44 2014 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination Advantage Direct c/o Advantage Inc. 2014 05 12 Mailing Address 2300 Clarendon Boulevard Amount Suite 303 State Zip Code City 1411.06 VA22201 Arlington Transaction ID: F57.4436 Purpose of Expenditure NE Office Sought: House Category/ State: 004 Telephone Voter Contact Type Senate 00 District: President Name of Federal Candidate Supported or Opposed by Expenditure: BENJAMIN E SASSE Check One: X Support Oppose Disbursement For: Primary 2014 General Calendar Year-To-Date Per Election 253528.50 for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures...... 3435.55 (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

PAGE 3 OF 5 FOR LINE 7 OF FORM 5

AME OF FILER (In Full)	
The 60 Plus Association, Inc.	
TE U.A // Eliza Addella Initialia of Dayon	
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination
Advantage Direct c/o Advantage Inc.	05 / 21 / 2014
Mailing Address 2300 Clarendon Boulevard	
Suite 303	Amount
City State Zi	Zip Code 537.43
Arlington VA 2	22201 Transaction ID : F57.4420
	regory/ Office Sought: House State:
	Type 004 Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President District:
RALPH MOODY HALL	Check One: Support Oppos
	Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought	537 43 2014
IOI Office Sought	Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination
Advantage Direct c/o Advantage Inc.	M M / D D / Y Y Y
Mailing Address 2300 Clarendon Boulevard	05 30 2014
Suite 303	Amount
	Zin Code
	22201
5 (5 11)	Transaction ID : F37.4416
	regory/ Type  Office Sought: House State:  Senate
Name of Federal Candidate Supported or Opposed by Expenditure:	President District:
THAD COCHRAN	Check One: Support Oppos
Calendar Year-To-Date Per Election	Disbursement For: Primary General 2014
for Office Sought	Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination
Advantage Direct c/o Advantage Inc.	M = M / D = D / Y = Y = Y
Mailing Address 2200 Clarenden Roulevard	06 09 2014
2300 Clarendon Boulevard	Amount
Suite 303 City State Zi	Zip Code
,	246.61
D (5 11)	Transaction ID : F57.4438
	tegory/ O04 Office Sought: House State:
, ,	Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure: NIGER INNIS	President
WOLKER	Check One: Support Oppos
Calendar Year-To-Date Per Election	Disbursement For: Primary General 2014
for Office Sought	246.61 2014 2014 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	11284.04
(b) SUBTOTAL of Unitemized Independent Expenditures	
(4)	
(c) TOTAL Independent Expenditures	
(carry total from last page forward to Line 7)	

# SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 4 OF 5 FOR LINE 7 OF FORM 5

AME OF FILER (In Full) The 60 Plus Association, Inc.			
Full Name (Last, First, Middle Initial) of Payee			Date of Public Distribution/Dissemination
Mentzer Media Services Inc.			M - M / D - D / Y - Y - Y - Y
Mailing Address 600 Fairmount Ave			05 03 2014
Suite 306			Amount
Towson	State MD	Zip Code 21286	141281.55 Transaction ID : F57.4424
Purpose of Expenditure TV Advertisement 'Dishonorable'		Category/ Type	Office Sought: House State: NE Senate District: 00
Name of Federal Candidate Supported or Oppo SHANE OSBORN	osed by Expend	liture:	President  Check One:  Support  Oppose
Calendar Year-To-Date Per Election for Office Sought		142376.55	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee			Date of Public Distribution/Dissemination
Mentzer Media Services Inc.			05 08 2014
Mailing Address 600 Fairmount Ave			
Suite 306	Ctoto	7in Code	Amount
City	State MD	Zip Code 21286	102021.48
Purpose of Expenditure	IVID		Transaction ID : F57.4397  Office Sought: House State: NE
TV Advertisement		Category/ Type 004	Senate State:00
Name of Federal Candidate Supported or Oppo SID DINSDALE	osed by Expend	liture:	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought		244398.03	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee			Date of Public Distribution/Dissemination
Mailing Address 600 Fairmount Ave			05 08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
600 Fairmount Ave Suite 306			Amount
City	State	Zip Code	5005.00
Towson	MD	21286	5895.00 Transaction ID : F57.4405
Purpose of Expenditure		Category/ 004	Office Sought: House State: NE
Radio Advertisement  Name of Federal Candidate Supported or Opported	nsed by Evnend	Туре	Senate District: 00 President
SID DINSDALE	used by Expend	inture.	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought		250293.03	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expend	ditures		249198.03
(b) SUBTOTAL of Unitemized Independent Expo	enditures		····· <b>&gt;</b>
(c) TOTAL Independent Expenditures(carry total from last page forward to L			····· <b>&gt;</b>

# SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 5 OF 5 FOR LINE 7 OF FORM 5

IAME OF FILER (In Full)	
The 60 Plus Association, Inc.	
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination
PR Newswire	05 01 2014
Mailing Address 350 Hudson Street	
Suite 300	Amount
City State Zip Code	390.00
New York NY 10014	Transaction ID : F57.4431
Purpose of Expenditure Press Release Endorsement  Category/ Type  004	Office Sought: House State: NE  Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: BENJAMIN E SASSE	President  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	Date of Public Distribution/Dissemination
PR Newswire	Date of Public Distribution/Dissernmation
Mailing Address	05 02 2014
330 Hudson Street	Amount
Suite 300	Amount
City State Zip Code	705.00
New York NY 10014	Transaction ID : F57.4426
Purpose of Expenditure Press Release 'Dishonorable'  Category/ Type  004	Office Sought: House State: NE Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: SHANE OSBORN	President  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	Date of Public Distribution/Dissemination
PR Newswire	M = M / D = D / Y = Y = Y
Mailing Address 350 Hudson Street	05 08 2014
Suite 300	Amount
City State Zip Code	
New York NY 10014	390.00
D (5 %)	Transaction ID : F57.4411
Purpose of Expenditure Press Release Advertisement 'Debt'  Category/ Type  004	Office Sought: House State: NE Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: SID DINSDALE	President  Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 252117.44	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	1485.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	265402.62