

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 C 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. Corporate filers only | Is the filer a qualified nonprofit corporation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| Individual filers only | 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 / /

THROUGH

/ /

6. TOTAL CONTRIBUTIONS

7. TOTAL INDEPENDENT EXPENDITURES.....

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

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
Amsala Alemu-Johnson

Date

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

Mailing Address
4888 Billman Ave

Amount

62.83

City State Zip Code
Las Vegas NV 89121

Purpose of Expenditure
Salary and benefits

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
HARRY REID

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
Becky Capehart

Date

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

Mailing Address
5100 Wild Marigold

Amount

88.26

City State Zip Code
Las Vegas NV 89130

Purpose of Expenditure
Salary and benefits

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
HARRY REID

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
Jim Delsant

Date

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

Mailing Address
4775 Topaz St.
#239

Amount

62.83

City State Zip Code
Las Vegas NV 89121

Purpose of Expenditure
Salary and benefits

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
HARRY REID

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

213.92

(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
Patrick Dillon

Date

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

Mailing Address
3850 S. Mountain Vista Dr. #151

Amount

62.83

City State Zip Code
Las Vegas NV 89121

Purpose of Expenditure
Salary and benefits

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
HARRY REID

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 188.49

Disbursement For: Primary General
2010
 Other (specify) _____

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

Date

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

Mailing Address
5011 S. Swenson
#23A

Amount

67.65

City State Zip Code
Las Vegas NV 89119

Purpose of Expenditure
Salary and benefits

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
HARRY REID

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 405.90

Disbursement For: Primary General
2010
 Other (specify) _____

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

Date

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

Mailing Address
501 E. Lake Mead Parkway #2314

Amount

62.83

City State Zip Code
Henderson NV 89015

Purpose of Expenditure
Salary and benefits

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
HARRY REID

Check One: Support Oppose

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

Disbursement For: Primary General
2010
 Other (specify) _____

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

193.31

(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
Kelsey Moilanen

Date

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

Mailing Address
11606 Elcadore St.

Amount

62.83

City State Zip Code
Las Vegas NV 89183

Purpose of Expenditure
Salary and benefits

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
HARRY REID

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
Amberly Purvis

Date

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

Mailing Address
324 Manti Place

Amount

88.26

City State Zip Code
Henderson NV 89014

Purpose of Expenditure
Salary and benefits

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
HARRY REID

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
Erica Rojas-Cimental

Date

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

Mailing Address
4724 Dennis Way

Amount

88.26

City State Zip Code
Las Vegas NV 89121

Purpose of Expenditure
Salary and benefits

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
HARRY REID

Check One: Support Oppose

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

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
Sedric Sawyer

Date

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

Mailing Address
1421 N. Jones

Amount

62.83

City State Zip Code
Las Vegas NV 89108

Purpose of Expenditure
Salary and benefits

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
HARRY REID

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
Melissa Stiehler

Date

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

Mailing Address
2451 N. Rainbow
#1109

Amount

88.26

City State Zip Code
Las Vegas NV 89018

Purpose of Expenditure
Salary and benefits

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
HARRY REID

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
Thrifty

Date

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

Mailing Address
7135 Gillespie St.

Amount

34.77

City State Zip Code
Las Vegas NV 89119

Purpose of Expenditure
Rental car

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
HARRY REID

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 963.52

Disbursement For: Primary General
2010
 Other (specify) _____

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

185.86

(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
09 / 10 / 2010

Mailing Address
7135 Gillespie St.

Amount

31.47

City State Zip Code
Las Vegas NV 89119

Purpose of Expenditure
Rental car

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
HARRY REID

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 994.99

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
7135 Gillespie St.

Amount

31.47

City State Zip Code
Las Vegas NV 89119

Purpose of Expenditure
Rental car

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
HARRY REID

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 1026.46

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
7135 Gillespie St.

Amount

29.19

City State Zip Code
Las Vegas NV 89119

Purpose of Expenditure
Rental car

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
HARRY REID

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 1055.65

Disbursement For: Primary General
2010
 Other (specify) _____

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

92.13

(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
William Todd

Date

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

Mailing Address
1801 Bearden Ave

Amount

90.89

City State Zip Code
Henderson NV 89011

Purpose of Expenditure
Salary and benefits

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
HARRY REID

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 545.34

Disbursement For: Primary General
2010
 Other (specify) _____

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

Date

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

Mailing Address
997 Prestige Meadows Place

Amount

62.83

City State Zip Code
Henderson NV 89052

Purpose of Expenditure
Salary and benefits

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
HARRY REID

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
Marlon Washington

Date

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

Mailing Address
1801 Bearden Ave

Amount

112.34

City State Zip Code
Henderson NV 89011

Purpose of Expenditure
Salary and benefits

Category/
Type

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

Name of Federal Candidate Supported or Opposed by Expenditure:
HARRY REID

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 674.04

Disbursement For: Primary General
2010
 Other (specify) _____

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

266.06

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

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

1190.63