

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 Republican Jewish Coalition		3. FEC Identification Number C C90012063
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 50 F Street NW		
(c) City, State and ZIP Code Washington DC 20001		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Individual filers only	Name of Employer	Occupation

4. TYPE OF REPORT (check appropriate boxes):

(a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year-End Report

24-Hour Report
 48-Hour Report

b) Is this Report an amendment? Yes No

5. COVERING PERIOD: FROM

M M / D D / Y Y Y Y Y Y 07 / 01 / 2011	/	M M / D D / Y Y Y Y Y Y 09 / 30 / 2011
THROUGH		

6. TOTAL CONTRIBUTIONS 0.00

7. TOTAL INDEPENDENT EXPENDITURES 24227.70

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any 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
Matt Brooks	<i>Matt Brooks</i>	10/14/2011

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)
Republican Jewish Coalition

Full Name (Last, First, Middle Initial) of Payee
Jamestown Associates

Mailing Address
5 Mapleton Road
Suite 300

City State Zip Code
Princeton NJ 08540

Date
MM / DD / YYYY
09 / 08 / 2011

Amount
24227.70

Transaction ID : F57.4109

Purpose of Expenditure
Direct Mail Creative and Postage

Category/Type
004

Name of Federal Candidate Supported or Opposed by Expenditure:
David Weprin

Office Sought: House State: NY
 Senate District: 09
 President

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
24227.70

Disbursement For: Primary General
2011 Other (specify) Special-General

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

Mailing Address

City State Zip Code

Date
MM / DD / YYYY

Amount

Purpose of Expenditure

Category/Type

Name of Federal Candidate Supported or Opposed by Expenditure:

Office Sought: House State: _____
 Senate District: _____
 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

Mailing Address

City State Zip Code

Date
MM / DD / YYYY

Amount

Purpose of Expenditure

Category/Type

Name of Federal Candidate Supported or Opposed by Expenditure:

Office Sought: House State: _____
 Senate District: _____
 President

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)

24227.70

24227.70