

# 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 ADVANCING WISCONSIN INC		3. FEC Identification Number <b>C</b> C90010604
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported PO BOX 1465		
(c) City, State and ZIP Code MADISON WI 53701		
2. <b>Corporate filers only</b> Is the filer a qualified nonprofit corporation? <input type="checkbox"/> Yes <input checked="" 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
1	0

 / 

D	D
0	4

 / 

Y	Y	Y	Y
2	0	1	0

THROUGH

M	M
1	0

 / 

D	D
0	4

 / 

Y	Y	Y	Y
2	0	1	0

6. TOTAL CONTRIBUTIONS ..... 

.00
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7. TOTAL INDEPENDENT EXPENDITURES..... 

532.82
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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
Gretchen Vollrath-Sharkey	_____	10/07/2010

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)

ADVANCING WISCONSIN INC

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

Date

M M / D D / Y Y Y Y  
1 0 / 0 4 / 2 0 1 0

Mailing Address  
3665 Priority Way S Dr

Amount

455.00

City State Zip Code  
Indianapolis IN 46420

Purpose of Expenditure  
canvassing

Category/  
Type

Office Sought:  House State: WI  
 Senate District: 07  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Julie Lassa

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1755.00

Disbursement For:  Primary  General  
2010  
 Other (specify)

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

Date

M M / D D / Y Y Y Y  
1 0 / 0 4 / 2 0 1 0

Mailing Address  
3665 Priority Way S Dr

Amount

24.00

City State Zip Code  
Indianapolis IN 46420

Purpose of Expenditure  
phone bank payroll

Category/  
Type

Office Sought:  House State: WI  
 Senate District: 07  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Julie Lassa

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 24.00

Disbursement For:  Primary  General  
2010  
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
The Campaign Workshop

Date

M M / D D / Y Y Y Y  
1 0 / 0 4 / 2 0 1 0

Mailing Address  
1129 20th St NW  
Ste 200

Amount

4.38

City State Zip Code  
Washington DC 20036

Purpose of Expenditure  
postcards

Category/  
Type

Office Sought:  House State: WI  
 Senate District: 07  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Julie Lassa

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 15.30

Disbursement For:  Primary  General  
2010  
 Other (specify)

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

483.38

(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)

ADVANCING WISCONSIN INC

Full Name (Last, First, Middle Initial) of Payee  
United States Postal Service

Date

M M / D D / Y Y Y Y  
1 0 / 0 4 / 2 0 1 0

Mailing Address  
215 Martin Luther King Jr Blvd  
Rm 101

Amount

20.44

City State Zip Code  
Madison WI 53703

Purpose of Expenditure  
postage

Category/  
Type

Office Sought:  House State: WI  
House  Senate District: 07  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Julie Lassa

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 71.40

Disbursement For:  Primary  General  
2010  
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
Service Employees International Union

Date

M M / D D / Y Y Y Y  
1 0 / 0 4 / 2 0 1 0

Mailing Address  
600 W Virginia Ave  
Ste 202

Amount

29.00

City State Zip Code  
Milwaukee WI 53204

Purpose of Expenditure  
phone bank

Category/  
Type

Office Sought:  House State: WI  
House  Senate District: 07  
 President

Name of Federal Candidate Supported or Opposed by Expenditure:  
Julie Lassa

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 29.00

Disbursement For:  Primary  General  
2010  
 Other (specify)

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

49.44

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

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

532.82