

# 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 Working America		3. FEC Identification Number <b>C</b> C90011156
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 815 16th St NW		
(c) City, State and ZIP Code Washington DC 20006		
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	9

 / 

D	D
1	0

 / 

Y	Y	Y	Y
2	0	1	0

THROUGH

M	M
0	9

 / 

D	D
1	0

 / 

Y	Y	Y	Y
2	0	1	0

6. TOTAL CONTRIBUTIONS ..... 

0.00
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7. TOTAL INDEPENDENT EXPENDITURES..... 

876.80
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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
Michael Lausch		09/14/2010

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

Image# 10931258399  
**SCHEDULE 5-E**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
 Working America

Full Name (Last, First, Middle Initial) of Payee  
 Lesley Bell

Mailing Address  
 4805 Burton Ave SE

City State Zip Code  
 Albuquerque NM 87108

Date  
 MM / DD / YYYY  
 09 / 10 / 2010

Amount  
 62.83

Purpose of Expenditure  
 Salary and benefits

Category/Type

Name of Federal Candidate Supported or Opposed by Expenditure:  
 MARTIN HEINRICH

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

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
 376.98

Disbursement For: 2010  
 Primary  General  
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
 Elizabeth Bennett

Mailing Address  
 122 Stanford Dr SE

City State Zip Code  
 Albuquerque NM 87106

Date  
 MM / DD / YYYY  
 09 / 10 / 2010

Amount  
 62.83

Purpose of Expenditure  
 Salary and benefits

Category/Type

Name of Federal Candidate Supported or Opposed by Expenditure:  
 MARTIN HEINRICH

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

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
 314.15

Disbursement For: 2010  
 Primary  General  
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
 Karla Castaneda

Mailing Address  
 7509 Dixon Rd SE

City State Zip Code  
 Albuquerque NM 87108

Date  
 MM / DD / YYYY  
 09 / 10 / 2010

Amount  
 62.83

Purpose of Expenditure  
 Salary and benefits

Category/Type

Name of Federal Candidate Supported or Opposed by Expenditure:  
 MARTIN HEINRICH

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

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
 376.98

Disbursement For: 2010  
 Primary  General  
 Other (specify)

(a) **SUBTOTAL** of Itemized Independent Expenditures ..... 188.49

(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)

Working America

Full Name (Last, First, Middle Initial) of Payee  
Thomas Cruz

Date

M M / D D / Y Y Y Y  
09 / 10 / 2010

Mailing Address  
3208 Corona Dr NW

Amount

62.83

City State Zip Code  
Albuquerque NM 87120

Purpose of Expenditure  
Salary and benefits

Category/  
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:  
MARTIN HEINRICH

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 376.98

Disbursement For:  Primary  General  
2010  
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
Vivian Doak

Date

M M / D D / Y Y Y Y  
09 / 10 / 2010

Mailing Address  
515 Shirk Lane SW

Amount

62.83

City State Zip Code  
Albuquerque NM 87105

Purpose of Expenditure  
Salary and benefits

Category/  
Type

Office Sought:  House State: \_\_\_\_\_  
 Senate District: 01  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
MARTIN HEINRICH

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 125.66

Disbursement For:  Primary  General  
2010  
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
Carolyn Guenther

Date

M M / D D / Y Y Y Y  
09 / 10 / 2010

Mailing Address  
8700 2nd St NW Space 4

Amount

62.83

City State Zip Code  
Albuquerque NM 87114

Purpose of Expenditure  
Salary and benefits

Category/  
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:  
MARTIN HEINRICH

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 376.98

Disbursement For:  Primary  General  
2010  
 Other (specify)

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

188.49

(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)

Working America

Full Name (Last, First, Middle Initial) of Payee  
Deliria Jaramillo

Date

M M / D D / Y Y Y Y  
09 / 10 / 2010

Mailing Address  
9000 Trumbull St SE Apt. 26

Amount

88.26

City State Zip Code  
Albuquerque NM 87123

Purpose of Expenditure  
Salary and benefits

Category/  
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:  
MARTIN HEINRICH

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 441.30

Disbursement For:  Primary  General  
2010  
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
Shannon Laliberte Parks

Date

M M / D D / Y Y Y Y  
09 / 10 / 2010

Mailing Address  
328 Jefferson SE Apt. A

Amount

88.26

City State Zip Code  
Albuquerque NM 87108

Purpose of Expenditure  
Salary and benefits

Category/  
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:  
MARTIN HEINRICH

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 529.56

Disbursement For:  Primary  General  
2010  
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
James Mathews

Date

M M / D D / Y Y Y Y  
09 / 10 / 2010

Mailing Address  
6712 Tierra Dr NW

Amount

62.83

City State Zip Code  
Albuquerque NM 87107

Purpose of Expenditure  
Salary and benefits

Category/  
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:  
MARTIN HEINRICH

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 376.98

Disbursement For:  Primary  General  
2010  
 Other (specify)

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

239.35

(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)

Working America

Full Name (Last, First, Middle Initial) of Payee  
Cassandra Payan

Date

M M / D D / Y Y Y Y  
09 / 10 / 2010

Mailing Address  
1028 Pampas PI SE

Amount

109.09

City State Zip Code  
Albuquerque NM 87108

Purpose of Expenditure  
Salary and benefits

Category/  
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:  
MARTIN HEINRICH

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 654.54

Disbursement For:  Primary  General  
2010  
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
Frank Powell

Date

M M / D D / Y Y Y Y  
09 / 10 / 2010

Mailing Address  
516 Alvarado Dr SE

Amount

62.83

City State Zip Code  
Albuquerque NM 87108

Purpose of Expenditure  
Salary and benefits

Category/  
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:  
MARTIN HEINRICH

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 376.98

Disbursement For:  Primary  General  
2010  
 Other (specify)

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

Date

M M / D D / Y Y Y Y  
09 / 10 / 2010

Mailing Address  
3400 University Blvd SE Suite T

Amount

28.85

City State Zip Code  
Albuquerque NM 87106

Purpose of Expenditure  
Car rental

Category/  
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:  
MARTIN HEINRICH

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 737.25

Disbursement For:  Primary  General  
2010  
 Other (specify)

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

200.77

(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)

Working America

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

Date

M M / D D / Y Y Y Y  
0 9 / 1 0 / 2 0 1 0

Mailing Address  
3400 University Blvd SE Suite T

Amount

29.85

City State Zip Code  
Albuquerque NM 87106

Purpose of Expenditure  
Car rental

Category/  
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:  
MARTIN HEINRICH

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 767.10

Disbursement For:  Primary  General  
2010  
 Other (specify)

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

Date

M M / D D / Y Y Y Y  
0 9 / 1 0 / 2 0 1 0

Mailing Address  
3400 University Blvd SE Suite T

Amount

29.85

City State Zip Code  
Albuquerque NM 87106

Purpose of Expenditure  
Car rental

Category/  
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:  
MARTIN HEINRICH

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 796.95

Disbursement For:  Primary  General  
2010  
 Other (specify)

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

59.70

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

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

876.80