Image# 10931294431 097/49#20/10 18:16

## **FEC FORM 5**

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

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

(a) Name of Individual, Organizatio	n or Corporation	, moraumig quamiou	Tronpront o	o. po. u.iono
AMERICANS FOR JOB SECU				
AWIENICANS FOR JOB SECO	NII I			
(b) Address (number and street) AMERICANS FOR JOB SECU	check if different than prev	iously reported		
107 SOUTH WEST STREET F	MB 551			
(c) City, State and ZIP Code				
ALEXANDRIA	VA	22314		3. FEC Identification Number
2. Corporate filers only	C C90011669		C C90011669	
Is the	filer a qualified nonprofit corpora	ation?	☑ No	
Individual filers only Name	of Caralana			Occupation
Name	of Employer			occupation
4. TYPE OF REPORT (ch	eck appropriate boxes):			
(a) April 15 Quarter	y Report	24-Hour Notice		Notice
☐ July 15 Quarterly	/ Report			
October Quarter	v Report			
☐ January 31 Year-	End Report			
(b) Is this Report an am	endment? Yes No X			
5. COVERING PERIOD:	FROM 0 9 / D D 1 6	Y Y Y Y Y Y 2 0 1 0		
	THROU	GH		
	0 9 / 1 7	2010		
6. TOTAL CONTRIBUTIO	NS			.00
7. TOTAL INDEPENDENT	EXPENDITURES			1746719.93
Under penalty of perjury, I certify that the indeper	ndent expenditures reported herein were	not made with the cooperation or	prior consent of, or i	n constitution with, or at the
request or suggestion of, a candidate or a candi- reported herein were made by a corporation, I ce	date's agent or authorized committee or a	a political party committee or its a	gent. In addition, if t	he independent expenditures
TYPE OR PRINT NAME OF PERSO	N COMPLETING FORM	SIGNATURE		DATE
Stephen DeMaura				09/18/2010
	erroneous or incomplete information	on may subject the person sign	aning this report t	o the penalties of 2 LLS C 437a
NOTE. Submission of false,	on one of mooniplete information	on may subject the person sig	gining tino report t	0 110 policinos di 2 0.0.0 40/g.

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

ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

AMERICANS FOR JOB SECURITY

Full Name (Last, First, Middle Initial) of Payee		Date
McCarthy Marcus Hennings, LTD		M M / D D / Y Y Y Y Y Y 1 1 6 2 0 1 0
Mailing Address 1850 M St. NW		Mount 16 2010
Suite 235 City State	e Zip Code	18486.43
Washington DC	20036	
Purpose of Expenditure	Category/	Office Sought: X House State: NY
TV Media Production	Type	House Senate District: 24
Name of Federal Candidate Supported or Opposed by Expen- Michael Arcuri	diture:	President  Check One: Support X Oppose
Calendar Year-To-Date Per Election for Office Sought	18486.43	Disbursement For: 2010 Primary X General Other (specify)
Full Name (Last, First, Middle Initial) of Payee		
Mentzer Media		Date
Mailing Address		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
600 Fairmount Ave. Suite 306		Amount
City State	e Zip Code	443296.00
Towson MD	21286	
Purpose of Expenditure	Category/	Office Sought: X House State: NY
TV Media Placement	Туре	House Senate
Name of Federal Candidate Supported or Opposed by Expen-	diture:	President District: 24
Michael Arcuri		Check One: Support X Oppose
Calendar Year-To-Date Per Election		Disbursement For: Primary X General
for Office Sought	.00	2010 Cother (specify)
Full Name (Last, First, Middle Initial) of Payee		Date
McCarthy Marcus Hennings, LTD		0 9 1 7 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1850 M St. NW		Amount
Suite 235	7 in Code	23033.75
City State Washington DC	e Zip Code 20036	
Purpose of Expenditure	Category/	Office Sought: X House State: NC
TV Media Production	Туре	House
Name of Federal Candidate Supported or Opposed by Expen-	diture:	President District: 08
Larry Kissell		Check One: Support X Oppose
Calendar Year-To-Date Per Election		Disbursement For: Primary X General
for Office Sought	23033.75	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		484816.18
(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)

<b>AMERICANS</b>	FOR JOB	SECURITY

Full Name (Last, First, Middle Initial) of Payee				Date
Mentzer Media				M M / D D / Y Y Y
Mailing Address 600 Fairmount Ave. Suite 306				Amount
City	State	Zip Code		526115.00
Towson	MD	21286		
Purpose of Expenditure		Category/	Of	fice Sought: X House State: NC
TV Media Placement		Type		House Senate District: 08
Name of Federal Candidate Supported or Oppose	ed by Expenditure:	•		President District: 00
Larry Kissell			Cł	neck One: Support X Oppose
Calendar Year-To-Date Per Election for Office Sought		526115.00	1 I_	Sbursement For: Primary X General Other (specify)
Full Name (Last, First, Middle Initial) of Payee				Date
McCarthy Marcus Hennings, LTD				M M / D D / Y Y Y
Mailing Address 1850 M St. NW Suite 235				Amount
City	State	Zip Code		23733.75
Washington	DC	20036		
Purpose of Expenditure		Category/	Of	fice Sought: X House State: NC
TV Media Production		Туре		House Senate District: 11
Name of Federal Candidate Supported or Oppose Heath Shuler	ed by Expenditure:			President
Treath Shuler				neck One: Support X Oppose
Calendar Year-To-Date Per Election for Office Sought		23733.75	1 I_	Sbursement For: Primary X General Other (specify)
Full Name (Last, First, Middle Initial) of Payee			I	Date
Mentzer Media				
Mailing Address 600 Fairmount Ave.				M M M / D D / Y Y Y Y Y Y Y Amount
Suite 306				712055.00
City Towson	State MD	Zip Code 21286		
Purpose of Expenditure		Category/	Of	fice Sought: X House State: NC
TV Media Placement		Туре		House Senate District: 11
Name of Federal Candidate Supported or Oppose Heath Shuler	ed by Expenditure:		Cł	neck One: Support X Oppose
Calendar Year-To-Date Per Election			Dis	sbursement For: Primary X General
for Office Sought		712055.00		Other (specify)
(a) SUBTOTAL of Itemized Independent Expendit	ures			1261903.75
(b) SUBTOTALof Unitemized Independent Exper	ditures			
(c) TOTAL Independent Expenditures (carry total from last page forward to L				1746719.93