12/27/2022 20 : 17

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## 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     CASE Action Fund   |  |  |
|--|--|--|
| (b) Address (number and street) check if different than previously r<br>1038 S. 7th Ave<br>Ste. 202  | eported  |  |
| (c) City, State and ZIP Code  Phoenix  AZ  2. Occupation and Name of Employer (for Individual Filers Only)   | 85024  | 3. FEC Identification Number  C C90016627        |
| 2. Coodpation and Name of Employer (for marviadar rileto Grity)  |  |  |
| October 15 Quarterly Report  January 31 Year-End Report  b) Is this Report an amendment? No X Yes, it a  5. COVERING PERIOD:  FROM 09 / 01  THROUGH 09 / 04                              | Hour Report  Hour Report  mends the report filed on 1.2020 |  |
| TOTAL CONTRIBUTIONS      TOTAL INDEPENDENT EXPENDITURES  |  | 0.00   |
| Under penalty of perjury I certify that the independent expenditures reported herein were no of, any candidate or authorized committee or agent of either, or any political party commit |  | or concert with, or at the request or suggestion |
| TYPE OR PRINT NAME OF PERSON COMPLETING FORM   |  | DATE ctronically Filed]                          |
| Walsh, Brendan, , ,  | Walsh, Brendan, , ,  | 12/27/2022                                       |
| NOTE: Submission of false, erroneous or incomplete information may subj  | ect 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-A ITEMIZED RECEIPTS

| PAGE | 2 | OF  | 2 |
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| l  |   |  |
|--|---|--|
| Any information copied from such Reports a   | nd Statements may not be sold or used by any pent the name and address of any political committee | erson for the purpose of soliciting contributions                            |
| NAME OF FILER (In Full)  | g the matter and address of any political committee   | to solicit contributions non such committee.                                 |
| CASE Action Fund   |   |  |
| A. Full Name (Last, First, Middle Initial)   |   |  |
| America Votes Action Fund  |   | Date of Receipt  |
| Mailing Address 1155 Connecticut Ave NV  | ·   | M M / D D / Y Y Y Y Y Y  |
| Ste 600<br>City  | State Zip Code  | 09 01 2020<br>Transaction ID : VVN819R4DV3                                   |
| Washington   | DC 20036-4324   | Amount of Each Receipt this Period   |
| FEC ID number of contributing  | C   | 25000.00   |
| federal political committee.   | ~   | 23000.00   |
| Name of Employer   | Occupatio   | n  |
| B. Full Name (Last, First, Middle Initial)   |   |  |
| Mailing Address  |   | Date of Receipt  |
|  |   | M = M / D = D / Y = Y = Y  |
| City   | State Zip Code  | Amount of E. I. D. Living T. L.  |
| FEC ID number of contributing  |   | Amount of Each Receipt this Period   |
| federal political committee.   | C   | T T T T T T T T T T T T T T T T T T T  |
| Name of Employer   | Occupation  | n .  |
|  |   |  |
| C. Full Name (Last, First, Middle Initial)   |   | Date of Possint  |
| Mailing Address  |   | Date of Receipt  |
|  |   |  |
| City   | D   |  |
| Опу  | State Zip Code  | Amount of Each Paradat III. B. 1.1   |
|  |   | Amount of Each Receipt this Period   |
| FEC ID number of contributing federal political committee.   | State Zip Code  | Amount of Each Receipt this Period   |
| FEC ID number of contributing  | C   |  |
| FEC ID number of contributing federal political committee.  Name of Employer   | C   |  |
| FEC ID number of contributing federal political committee.  Name of Employer  D. Full Name (Last, First, Middle Initial)   | C   |  |
| FEC ID number of contributing federal political committee.  Name of Employer   | C   | n  |
| FEC ID number of contributing federal political committee.  Name of Employer  D. Full Name (Last, First, Middle Initial)   | C   | Date of Receipt  |
| FEC ID number of contributing federal political committee.  Name of Employer  D. Full Name (Last, First, Middle Initial)  Mailing Address  City  | Coccupation   | Date of Receipt  |
| FEC ID number of contributing federal political committee.  Name of Employer  D. Full Name (Last, First, Middle Initial)  Mailing Address  | Coccupation   | Date of Receipt  |
| FEC ID number of contributing federal political committee.  Name of Employer  D. Full Name (Last, First, Middle Initial)  Mailing Address  City  FEC ID number of contributing   | C Occupation  State Zip Code  | Date of Receipt  M M M / D D / Y Y Y Y Y  Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee.  Name of Employer  D. Full Name (Last, First, Middle Initial)  Mailing Address  City  FEC ID number of contributing federal political committee.  Name of Employer  | C Occupation  State Zip Code  C Occupation  | Date of Receipt  Amount of Each Receipt this Period                          |
| FEC ID number of contributing federal political committee.  Name of Employer  D. Full Name (Last, First, Middle Initial)  Mailing Address  City  FEC ID number of contributing federal political committee.  Name of Employer  SUBTOTAL of Receipts This Page (optional) | C Occupation  State Zip Code  | Date of Receipt  M M M / D D / Y Y Y Y  Amount of Each Receipt this Period   |